CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete		Filer ID (Ethics Commis 00086108	sion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	The Honorable	Nathaniel			Date Received	
					ELECTRONICA	J I Y FII FD
	NICKNAME L			CLIFFIX	07/15/2024	
		_AST Schatzline		SUFFIX	01713/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 162564					_
ADDRESS					Receipt #	Amount
Change of Address	Fort Worth, TX 76161				2 . 2	
					Date Processed	
					Date Imaged	
					Date imageu	
5 CAMPAIGN	MS/MRS/MR F	IRST		MI	<u> </u>	
TREASURER		drienne Bradl	oigh	WII		
NAME	IVII 5.	diferifie bradi	eigii			
	NIO(A)AAAE					
	-	AST Schatzline		SUFFIX		
	5	cnatziine				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO B	OX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	P.O. Box 162564					
(Residence or Business)						
	Fort Worth, TX 76161					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	VTENCION			
7 CAMPAIGN TREASURER		NUMBER E	XTENSION			
PHONE	(469) 337-9547					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after can	nnaign treasurer
		oour day belore		L	appointment (offic	
	X July 15	8th day before e	election	Exceeded modified	Final Report (Atta	ch C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	ROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	imary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Distric	t 93 Tarrant		State Representa		
				Ctate represent		
		GO T	O PAGE 2			
1						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 26

13 C / OH NAME	Schatzline, Nathanie	(The Honorable)	14 Filer ID 00086108	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
agos	X GENERAL	Texas Alliance for Life PAC		
	SENER VI	COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Drive Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		4505 Corazon Cv		
		Round Rock, TX 78681		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 4,363.38
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 11,479.65
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I	AST DAY OF THE	\$ 48,242.36
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.		
		The Honora	able Nathaniel Schat:	zline
		Signature o	f Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER	2 SHEET PG 3 3 of 26
l	ER NAM	ME e, Nathaniel (The Honorable)	19 Filer ID 00086108	(Ethics	Commission Filers)
		E SUBTOTALS SCHEDULE		S	UBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,363.38
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	11,479.65
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	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/26	
2	FILER NAME Schatzline, N	Nathaniel (The Honorable)		3	Filer ID (Ethics Commission 00086108	on Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$150.00	
_	Dringing Lagor	Hurst, TX 76054	O Familia de Constitución de			
8	Рппсіраї осси	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date Full name of contributor out-of-state PAC (ID#:) 06/16/2024 Bartley, Tina Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
	Principal occu	Houston , TX 77057-3731 upation / Job title (See Instructions)	Employer (See Instructions			
	Legal Assistant Hoover Slovacek LLP					
	Date Full name of contributor out-of-state PAC (ID#:) 02/02/2024 Bennett, Montgomory Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75254				
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions) Ashford Inc.)		
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#:_Betz, Noah Contributor address; City; State; Zip Code Joshua, TX 76058			Amount of Contribution (\$)	\$50.00
	Principal occupation / Job title (See Instructions) Consultant Employer (See Instructions) Bluestone Creatives LLC					
	Date 04/11/2024	Full name of contributor out-of-state PAC (ID#:_Burks, Kevin Contributor address; City; State; Zip Code Argyle, TX 76226			Amount of Contribution (\$)	\$100.00
	Principal occu Engineer	ppation / Job title (See Instructions)	Employer (See Instructions) Arcadis)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/26			
2	FILER NAME Schatzline, N	Nathaniel (The Honorable)			3	Filer ID (Ethics Commission 00086108	Filers)		
4	Date 01/30/2024	01/30/2024 Caldwell III, James 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5.00			
8		Westland, MI 48185 pation / Job title (See Instructions	s) <u></u> 9	Employer (See Instructions	<u> </u> s)				
	Climate Engineering and Operator Date Out-of-state PAC (ID#:) Caldwell III, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00				
	Westland, MI 48185 Principal occupation / Job title (See Instructions) Climate Engineering and Operator Employer (See Instructions) One HVACR			<u> </u> s)					
	Date 03/30/2024	Full name of contributor Caldwell III, James Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$5.00		
		Westland, MI 48185							
		pation / Job title (See Instructions ineering and Operator	S)	Employer (See Instructions One HVACR	s)				
	Date 04/30/2024	Full name of contributor Caldwell III, James Contributor address; City; S Westland, MI 48185	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00		
	•	pation / Job title (See Instructions ineering and Operator	5)	Employer (See Instructions One HVACR	5)				
	Date 05/30/2024	Full name of contributor Caldwell III, James Contributor address; City; S Westland, MI 48185	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00		
		pation / Job title (See Instructions ineering and Operator	(5)	Employer (See Instructions One HVACR	5)				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/26		
2	FILER NAME Schatzline, N	Nathaniel (The Honorable)			3	Filer ID (Ethics Commission 00086108	n Filers)	
4	Date 06/30/2024)	7	Amount of Contribution (\$)	\$5.00	
8	Principal occu	Westland, MI 48185 pation / Job title (See Instructions)	la	Employer (See Instructions	·)			
0	•	ineering and Operator	3	One HVACR	P)			
	Date Full name of contributor out-of-state PAC (ID#:) 04/11/2024 Carbone, Tom Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00			
		Keller, TX 76262			L			
	Principal occupation / Job title (See Instructions) Employer (See Instructions Enbridge		5)					
	Date 01/01/2024	Full name of contributor out-of-state Davis, Jeffrey Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00	
		Haslet , TX 76052						
	Principal occu Driver	pation / Job title (See Instructions)		Employer (See Instructions Penske Logistics	s)			
	Date 04/12/2024	Elmer, Julie				Amount of Contribution (\$)	\$100.00	
	Principal occu Unemployed	pation / Job title (See Instructions)		Employer (See Instructions Unemployed	<u>s)</u>			
	Date 06/11/2024	Full name of contributor out-of-state Fercho, Chad Contributor address; City; State; Zip Code Northfield , MN 55057)		Amount of Contribution (\$)	\$10.00	
	Principal occu Sales Manaç	pation / Job title (See Instructions)		Employer (See Instructions Safe Basements	5)			
			1					

