FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 19 00068491 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Tom NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Glass CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 720 MAILING Amount Receipt # **ADDRESS** Change of Address McDade, TX 78650-0720 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Paul NAME NICKNAME LAST **SUFFIX** Johnson STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 130 Marcus Rd. **ADDRESS** (Residence or Business) McDade, TX 78650 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 698-6827 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer

July 15

Day

Day

03/05/2024

OFFICE HELD (if any)

ELECTION DATE

02/25/2024

Year

Year

Х

Month

Month

PERIOD

10 ELECTION

11 OFFICE

COVERED

8th day before election

THROUGH

χ Primary

General

Exceeded modified

Month

ELECTION TYPE

Runoff

Special

Day

06/30/2024

12 OFFICE SOUGHT (if known)

State Representative District 17

Year

Other

reporting limit

appointment (officeholder only) Final Report (Attach C/OH-FR)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 19

13 C / OH NAME	Glass, Tom (Mr.)		14 Filer ID (00068491	(Ethics Commis	ssion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without to officeholders are required to report this information	he candidate's or office	eholder's knowl	ledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED DOLITICAL CONTRIBUTIONS (OTHER THAN	NI DI EDGES I OANS		
TOTALS	OR GUARANTE	IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	7,598.44
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	0.00	
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	6,009.70
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$	2,921.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$	15,000.00
17 AFFIDAVIT					
		l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		M	Ir. Tom Glass		
		Signature of	Candidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subso	cribed before me, by the s	aid	, this the		day
		ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering	oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 19 **18** FILER NAME 19 Filer ID (Ethics Commission Filers) 00068491 Glass, Tom (Mr.) **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 7,598.44 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 6,009.70 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	MONET	ARY POLITICAL CON	SCHEDULE A1				
	The Instru	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 4/19	
2	FILER NAME Glass, Tom ((Mr.)			3	Filer ID (Ethics Commission 00068491	n Filers)
4	Date 03/16/2024	5 Full name of contributor of Adema, Marcia6 Contributor address; City; State; Z)	7	Amount of Contribution (\$)	\$50.00
_		Santee, CA 92072	1-				
8	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
	Date 06/18/2024	Full name of contributor of cunningham, Robert Contributor address; City; State; Z	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Dringing Loggy	Cedar Creek, TX 78612		Employer (Coo Instructions			
	Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/15/2024 Cunningham, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Cedar Creek, TX 78612					
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self)		
Date Full name of contributor out-of-state PAC (ID#:) 05/18/2024 Cunningham, Robert Contributor address; City; State; Zip Code Cedar Creek, TX 78612			Amount of Contribution (\$)	\$100.00			
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self)		
	Date 05/15/2024	Full name of contributor of Cunningham, Robert Contributor address; City; State; Z	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self)		
			,				

	MONET	ARY POLITICAL CONTI	SCHEDULE A1				
	The Instru	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 2/8 Rpt: 5/19	
2	FILER NAME Glass, Tom	Mr.)			3	Filer ID (Ethics Commission 00068491	n Filers)
4	Date 04/18/2024	Cunningham, Robert	state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
_	Delicalis al acces	Cedar Creek, TX 78612	la la	Faradaya (Osadasatisas	<u></u>		
8	Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 04/15/2024	Full name of contributor out-of- Cunningham, Robert Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Cedar Creek, TX 78612	•				
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/18/2024 Cunningham, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Cedar Creek, TX 78612					
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Cunningham, Robert Contributor address; City; State; Zip Code Cedar Creek, TX 78612			Amount of Contribution (\$)	\$100.00			
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 04/12/2024	Devine, Gaylyn	state PAC (ID#:)		Amount of Contribution (\$)	\$18.36
	Principal occu Entrepreneu	pation / Job title (See Instructions)		Employer (See Instructions DeVine Promotions	5)		
			'				

