

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM **GPAC**
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086595	2 Total pages filed: 13
3 COMMITTEE NAME Patriot Mobile Action		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/15/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 401 N Carroll Ave Suite 425 Southlake, TX 76092		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Steve		
	NICKNAME LAST SUFFIX Martin		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 401 N Carroll Ave Suite 425 Southlake, TX 76092		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (301) 654-3220		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 05/19/2024	THROUGH	Month Day Year 06/30/2024
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Patriot Mobile Action	13 Filer ID (Ethics Commission Filers) 00086595
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported David Covey
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 55.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,488.74
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,812.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 39,734.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Steve Martin

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC

17 COMMITTEE NAME Patriot Mobile Action		18 Filer ID (Ethics Commission Filers) 00086595
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,156.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 17,332.74
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,812.88
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/13
2 FILER NAME Patriot Mobile Action		3 Filer ID (Ethics Commission Filers) 00086595
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arvizu, Miriam <hr/> 6 Contributor address; City; State; Zip Code Wixom, MI 48393	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Truck Driver		9 Employer (See Instructions)
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, William <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) US Government
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, TERESA <hr/> Contributor address; City; State; Zip Code IDYLLWILD, CA 92549	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, TERESA <hr/> Contributor address; City; State; Zip Code IDYLLWILD, CA 92549	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbst, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Oil and Gas Landman		Employer (See Instructions) Providence Minerals LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/13
2 FILER NAME Patriot Mobile Action		3 Filer ID (Ethics Commission Filers) 00086595
4 Date 05/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, WANDA <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) REALTOT		9 Employer (See Instructions)
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leiby, Virginia <hr/> Contributor address; City; State; Zip Code Deering, NH 03244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leiby, Virginia <hr/> Contributor address; City; State; Zip Code Deering, NH 03244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Benjamin <hr/> Contributor address; City; State; Zip Code Vinton, LA 70668	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Benjamin <hr/> Contributor address; City; State; Zip Code Vinton, LA 70668	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/13
2 FILER NAME Patriot Mobile Action		3 Filer ID (Ethics Commission Filers) 00086595
4 Date 06/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nemeth, Gabor <hr/> 6 Contributor address; City; State; Zip Code Rolling Hills Estates, CA 90274	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Marlene <hr/> Contributor address; City; State; Zip Code Alpine, WY 83128	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Marlene <hr/> Contributor address; City; State; Zip Code Alpine, WY 83128	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, GREGG <hr/> Contributor address; City; State; Zip Code Santee, CA 92071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Site Support Analyst		Employer (See Instructions) Sharp Healthcare
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, GREGG <hr/> Contributor address; City; State; Zip Code Santee, CA 92071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sharp Healthcare/Site Support Analyst		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/13
2 FILER NAME Patriot Mobile Action		3 Filer ID (Ethics Commission Filers) 00086595
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pheanis, Edward <hr/> 6 Contributor address; City; State; Zip Code Elizabeth City, NC 27909	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przybylo, Joseph <hr/> Contributor address; City; State; Zip Code Buckeye, AZ 85396	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichardt, Robert <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Dickey <hr/> Contributor address; City; State; Zip Code Wake Village, TX 75501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Joe <hr/> Contributor address; City; State; Zip Code Port Saint Lucie, FL 34953-7619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Cloud & Automation Network Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/13
2 FILER NAME Patriot Mobile Action		3 Filer ID (Ethics Commission Filers) 00086595
4 Date 06/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van, Jo Ann <hr/> 6 Contributor address; City; State; Zip Code Tacoma, WA 98422	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van, Jo Ann <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98422	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westcott, George <hr/> Contributor address; City; State; Zip Code West Covina, CA 91790	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CCRN		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/13	
2 FILER NAME Patriot Mobile Action		3 Filer ID (Ethics Commission Filers) 00086595	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/31/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patriot Mobile LLC	8 Amount of contribution (\$) \$8,666.37	9 In-kind contribution description PAC Administrative Costs
	7 Contributor address; City; State; Zip Code Grapevine, TX 76051	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patriot Mobile LLC	Amount of contribution (\$) \$8,666.37	In-kind contribution description PAC Administrative Costs
	Contributor address; City; State; Zip Code Grapevine, TX 76051	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 10/13	2 FILER NAME Patriot Mobile Action	3 Filer ID (Ethics Commission Filers) 00086595
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4 Date 05/20/2024	5 Payee name Anedot
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6 Amount (\$) \$1.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/20/2024	Payee name Anedot
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Amount (\$) \$0.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/03/2024	Payee name Anedot
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Amount (\$) \$35.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 11/13	2 FILER NAME Patriot Mobile Action	3 Filer ID (Ethics Commission Filers) 00086595
4 Date 06/05/2024	5 Payee name Anedot	
6 Amount (\$) \$3.38 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.08 <input type="checkbox"/> Expenditure from corporate funds	Payee name Anedot Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.30 <input type="checkbox"/> Expenditure from corporate funds	Payee name Anedot Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 12/13	2 FILER NAME Patriot Mobile Action	3 Filer ID (Ethics Commission Filers) 00086595
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4 Date 06/05/2024	5 Payee name Anedot
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6 Amount (\$) \$0.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/18/2024	Payee name Anedot
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Amount (\$) \$1.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5555 Hilton Ave Suite 106 Baton Rouge, LA 70808
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC E-Merchant Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/29/2024	Payee name CFS Compliance
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Amount (\$) \$1,775.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 30844 Bethesda, MD 20824
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC Compliance Consulting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 13/13	2 FILER NAME Patriot Mobile Action	3 Filer ID (Ethics Commission Filers) 00086595
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4 Date 06/12/2024	5 Payee name PEX
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6 Amount (\$) \$4.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 462 7th Avenue 21st Floor New York, NY 10018
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC Bank Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/31/2024	Payee name Stone Ridge Group
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Amount (\$) \$9,861.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 960 N Point Parkway Suite 225 Alpharetta, GA 30005
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC GOTV Text Messages
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/13/2024	Payee name The Gober Group
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Amount (\$) \$125.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 341016 Austin, TX 78734
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC Legal Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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