	MONETARY POLITICAL CONTRIBUTIONS						E A1	
	The Instruc	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/26	
2	FILER NAME Schatzline, N	Nathaniel (The Honorable)				3	Filer ID (Ethics Commission 00086108	n Filers)
4	Date 05/12/2024)	7	Amount of Contribution (\$)	\$100.00	
8	Principal occu	Houston , TX 77066 pation / Job title (See Instructions	s) [9	Employer (See Instructions	?) 		
•	Unemployed		,	Ĭ	Unemployed	,,		
	Date 05/10/2024)		Amount of Contribution (\$)	\$250.00	
		Lubbock, TX 79416						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 06/06/2024	Full name of contributor Hees, Miriam Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78753						
	Principal occu Biller	pation / Job title (See Instructions	s)		Employer (See Instructions Soltys Enterprises	5)		
	Date 01/01/2024	Full name of contributor Jeremiah , Graham Contributor address; City; S Campo, CA 91906)		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions	5)		Employer (See Instructions Dhillon Law Group Inc.	5)		
	Date 06/28/2024	Full name of contributor King, Mark Contributor address; City; S Canyon, TX 79015	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00
	Principal occu Self Employe	pation / Job title (See Instructions	s)		Employer (See Instructions Contract Labor	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/26	
2	FILER NAME Schatzline, I	Nathaniel (The Honorable)		3	Filer ID (Ethics Commission 00086108	n Filers)
4			7	Amount of Contribution (\$)	\$250.00	
		Southlake, TX 76092				
8	Principal occu President	ipation / Job title (See Instructions)	9 Employer (See Instructions O'Hare PLLC)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/16/2024 Peck, Rusty & Sandy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
	Principal occu	Keller, TX 76262 upation / Job title (See Instructions)	Employer (See Instructions)		
	Business Owner Patriot Roofing		,			
	Date Full name of contributor out-of-state PAC (ID#:) 04/16/2024 Peck, Rusty & Sandy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Keller, TX 76262				
	Principal occu Business Ov	upation / Job title (See Instructions) wner	Employer (See Instructions Patriot Roofing)		
	Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:_Penate, Steve Contributor address; City; State; Zip Code Fort Worth, TX 76126			Amount of Contribution (\$)	\$5.00
	Principal occupation / Job title (See Instructions) Self Employed Employer (See Instruction Self Employed))			
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Reynolds, Jack Contributor address; City; State; Zip Code Azle, TX 76020			Amount of Contribution (\$)	\$20.00
	Principal occu Adjunct Prof	upation / Job title (See Instructions) fessor	Employer (See Instructions Weatherford College)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULI	■ A1	
	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 6/7 Rpt: 9/26	
2	FILER NAME Schatzline, N	Nathaniel (The Honorable)			Filer ID (Ethics Commission 00086108	ı Filers)
4			7	Amount of Contribution (\$)	\$25.00	
		Southlake, TX 76092				
8	Principal occu Owner	pation / Job title (See Instructions)	9 Employer (See Instructions) Two Crazy Dreamers LL			
	Date Full name of contributor out-of-state PAC (ID#:) 01/30/2024 Schatzline, Patrick Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu	Northport, AL 35476 pation / Job title (See Instructions)	Employer (See Instructions))		
	Bishop FIF					
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#: Schatzline, Patrick Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Northport, AL 35476				
	Principal occu Bishop	pation / Job title (See Instructions)	Employer (See Instructions) FIF)		
	Date 03/30/2024	Full name of contributor out-of-state PAC (ID#:_Schatzline, Patrick Contributor address; City; State; Zip Code Northport, AL 35476			Amount of Contribution (\$)	\$25.00
	Principal occu Bishop	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_Schatzline, Patrick Contributor address; City; State; Zip Code Northport, AL 35476			Amount of Contribution (\$)	\$25.00
	Principal occu Bishop	pation / Job title (See Instructions)	Employer (See Instructions))		