	MONET	ARY POLITICAL CONTRIBU	IS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 3/8 Rpt: 6/19	
2	FILER NAME Glass, Tom (Mr.)			3	Filer ID (Ethics Commission 00068491	on Filers)
4	Date 04/03/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	ام	Employer (See Instructions	;) 		
Ŭ	Entrepreneu			DeVine Promotions	,,		
	Date 03/12/2024	Full name of contributor out-of-state PAC Devine, Gaylyn Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$18.36
		Pearland, TX 77581					
	Principal occu Entrepreneu	pation / Job title (See Instructions)		Employer (See Instructions DeVine Promotions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/03/2024 Devine, Gaylyn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Entrepreneu			DeVine Promotions	,,		
Date Full name of contributor out-of-state PAC (ID#:) 03/04/2024 Druck, Harold Contributor address; City; State; Zip Code Smithville, TX 78957		,		Amount of Contribution (\$)	\$400.00		
	Principal occu Builder / Dev	oation / Job title (See Instructions) eloper		Employer (See Instructions Self	<u>(</u> 5)		
	Date 02/27/2024	Full name of contributor out-of-state PAC Ekstrom, Christopher Contributor address; City; State; Zip Code Coral Springs, FL 33072	(ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Ekstrom Properties	5)		
				2			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 7/19
2	FILER NAME Glass, Tom (Mr.)			3	Filer ID (Ethics Commission Filers) 00068491
4	Date 02/27/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$2,500.00
_	Deire sin al access	Coral Springs, FL 33072	_	Faralassa (Osas lastrosticas	<u></u>	
8	Principal occu President	pation / Job title (See Instructions)	9	Employer (See Instructions Ekstrom Properties	5)	
	Date 02/28/2024	Full name of contributor out-of-state PAC (ID#:_Forrest, Jeannie Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$75.00
	Dringing! goog	Dallas, TX 75231		Employer (See Instructions	<u></u>	
	bookkeeper	pation / Job title (See Instructions)		Employer (See Instructions Self-employed	5)	
Date Full name of contributor out-of-state PAC (ID#:) 06/20/2024 Guidry, Paul Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$25.00			
		Cuero, TX 77954				
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)	
Date Full name of contributor out-of-state PAC (ID#:) 05/20/2024 Guidry, Paul Contributor address; City; State; Zip Code Cuero, TX 77954				Amount of Contribution (\$) \$25.00		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>I</u> 5)	
	Date 04/20/2024	Full name of contributor out-of-state PAC (ID#:_ Guidry, Paul Contributor address; City; State; Zip Code Cuero, TX 77954)		Amount of Contribution (\$) \$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)	

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 8/19		
2	FILER NAME Glass, Tom			3	Filer ID (Ethics Commission 00068491	ı Filers)	
4	Date 03/20/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00	
_	<u> </u>	Cuero, TX 77954					
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions) Retired)			
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2024 Gunnels, Patrick Contributor address; City; State; Zip Code Houston, TX 77069				Amount of Contribution (\$)	\$50.00	
	Principal occu	Houston, TX 77069 pation / Job title (See Instructions)	Employer (See Instructions)			
	CEO	, , , , , , , , , , , , , , , , , , , ,	Threadfest LLC	,			
	Date Full name of contributor out-of-state PAC (ID#:) 05/31/2024 Gunnels, Patrick Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		Houston, TX 77069					
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Threadfest LLC)			
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Gunnels, Patrick Contributor address; City; State; Zip Code Houston, TX 77069)		Amount of Contribution (\$)	\$50.00	
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Threadfest LLC)			
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Gunnels, Patrick Contributor address; City; State; Zip Code Houston, TX 77069			Amount of Contribution (\$)	\$50.00	
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Threadfest LLC)			

