### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruc	tion Guide explains how to con	nplete this form.	1 Filer ID (Ethics Commi 00088296		2 Total pages	filed: 19
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDI	ER	Jace R.				
NAME					Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2024	
		Yarbrough				
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #: CI	TY:	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLD		,	,	0001		
MAILING ADDRESS					Receipt #	Amount
Change of Add	ress Sanger, TX 76266				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME		William				
NAME						
	NICKNAME	LAST		SUFFIX		
		McNutt				
		Wervett				
C CAMPAICN			4.0			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO	PO BOX PLEASE);	AP	T / SUITE #; CITY;	51	ATE; ZIP CODE
ADDRESS	13101 Preston Road					
(Residence or Busin	less)					
,	Dallas, TX 75240					
7 CAMPAIGN TREASURER		ONE NUMBER	EXTENSION			
PHONE	(469) 533-5025					
8 REPORT TYPE				- "	7	
	January 15	30th day befor	re election	Runoff	appointment (of	ampaign treasurer ficeholder only)
	X July 15	8th day before	election	Exceeded modified	Final Report (At	tach C/OH-FR)
				reporting limit	]	
9 PERIOD	Month Day Yea	ar		Month Day	Year	
COVERED	05/19/2024		HROUGH	06/30/2024		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea		Primary	X Runoff	Other	
	05/28/2024					
			General	Special		
				-		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
				State Senator Dis	strict 30	
	I			1		
		~~~	TO PAGE 2			
Forms provided b	y Texas Ethics Commission	www.e	thics.state.tx.u	S	Vers	ion V4.1.0.d378aba0

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

#### FORM C/OH COVER SHEET PG 2 2 of 19

13 C / OH NAME	Yarbrough, Jace R.		14 Filer ID (E 00088296	thics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditur These expenditures may have been made without the officeholders are required to report this information	he candidate's or officeh	older's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 50.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	)	<b>\$</b> 29,113.72
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		<b>\$</b> 220.47
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 83,649.03
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	<b>\$</b> 1,204.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ( TING PERIOD	OF THE LAST DAY	<b>\$</b> 204,000.00
17 AFFIDAVIT	-			-
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.		
		Jac	e R. Yarbrough	
			Candidate or Officehold	er
AFFIX NOT	ARY STAMP / SEAL ABO	DVE		
Sworn to and subso	ribed before me, by the se	aid	this the	day
		ertify which, witness my hand and seal of office.	, and and	uuy
Signature of offic	er administering	Printed name of officer administering	Title of officer a	administering oath
Forms provided by Tex	as Ethics Commission	www.ethics.state.tx.us	V	ersion V4.1.0.d378aba0

SI	JBT	OTALS - C/OH	C	OVEF	FORM C/OH R SHEET PG 3 3 of 19
<b>18</b> FILI Yaı		ME h, Jace R.	19 Filer ID 00088296	(Ethic	s Commission Filers)
		E SUBTOTALS SCHEDULE		S	SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	20,582.92
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	8,530.80
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	Х	SCHEDULE E: LOANS		\$	4,000.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	83,649.03
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	The Instru	ction Guide explains how to complete t	this fo	orm.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/19	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Yarbrough, J	Jace R				00088296	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:_	)	7	Amount of Contribution (\$)	
	05/21/2024	Adams, Carol				2	\$10,000.00
	ļ	6 Contributor address; City; State; Zip Code					
	ļ						
	1						
	Driverine Leasu	Frisco, TX 75034			Ĺ		
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Oil, Gas & A			Self Employed	-		
	Date	Full name of contributor out-of-state PAC	C (ID#:_	)		Amount of Contribution (\$)	
	05/26/2024	Ball, William					\$500.00
	ļ	Contributor address; City; State; Zip Code					
	ļ						
	ļ						
		Austin, TX 78745					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	self-employe	.d		Assembly			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:_	)		Amount of Contribution (\$)	
	05/26/2024	Ball, William					\$2,000.00
	ļ	Contributor address; City; State; Zip Code					
	ļ						
	ļ						
		Austin, TX 78745					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	self-employe	.d		Assembly			
	Date	Full name of contributor out-of-state PAC	C (ID#:_	)		Amount of Contribution (\$)	
	05/22/2024	Besse, Paul					\$52.40
	ļ	Contributor address; City; State; Zip Code					
	ļ						
	ļ						
	- · · ·	Cypress, TX 77433	,				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			Besse Management	-		
	Date	Full name of contributor out-of-state PAC	C (ID#:_	)		Amount of Contribution (\$)	
	05/20/2024	Brekke, Robert					\$26.35
	ļ	Contributor address; City; State; Zip Code					