	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: 7/7 Rpt: 10/26	
2	FILER NAME Schatzline, N	FILER NAME Schatzline, Nathaniel (The Honorable)			Filer ID (Ethics Commission 00086108	า Filers)
4	Date 06/30/2024	 Full name of contributor out-of-state PAC (ID#:_Schatzline, Patrick Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$25.00
		Northport, AL 35476				
8	Principal occu Bishop	ipation / Job title (See Instructions)	9 Employer (See Instructions FIF	s) 		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Smith, Gail Ann Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76244		<u> </u>		
	Principal occupation / Job title (See Instructions) Realtor/Owner Employer (See Instruction Presence Real Estate			5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Wamhoff, Patrick Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$38.38
	Principal occu	Prisco, TX 75036 upation / Job title (See Instructions)	Employer (See Instructions	s)		
	•	I Account Executive	Asurion			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/26 2 FILER NAME 3 Filer ID Schatzline, Nathaniel (The Honorable) 00086108 \$ 0.00 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 5 Date **6** Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 7 Contributor address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) **13** Contributor's job title (FOR JUDICIAL) 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)

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributing/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/15 Rpt: 12/26	Schatzline, Nathaniel (The Honorable) 00086108
4	Date	5 Payee name
	03/08/2024	Barnes, Rick
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	9121 Belshire Drive, Ste. 100
		North Richland Hills, TX 76182
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAFENDITORE	Candidate/Officeholder/Political Committee
		Contribution to Rick Barnes Campaign
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/22/2024	Charles Randklev Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	
	\$130.00	1925 Spring Drive
		Keller, TX 76262
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Candidate/Officeholder/Political Committee
		Campaign Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	03/12/2024	Donor Box
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.00	The Hearst Building, 53rd St.
	Ψ17.00	
		Suite 900
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	LA LIBITORE	Check if Austin, TX, officeholder living expense
		Donation Collection
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/15 Rpt: 13/26	Schatzline, Nathaniel (The Honorable) 00086108
4	Date	5 Payee name
	03/12/2024	Donor Box
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.00	The Hearst Building, 53rd St.
		Suite 900
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense donation support
		ασπαιίση συρμοτί
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/06/2024	Donor Box
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.00	The Hearst Building, 53rd St.
		Suite 900
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Donation Services
		Donation Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/04/2024	Donor Box
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.00	The Hearst Building, 53rd St.
		Suite 900
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	ZA ZABITORZ	Check if Austin, TX, officeholder living expense
		Donation Support
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/Officeholder/Political