	MONET	ARY POLITICAL C	SCHEDULE A1				
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 9/19	
2	FILER NAME Glass, Tom ((Mr.)			3	Filer ID (Ethics Commission 00068491	n Filers)
4	Date 02/29/2024	5 Full name of contributor Gunnels, Patrick6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
_	5	Houston, TX 77069	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	5 1 (0 1 1 1	_		
8	CEO	pation / Job title (See Instructions	9	Employer (See Instructions Threadfest LLC	5)		
	Date 03/04/2024	Contributor address; City; State; Zip Code Cedar Creek, TX 78612			•	Amount of Contribution (\$)	\$250.00
	Principal occu	Cedar Creek, TX 78612 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	retired	(,	retired	,		
Date Full name of contributor out-of-state PAC (ID#:) 02/27/2024 Lawrence, Ward Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$50.00			
		Garrison, TX 75946					
	Principal occu Retired	pation / Job title (See Instructions		Employer (See Instructions Retired	5)		
Date Full name of contributor out-of-state PAC (ID#:) 02/28/2024 Maddux, Michael Contributor address; City; State; Zip Code San Marcos, TX 78666		•	Amount of Contribution (\$)	\$100.00			
	Principal occu It	pation / Job title (See Instructions		Employer (See Instructions City of san marcos	5)		
	Date 02/27/2024	Full name of contributor NE Tarrant Tea Party PAC Contributor address; City; St. Grapevine, TX 76051			•	Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONT	SCHEDULE A1				
	The Instruc	ction Guide explains how to con	nplete this forr	n.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 10/19	
2	FILER NAME Glass, Tom (Mr.)			3	Filer ID (Ethics Commission 00068491	Filers)
4	Date 03/29/2024	 5 Full name of contributor out-of out-of)	7	Amount of Contribution (\$)	\$25.00
0	Dringing aggr	Bastrop, TX 78602	lo.	Employer (See Instructions	<u>,,</u>		
8	Nurse (Ret.)	pation / Job title (See Instructions)	9	Employer (See Instructions N/A	5)		
	Date 03/29/2024	Full name of contributor out-of Richard, James Contributor address; City; State; Zip C	-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
		Bastrop, TX 78602					
	Principal occu Nurse (Ret.)	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)		
Date Full name of contributor out-of-state PAC (ID#:) 02/29/2024 Richard, James Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00		
		Bastrop, TX 78602					
	Principal occu Nurse (Ret.)	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)		
Date 02/28/2024 Full name of contributor out-of-state PAC (ID#:) Richard, James Contributor address; City; State; Zip Code Bastrop, TX 78602			Amount of Contribution (\$)	\$25.00			
	Principal occu Nurse (Ret.)	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> S)		
	Date 04/04/2024	Roberts, Ken	-state PAC (ID#:			Amount of Contribution (\$)	\$18.36
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/8 Rpt: 11/19	
2	FILER NAME Glass, Tom			3	Filer ID (Ethics Commission 00068491	า Filers)
4	Date 03/04/2024	 Full name of contributor out-of-state PAC (ID#:_Roberts, Ken Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$18.36
		Caldwell, TX 77836		Ĺ		
8	Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired	S)		
	Date 03/30/2024	Full name of contributor out-of-state PAC (ID#:_ Wareham, Terry Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$25.00
		Smithville, TX 78956				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Self employed	s)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_ Wareham, Terry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Smithville, TX 78956 upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Retired	,	Self employed			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Service		-	ontract Labor e this form.	OTHER (enter a	strict a category not listed above)
1	Total pages Cabadula F1:		•	•		Filer ID	(Ethias Commission Filers)
_	Total pages Schedule F1: Sch: 1/8 Rpt: 12/19	Glass, Tom (Mr.)			3	00068491	(Ethics Commission Filers)
4	Date	Payee name			•		
	02/26/2024	Bryan Broadcasting	Corp				
6	Amount (\$) \$816.00	Payee address; Cit2700 Earl Rudder Fw	•	ode			
		Ste 5000					
		College Station, TX 7	77845				
8	PURPOSE OF	(a) Category (See Categories		(b) D	Description Check if travel out	itside of Texas. Con	nplete Schedule T.
	EXPENDITURE	Advertising Expense			d	TX, officeholder livin	•
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder n	ame Office so	ught		Office h	eld
	Date	Payee name					
	02/27/2024	Film Alley					
	Amount (\$)	Payee address; Cit	y; State; Zip C	ode			
	\$378.75	1600 Chestnut St					
		Bastrop, TX 78602		1			
	PURPOSE OF	(a) Category (See Categories	listed at the top of this schedule)	(p) D	Description Check if travel out	itside of Texas. Con	nnlete Schedule T
	EXPENDITURE	Event Expense		⊨	⊒	X, officeholder livin	
				E	lection Watch	n Event	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder n	ame Office so	ught		Office h	eld
	Date	Payee name					
	03/04/2024	Mailchimp					
	Amount (\$)	Payee address; Cit	y; State; Zip C	ode			
	\$13.70	675 Ponce de Leon A	Ave NE				
		Ste 5000					
		Atlanta, GA 30308					
	PURPOSE	(a) Category (See Categories	listed at the top of this schedule)	(b) D	Description		
	OF EXPENDITURE	Advertising Expense		[_	tside of Texas. Con	
					_] ^{Check if Austin, T.} Email service	X, officeholder livin	g expense
					indii selvice		
	Complete ONLY if direct	Candidate/Officeholder n	ame Office so	ught		Office h	eld
	expenditure to benefit C/OI						
Ec:	rms provided by Tevas E	nios Commission	www ethics state ty	110			Version V// 1.0 d379aha0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries/\	xpense Vages/C	Contract Labor e this form.		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1: Sch: 2/8 Rpt: 13/19	2 FILER NAMI Glass, Tom						Filer ID 00068491	(Ethics Commission Filers)
4	·		• •						
4	Date 04/03/2024	5 Payee name Mailchimp	· 						
6	Amount (\$) \$13.70	7 Payee addre 675 Ponce Ste 5000 Atlanta, GA	de Leon Ave NE	State; Zip Co	ode				
8	PURPOSE OF EXPENDITURE	(a) Category (S Advertising	iee Categories listed at the top Expense	o of this schedule)		=	TX,	le of Texas. Compofficeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		iceholder name	Office sou	ıght			Office he	eld
	Date	Payee name							
	05/03/2024	Mailchimp							
	Amount (\$) \$13.70	Payee addre 675 Ponce Ste 5000 Atlanta, GA	de Leon Ave NE	State; Zip Co	ode				
	PURPOSE OF EXPENDITURE	(a) Category (S Advertising	iee Categories listed at the top Expense	o of this schedule)		-	TX,	le of Texas. Compofficeholder living	
	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office sou	ight			Office he	ld
	Date	Payee name							
	06/03/2024	Mailchimp					_		
	Amount (\$) \$27.40	Payee addre 675 Ponce Ste 5000 Atlanta, GA	de Leon Ave NE	State; Zip Co	ode				
	PURPOSE OF EXPENDITURE	(a) Category (s Advertising	iee Categories listed at the top Expense	o of this schedule)			TX,	le of Texas. Composition	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		iceholder name	Office sou	ight			Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/8 Rpt: 14/19	Glass, Tom (Mr.) 00068491
4	Date	5 Payee name
	03/11/2024	Nationbuilder
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$69.00	520 S. Grand Ave
		2nd Floor
		Los Angeles, CA 90071
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Web hosting
Ļ	Complete ONLY if direct	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/11/2024	Nationbuilder
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.00	520 S. Grand Ave
		2nd Floor
		Los Angeles, CA 90071
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Web hosting
		Web Hooting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	05/13/2024	Nationbuilder
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.00	520 S. Grand Ave
	Ψ03.00	2nd Floor
		Los Angeles, CA 90071
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Web hosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 4/8 Rpt: 15/19	Glass, Tom (Mr.) 00068491					
4	Date	5 Payee name					
	06/11/2024	Nationbuilder					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$69.00	520 S. Grand Ave					
		2nd Floor					
		Los Angeles, CA 90071					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Web hosting					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	03/04/2024	Neel and Partners					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2,500.00	1232 Cavender Dr					
		116					
		Hurst, TX 76053					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Facebook ads					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	Date	Payee name					
	03/05/2024	Neel and Partners					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$924.00	1232 Cavender Dr					
		116					
		Hurst, TX 76053					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Toyas, Complete Schedule Toyas, Comp					
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Texting					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OH							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	rs)
	Sch: 5/8 Rpt: 16/19	Glass, Tom (Mr.) 00068491	
4	Date	5 Payee name	
	02/29/2024	Prosperity Bank	
6	Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 499 Hwy 71 W Bastrop, TX 78602	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/31/2024	Prosperity Bank	
	Amount (\$) \$10.00	Payee address; City; State; Zip Code 499 Hwy 71 W	
		Bastrop, TX 78602	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank fee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
L	04/30/2024	Prosperity Bank	
	Amount (\$) \$10.00	Payee address; City; State; Zip Code 499 Hwy 71 W	
		Bastrop, TX 78602	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank fee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Conditary/Officebulder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/8 Rpt: 17/19	Glass, Tom (Mr.) 00068491
4	Date	5 Payee name
	05/31/2024	Prosperity Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	499 Hwy 71 W
		Bastrop, TX 78602
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/30/2024	Prosperity Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	499 Hwy 71 W
	Ψ10.00	400 TINY 12 W
		Bastrop, TX 78602
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Bank fee
		Bankie
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	06/30/2024	Stripe
	Amount (\$)	Payee address; City; State; Zip Code
	\$152.90	3180 18th St
	Ψ10Z.30	
		San Francisco, CA 94110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	-	Card processing fees
		Card processing rees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