	ļ						
	ļ						
		Gainesville, TX 76240					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	retired			retired			

	The Instru	ction Guide explains how to complete this f	iorm.		Total pages Schedule A1: Sch: 2/6 Rpt: 5/19	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Yarbrough, J	Jace R.			00088296	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/23/2024	Clark, Deborah				\$521.15
		6 Contributor address; City; State; Zip Code		"		
		Henrietta, TX 76365	1			
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Rancher		Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/28/2024	Costello, Steven				\$25.00
		Contributor address; City; State; Zip Code				
		Lake Jackson, TX 77566				
_	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
	attorney		Silberman Law Firm	3)		
		Full name of contributor out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (¢)	
	Date 05/27/2024	Cure, Richard	)		Amount of Contribution (\$)	\$25.00
	03/21/2024	Contributor address; City; State; Zip Code				Ψ20.00
		Contributor address, City, State, Zip Code				
		Sanger, TX 76266				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Farmer Rand	cher	Self			
	Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u> )		Amount of Contribution (\$)	
	05/24/2024	Cure, Richard				\$25.00
		Contributor address; City; State; Zip Code		1		
	- · · ·	Sanger, TX 76266		Ļ		
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Farmer Rand		Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷05 00
	05/22/2024	Cure, Richard				\$25.00
		Contributor address; City; State; Zip Code				
			ſ			
		Sanger, TX 76266	ſ			
⊢	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Farmer Rand		Self	5)		
⊢						

L						
	The Instrue	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/19	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Yarbrough, J	ace R.			00088296	
4	Date	5 Full name of contributor out-of-state PAC (IE	)	7	Amount of Contribution (\$)	
	05/19/2024	Davis, Nathan	/			\$500.00
		6 Contributor address; City; State; Zip Code				
		Bulverde, TX 78163				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Consultant		Self			
	Date	Full name of contributor out-of-state PAC (ID	) // )	Γ	Amount of Contribution (\$)	
	05/20/2024	Dickey, Maurine P.				\$1,000.00
		Dallas, TX 75205				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Board Memb	er	The Dickey Foundation			
⊨	Date	Full name of contributor out-of-state PAC (ID	)#:)	Γ	Amount of Contribution (\$)	
	05/22/2024	Hale, Lucas			(*)	\$104.48
		Contributor address; City; State; Zip Code				
		Bartlett, TN 38133				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		McDermott Will & Emer	у		
	Date	Full name of contributor out-of-state PAC (IE	)#:)		Amount of Contribution (\$)	
	05/21/2024	Iverson, David				\$50.00
		Contributor address; City; State; Zip Code				
		Little Elm, TX 75068				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	retired		retired			
	Date	Full name of contributor out-of-state PAC (IE	)#:)		Amount of Contribution (\$)	
	06/11/2024	Lamb, Phillip				\$104.48
		Contributor address; City; State; Zip Code				
		Plano, TX 75025				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Consultant		Self			
I						

SCHEDULE	A1
----------	----

The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 4/6 Rpt: 7/19	
2 FILER NAME			_	Filer ID (Ethics Commission	n Filers)
Yarbrough, J				00088296	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
05/21/2024	Luse, Sharon				\$26.35
	6 Contributor address; City; State; Zip Code		1		
	Pottsboro, TX 75076				
	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Coordinator		TCC-MVPN			
Date	Full name of contributor out-of-state PAC (ID#:	)	T .	Amount of Contribution (\$)	
05/24/2024	McClure, Alexander				\$26.35
	Contributor address; City; State; Zip Code		1		
	Sadler, TX 76264	1			
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Manager		JPMorgan Chase			
Date	Full name of contributor out-of-state PAC (ID#:	)	Ţ	Amount of Contribution (\$)	
05/21/2024	McFarlane, Michael				\$260.73
	Contributor address; City; State; Zip Code		]		
	Autory TV 76227				
Drizzinal apou	Aubrey, TX 76227		<u> </u>		
Principal occu Info Requesi	upation / Job title (See Instructions)	Employer (See Instructions Info Requested	3)		
			<del></del>		
Date	Full name of contributor out-of-state PAC (ID#:	)	'	Amount of Contribution (\$)	ቀርን ለባ
05/24/2024	McLendon, David				\$52.40
	Contributor address; City; State; Zip Code				
	Aledo, TX 76008				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Engineer		Self			
Date	Full name of contributor out-of-state PAC (ID#:	)	<u> </u>	Amount of Contribution (\$)	
05/23/2024	Mew, Peggy				\$52.40
	Contributor address; City; State; Zip Code		1		
	Wichita Falls, TX 76306				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
retired		retired			

	1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/19
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Yarbrough, Jace R.	00088296