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	ommittee	Gift/Awards/Memorials Educated Services The Instruction Guiden	Salaries	/Wage	es/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schodule F1:	EII ED MANA					12	Filer ID	(Ethics Commission Filers)	-
1	Total pages Schedule F1: Sch: 3/15 Rpt: 14/26		E , Nathaniel (The F	lonorable)			3	00086108	(Ethics Commission Filers)	
4	Date	Payee name	<i>j</i>							_
	05/24/2024	Expedia.co								
<u>_</u>		·		04-4 7' 7	\!					_
6	Amount (\$)	Payee addre		State; Zip C	code					
	\$266.14	10440 N C	entral Expressway	/						
		Dallas, TX	75231							
8	PURPOSE	Category (5	See Categories listed at the	ton of this schedule)	(b)	Description				_
	OF	Event Expe		top of the conceder,			outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE	•				Check if Austin	ı, TX	, officeholder living	g expense	
		Travel Expense								
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OI									
	Date	Payee name	<u> </u>							=
	02/13/2024	•	And Justice							
_	Amount (\$)	Payee addre		State; Zip C	code					-
	\$5,000.00	•	nurst Scenic Dr.	,p C						
	ψ3,000.00	II OI OUN	iaiot docino Di.							
		Fam. Mr. 31	TV 70444							
		Fort Worth	, TX 76111							
	PURPOSE OF) Category (See Categories listed at the	top of this schedule)	(b)	Description				
	EXPENDITURE		ns/Donations Mad					ide of Texas. Com		
		Candidate/	Officeholder/Politi	cal Committee		Event Spons		, officeholder living	j expense	
						Event Spons	UIS	ıııþ		
_	Complete ONLY if direct	Candidata/Of	finahaldar	O#:ss	1 10 lb t			Office	7ld	_
	Complete ONLY if direct expenditure to benefit C/O	Cariuluate/Of	ficeholder name	Office so	uynt			Office he	eiu	
L										_
	Date	Payee name								
L	01/23/2024	Fort Worth	High Tech Signs							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode					٦
	\$90.93	3120 Bonn	ie Dr.							
		Fort Worth	, TX 76116							
	PURPOSE) Category 15	See Categories listed at the	top of this schedule)	(b)	Description				_
	OF	Advertising		, ,		•	outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		. •			ш	ı, TX	, officeholder living	g expense	
						Signage				
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	ught			Office he	eld	1
	expenditure to benefit C/O									
										٦

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)				
	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:					
Sch: 4/15 Rpt: 15/26	Schatzline, Nathaniel (The Honorable) 00086108				
4 Date	5 Payee name				
01/25/2024	Fort Worth Republican Women				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$35.00	P.O. Box 101613				
	Fort Worth, TX 76185				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Candidate/Officeholder/Political Committee				
	Fort Worth Republican Women's Event				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI	п				
Date	Payee name				
01/16/2024	Gillaspie, Asher				
Amount (\$)	Payee address; City; State; Zip Code				
\$266.00 1512 Daisy Ln.					
	Burleson, TX 76028				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.				
	Campaign Manager				
	Campaign Manager				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O					
Date	Power name				
Date 02/12/2024	Payee name Cillagnia, Achor				
	Gillaspie, Asher				
Amount (\$)	Payee address; City; State; Zip Code				
\$250.00	1512 Daisy Ln.				
	Burleson, TX 76028				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Salaries/Wages/Contract Labor				
	Check if Austin, TX, officeholder living expense				
	Campaign Manager				
Complete ONL V if direct	Candidate/Officeholder name Office sought Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI					
•					