l	Credit Card Payment	The Instruction Guide explains how to o	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 7/8 Rpt: 18/19	Glass, Tom (Mr.)		00068491
4	Date	5 Payee name		<u> </u>
	03/04/2024	TCOM Enterprises LLC		
6	Amount (\$)	7 Payee address; City; State; Zip C	Code	
l	\$802.50	PO Box 547		
l				
		Lexington, TX 78947		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Newspaper ads
				Newspaper aus
9	Complete ONLY if direct	Candidate/Officeholder name Office so	hiaht	Office held
ľ	expenditure to benefit C/OI		Jugini	Cince Hold
H	Date	Payee name		
l	02/26/2024	freeconferencecall.com		
┝	Amount (\$)	Payee address; City; State; Zip C	`ode	
l	\$8.21	4300 E Pacific Coast Hwy	Joue	
l	Ψ0.21	4500 ET delile CodstTiwy		
		Long Beach, CA 90804		
┡	DUDDOCE		(1-)	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Teleconference Service	(a)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	releconierence Service		Check if Austin, TX, officeholder living expense
				Team teleconference
L				
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought	Office held
L	experialitire to benefit C/Oi	1		
l	Date	Payee name		
	03/26/2024	freeconferencecall.com		
l	Amount (\$)	Payee address; City; State; Zip C	Code	
l	\$8.21	4300 E Pacific Coast Hwy		
l				
l		Long Beach, CA 90804		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Teleconference service		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l				Team teleconference
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI		-	
H				