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
05/29/2024 Miller, Charles	\$25.00
6 Contributor address; City; State; Zip Code	
Cypress, CA 90630	
<ul><li>8 Principal occupation / Job title (See Instructions)</li><li>9 Employer (See Instruction rotired</li></ul>	ons)
retired retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/26/2024 Oman, Connor	\$5,000.00
Contributor address; City; State; Zip Code	
Denver, CO 80211	
Principal occupation / Job title (See Instructions) Employer (See Instruction	(s)
Private Equity Sun Theory Holding C	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/27/2024 Potosky, Toba	\$52.40
Contributor address; City; State; Zip Code	
BROOKLYN, NY 11201-7807	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Sound Engineer Fox News Media	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/28/2024 Schott, Mary	\$10.73
Contributor address; City; State; Zip Code	
Indianapolis, IN 46227	
Principal occupation / Job title (See Instructions) Employer (See Instruction	
retired retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/27/2024 Stroud, Cathy	\$26.35
Contributor address; City; State; Zip Code	
Gainesville, TX 76240-6767	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
retired retired	

MONE	TARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
The Instru	uction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/19
2 FILER NAM		<b>3</b> Filer ID (Ethics Commission Filers) 00088296	
4 Date 05/20/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:</li> <li>Witt, Jeffrey</li> <li>Contributor address; City; State; Zip Code</li> <li>Niceville, FL 32578-4196</li> </ul>		7 Amount of Contribution (\$) \$26.35
8 Principal occ Consultant	cupation / Job title (See Instructions)	9 Employer (See Instructions McKinsey & Co.	s)
Date 05/19/2024	Full name of contributor       out-of-state PAC (ID#:         Zimmerman, Matthew       Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$15.00
	Green Bay, WI 54313		
Principal occ Production	cupation / Job title (See Instructions)	Employer (See Instructions AK Crust	s)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 10/19
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Yarbrough,	Jace R.		00088296
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description
06/06/2024	Bruce, Bob		contribution (\$) description \$8,117.501
	7 Contributor address; City; State; Zip Code		
	Boerne, TX 78006		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
Retired		Retired	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution
05/24/2024	Scott, Cody	/	contribution (\$) description
	Contributor address; City; State; Zip Code		\$413.30
	Aledo, TX 76008		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	· · · · ·
		Self employed	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

	LOANS				SCHEDULE E
	The Instructio		ges Schedule E: 1 Rpt: 11/19		
2	FILER NAME Yarbrough, Jace	<ol> <li>Filer ID</li> <li>000882</li> </ol>	(Ethics Commission Filers) 96		
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 06/18/2024	7 Name of lender Out-of-state PAR Yarbrough, Jace	C (ID#:	)	9 Loan Amount (\$) \$4,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Sanger, TX 76266			<b>11</b> Maturity Date
12	Principal occupation Attorney	on / Job title (See Instructions)	13 Employer (See Instructions Self	)	
14	Description of Coll	ateral	15 Check if personal funds we	re deposited	l into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address; City; State;	Zip Code		
20	Principal occupation	ท	21 Employer (See Instructions	)	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)					
	Sch: 1/8 Rpt: 12/19	Yarbrough, Jace R.	00088296					
4	Date 05/22/2024	5 Payee name Anedot, Inc.						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
\$23.90 1340 Poydras Street, Suite 1770 New Orleans, LA 70112								
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Accounting/Banking</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Credit Card Merchant Fees</li> </ul> </li> </ul>						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/23/2024	Anedot, Inc.						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$414.68	1340 Poydras Street, Suite 1770 New Orleans, LA 70112						
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense erchant Fees					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/28/2024	Anedot, Inc.						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$8.18	1340 Poydras Street, Suite 1770						
		New Orleans, LA 70112						
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense erchant Fees					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

				EXPENDITURE	CATEGO	RIES FOR	BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Guid	xpense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense gense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/8 Rpt: 13/19		Yarbrough	Jace R.					00088296	
4	Date	5	Payee name	9						
	05/29/2024		Anedot, Ind	2.						
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	le			
\$28.60			1340 Poyd	ras Street, Suite 1	770	•				
			New Orlea	ns, LA 70112						
8	PURPOSE	(a)	Category "	See Categories listed at the	top of this coh	odulo)	<b>b)</b> Description			
	OF		Accounting		top of this sen	leuule)		outsi	ide of Texas. Comp	plete Schedule T.
	EXPENDITURE								, officeholder living	expense
							Credit Card I	Mer	chant Fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	C	Office sou	ht		Office he	ld
	Date		Payee name	9						
	05/30/2024		Anedot, Ind	2.						
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Co	le			
\$107.68			1340 Poydras Street, Suite 1770							
				ns, LA 70112						
	PURPOSE OF EXPENDITURE	(a)	Category (s	See Categories listed at the /Banking	top of this sch	iedule)		ı, TX	ide of Texas. Comp , officeholder living <b>Chant Fees</b>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	C	Dffice sou	ht		Office he	łd
	Date		Payee name	9						
	06/03/2024		Anedot, Inc							
-	Amount (\$)	╞	Payee addre	ess; City;	State:	; Zip Co	le			
	\$105.78			ras Street, Suite 1		, 1				
			,							
			New Orlea	ns, LA 70112						
	PURPOSE OF EXPENDITURE	(a)	Category (s Accounting	See Categories listed at the /Banking	top of this sch	edule)		ı, TX	ide of Texas. Comp , officeholder living r <b>chant Fees</b>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	C	Dffice sou	ht		Office he	ld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Jwards/Memorials Expense	Loan Repayı Office Overh Polling Expe Printing Expe Salaries/Wag	nent/Reimbursement ead/Rental Expense nse ense jes/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:				<b>3</b> Filer ID (Ethics Commission Filers)		