SCHEDULE F1

Advertising Expense Ev Accounting/Banking Fe Consulting Expense Fo Contributions/ Donations Made By - Gi Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comp	plete this f	orm.			
1	Total pages Schedule F1:	2 FILER NAME		3 Filer	ID	(Ethics Commission Filers)	_
	Sch: 8/8 Rpt: 19/19	Glass, Tom (Mr.)		0006	8491		
4	Date	5 Payee name		•			
	04/26/2024	freeconferencecall.com					
6	Amount (\$)	7 Payee address; City; State; Zip Code	е				
	\$8.21	4300 E Pacific Coast Hwy					
		Long Beach, CA 90804					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	o) Descri	ption			_
	OF EXPENDITURE	Teleconference service		ck if travel outside of Te			
				ck if Austin, TX, officeh teleconference		g expense	
l			ream	teleconnerence			
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt		Office he	eld	_
١	expenditure to benefit C/OI			`	Jilioc III	Ciu	
⊨	Date	Davida nama					=
	05/28/2024	Payee name freeconferencecall.com					
⊢	Amount (\$)	Payee address; City; State; Zip Code	2				
	\$8.21	4300 E Pacific Coast Hwy	5				
	Ψ0.21	4300 L Facilic Coast Tiwy					
l		Long Roach CA 00904					
L	2112222	Long Beach, CA 90804					_
l	PURPOSE OF	2 (Descrip Cher	ption ck if travel outside of Te	exas Com	nnlete Schedule T	
l	EXPENDITURE	Teleconference service		ck if Austin, TX, officeh			
			Team	teleconference			
L							
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	(Office h	eld	
L	expenditure to benefit C/OI	1					
	Date	Payee name					
	06/26/2024	freeconferencecall.com					
	Amount (\$)	Payee address; City; State; Zip Code	е				
	\$8.21	4300 E Pacific Coast Hwy					
		Long Beach, CA 90804					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (k	b) Descrip	ption			
	OF EXPENDITURE	Teleconference service		ck if travel outside of Te			
				ck if Austin, TX, officeh teleconference		g expense	
			ream	COCOMICICIO			
-	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	(Office he	eld	_
	expenditure to benefit C/OI	•		`			
							_