	Sch: 3/8 Rpt: 14/19	′arbrough, Jace R.			00088296		
4	Date 06/13/2024	ayee name \nedot, Inc.					
6	Amount (\$)	vayee address; City; Stat	e; Zip Code	9			
	\$4.48	340 Poydras Street, Suite 1770 lew Orleans, LA 70112	-, p				
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Accounting/Banking</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Credit Card Merchant Fees</li> </ul> </li> </ul>					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	Office held		
	Date	ayee name					
	05/24/2024	allas Bulldog Marketing, LLC					
	Amount (\$)	vayee address; City; Stat	e; Zip Code	)			
\$1,300.00 4310 Buena Vista St. Dallas, TX 75205							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Advertising Expense	chedule) (I		outside of Texas. Complete Schedule T. , TX, officeholder living expense dvertising		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	it	Office held		
	Date	ayee name					
	06/03/2024	Don't California My Texas PAC					
	Amount (\$)	-	e; Zip Code	)			
	\$3,800.00	2.O. Box 279					
		outhmayd, TX 76268		-			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this see Printing Expense	chedule) (I		outside of Texas. Complete Schedule T. , TX, officeholder living expense te Cards		
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE CAT	EGORIES	S FOR	BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide exp	Off Pol Pri Sal	fice Over Iling Expe nting Exp Iaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 4/8 Rpt: 15/19		Yarbrough, Jace R.	00088296						
4	Date	5	Payee name				•			
	06/24/2024		Griffin Comunications LLC							
6 Amount (\$)			Payee address; City;	State; Zi	ip Cod	e				
	\$4,000.00		7111 Harvest Trail Dr							
			Austin, TX 78736							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of	this schedule	e) (	b) Description				
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						Consulting F				
						5				
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	e soug	nt		Office held		
	Date		Payee name							
	05/20/2024		Griffin Comunications LLC							
	Amount (\$)		Payee address; City;	State; Zi	ip Cod	9				
\$15,000.00			7111 Harvest Trail Dr							
	Austin, TX 78736									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Advertising Expense	this schedule	<sup>2)</sup> (			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	e soug	nt		Office held		
-	Date	Γ	Payee name							
	05/20/2024		Griffin Comunications LLC							
-	Amount (\$)	$\vdash$		State; Zi	ip Cod	9				
	\$7,200.00		7111 Harvest Trail Dr	Juno, 21	.p 000	~				
	\$1,200.00									
			Austin, TX 78736		— i.					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Advertising Expense	this schedule	e) <b>(</b>		ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	e soug	nt		Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPENDIT	URE CATEGO	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						quipment & Related Expense					
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 5/8 Rpt: 16/19		Yarbrough	, Jace R.					00088296			
4	Date	5	Payee name	9								
	05/21/2024		Griffin Con	nunications LL	С							
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	de					
	\$21,500.00		7111 Harv	est Trail Dr								
			Austin, TX	78736								
8	PURPOSE OF			See Categories listed	at the top of this sch	edule)	(b) Description					
	EXPENDITURE		Consulting	Expense					ide of Texas. Com			
								Check if Austin, TX, officeholder living expense				
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	C	Dffice sou	ght		Office he	eld		
	Date		Payee name	9								
	05/24/2024		Griffin Con	nunications LL	С							
	Amount (\$)		Payee address; City; State; Zip Code									
\$2,400.00			7111 Harv	est Trail Dr								
			Austin, TX	78736								
	PURPOSE OF EXPENDITURE		Category (: Advertising	Gee Categories listed	at the top of this sch	edule)		, TX	ide of Texas. Com , officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Of	ficeholder name	C	Dffice sou	ght		Office he	eld		
-	Date		Payee name	<u>,</u>								
	05/26/2024		2	, nunications LL	С							
	Amount (\$)		Payee addre	ess; City;	State:	Zip Co	de					
	\$7,500.00		7111 Harv		,							
	DUDDOSE		Austin, TX									
	PURPOSE OF			See Categories listed	at the top of this sch	edule)	(b) Description	0Utsi	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE		Consulting	Expense					, officeholder living			
	Complete ONLY if direct		Candidate/Of	ficeholder name	(	Office sou	ght		Office he	eld		
	expenditure to benefit C/OI	Н										

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loa Fees Offi Food/Beverage Expense Poll y - Gift/Awards/Memorials Expense Prin			yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 6/8 Rpt: 17/19		Yarbrough, Jace R.					00088296		
4	Date	5	Payee name							
	05/28/2024	Griffin Comunications LLC								
6	Amount (\$)	7	7 Payee address; City; State; Zip Code							
	\$8,700.00		7111 Harvest Trail Dr							
			Austin, TX 78736							
8	PURPOSE OF	(a)	Category (See Categories listed at the	e top of this sch	edule)	(b) Description				
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Consulting Fo	663	5		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	C	Dffice souç	jht		Office held		
	Date		Payee name							
	05/28/2024		Griffin Comunications LLC							
	Amount (\$)		Payee address; City;	State:	Zip Co	le				
	\$1,709.16		7111 Harvest Trail Dr	,						
	φ1,703.10									
	DUDDOOF	(-)	Austin, TX 78736			(I-)				
	PURPOSE OF	(a)	Category (See Categories listed at the	e top of this sch	edule)	(b) Description	outei	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Advertising Expense			Check if Austin, TX, officeholder living expense				
		Pushcard Printing								
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	С	Dffice sou	Jht		Office held		
	Date		Payee name							
	05/28/2024		Griffin Comunications LLC							
	Amount (\$)		Payee address; City;	State:	; Zip Co	le				
	\$244.76		7111 Harvest Trail Dr	,						
	Ψ2-+10									
			Austin, TX 78736			4.5				
	PURPOSE OF	(a)	Category (See Categories listed at the	e top of this sch	edule)	(b) Description	out	ido of Toyaa, Complete Schedule T		
	EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.		
	EXPENDITORE Check if Austin, TX, officeholder living expense Printing - T-Shirts									
						i inturig - i -O				
	Complete ONIL V if allocat	Ļ	Condidate (Office held			.bt		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Jrit		Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loa Fees Offi Food/Beverage Expense Pol y - Gift/Awards/Memorials Expense Prir			yment/Reimbursement rhead/Rental Expense pense lages/Contract Labor <b>nplete this form.</b>		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	ILER NAME				Filer ID (	Ethics Commission Filers)		
	Sch: 7/8 Rpt: 18/19		Yarbrough, Jace R.					00088296			
4	Date 05/28/2024		5 Payee name Griffin Comunications LLC								
6	Amount (\$) \$690.95		7 Payee address; City; State; Zip Code 7111 Harvest Trail Dr								
			Austin, TX 78736								
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense</li> <li>(b) Description         Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         Donor Gifts: Hats     </li> </ul>									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office sou	ght		Office held			
	Date		Payee name								
	06/03/2024		Griffin Comunications LLC								
	Amount (\$) \$888.38		Payee address; City; 7111 Harvest Trail Dr	State;	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	Austin, TX 78736 Category (See Categories listed at th Printing Expense	e top of this sch	edule)		, тх,	de of Texas. Comple officeholder living ex			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held	I		
	Date		Payee name								
	05/28/2024		Kipp, Mitch								
	Amount (\$) \$3,500.00		Payee address; City; 7111 Harvest Trail Dr	State;	; Zip Co	de					
			Austin, TX 78736								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Consulting Expense	e top of this sch	edule)		, TX,	de of Texas. Comple officeholder living ex CES			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held	I		

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing 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)		
-	T. tal as rea Cabadula E1				11011 10 00.			
1	Total pages Schedule F1: Sch: 8/8 Rpt: 19/19	2 FILER NAM Yarbrough					3 Filer ID (I 00088296	Ethics Commission Filers)
4	Date	5 Payee name	2				1	
	06/06/2024	Kipp, Mitch	1					
6	Amount (\$) \$2,700.00	<ul> <li>Payee addre</li> <li>7111 Harve</li> <li>Austin, TX</li> </ul>	est Trail Dr	State;	; Zip Coc	le		
8	PURPOSE			i falsis sels		(b) Description		
U	OF	Consulting	See Categories listed at the Expense	top of this sch	iedule)	Check if travel	l outside of Texas. Complet n, TX, officeholder living ex <b>ervices</b>	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	C	Office soug	ht	Office held	
	Date	Payee name	)					
	06/06/2024	Kipp, Mitch	I					
	Amount (\$)	Payee addre	ess; City;	State;	; Zip Coo	le		
	\$1,184.56	7111 Harve	est Trail Dr					
		Austin, TX	78736					
	PURPOSE OF EXPENDITURE		See Categories listed at the eimbursement for ( S		,	Check if Austin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	C	Office soug	ht	Office held	
	Date	Payee name	2					
	05/21/2024		t Pub & Steakhous	se				
	Amount (\$)	Payee addre	ess; City;	State;	; Zip Coo	le		
	\$417.45	216 W Mai			, — I.			
			e, TX 76240		i			
	PURPOSE OF EXPENDITURE		See Categories listed at the rage Expense	top of this sch	nedule)	Check if Austin	l outside of Texas. Complet n, TX, officeholder living ex erages for GOTV F	pense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	C	Office soug	ht	Office held	