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: 5/15 Rpt: 16/26	Schatzline, Nathaniel (The Honorable)	00086108					
4	Date	5 Payee name						
	03/13/2024	Gillaspie, Asher						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$276.00	1512 Daisy Ln.						
		Burleson, TX 76028						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.					
		Check if Austin Campaign M	n, TX, officeholder living expense					
		Campaign W	anagei					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
5	expenditure to benefit C/O		Office field					
_	Date	Dove name						
	04/09/2024	Payee name Gillaspie, Asher						
	Amount (\$) \$250.00	Payee address; City; State; Zip Code						
	\$250.00	1512 Daisy Ln.						
		Burleson, TX 76028						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Toyon Complete Cabadula T					
	EXPENDITURE	Salaries/ Wages/ Contract Eabor	outside of Texas. Complete Schedule T. n, TX, officeholder living expense					
		Campaign M						
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI	1						
	Date	Payee name						
	05/17/2024	Gillaspie, Asher						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00	1512 Daisy Ln.						
		Burleson, TX 76028						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.					
	LAFENDITORE		n, TX, officeholder living expense					
		Campaign M	anager					
	Complete ONLY if direct. Condidate Office helder name Office held							
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributing 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: 6/15 Rpt: 17/26	Schatzline, Nathaniel (The Honorable) 00086108					
4	Date	5 Payee name					
	06/04/2024	Gillaspie, Asher					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$250.00	1512 Daisy Ln.					
		Burleson, TX 76028					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor					
	EXI ENDITORE	Check if Austin, TX, officeholder living expense					
		Campaign Manager					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	04/22/2024	Greg Will Campaign					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$200.00	329 Anita Avenue					
	Ψ200.00	323 / Willia / Wellide					
		V. II. TV 700 to					
		Keller, TX 76248					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.					
		Candidate/Officeholder/Political Committee					
		Campaigh Contribution					
	Operation ONLY if allowed	One distributed Office health					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	·						
	Date	Payee name					
	01/16/2024	Harland Clarke Check					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$20.00	2850 HERITAGE TRACE PKWY					
		Fort Worth, TX 76177					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		checks					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	1					
I							

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/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	ense Printi Salar	Ü	e /Contract Labor	-	Travel in District Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1: Sch: 7/15 Rpt: 18/26		E Nathaniel (The Ho	nnorable)			l	Filer ID 00086108	(Ethics Commission Filers)
4	·		•				<u>`</u>		
_	Date 01/22/2024	5 Payee name Hobby Lob							
6	Amount (\$)	7 Payee addre		State; Zip	Code				
	\$12.98	9265 N Fw	У						
		Fort Worth	, TX 76177						
8	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description			
	OF EXPENDITURE	Event Expe	ense			=		e of Texas. Com officeholder living	plete Schedule T.
						event expens		ocnolaer livilig	,
						-			
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office	sought			Office he	eld
	Date	Payee name							
	02/26/2024	Hobby Lob	by						
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code				
\$25.96 9265 N Fwy									
		Fort Worth	, TX 76177						
	PURPOSE OF		ee Categories listed at the to	op of this schedule)	(b)	Description	au+-' '	o of Town	plata Cabadul- T
	EXPENDITURE	Office Supp	olies			=		e of Texas. Com officeholder living	plete Schedule T. g expense
						Office Supplie			
L									
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office	sought			Office he	eld
	Date	Payee name							
	03/05/2024	LUCA							
	Amount (\$)	Payee addre		State; Zip	Code				
	\$172.50	2901 69th S	Street						
		Lubbock, T	X 79413						
	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description			
	OF EXPENDITURE	Event Expe	ense			ш		e of Texas. Com officeholder living	plete Schedule T.
						Event Sponso			y experied
						•			
	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office	sought			Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

1 Total pages Schedule F1: 2 FILER NAME Sch 8/15 Rpt. 19/26 Schatzline, Nathaniel (The Honorable) 3 Filer ID (Ethics Commission Filers) Sch 8/15 Rpt. 19/26 Schatzline, Nathaniel (The Honorable) 00086108 4 Date		Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)				
Sch: 8/15 Rpt: 19/26 Schatzline, Nathaniel (The Honorable) 00086108 4 Date	Ļ		The Instruction Guide explains how to complete this form.				
4 Date	1	, •					
Salaries/Wages/Contract Labor Salaries/Wages/Contract Labo		·					
7 Payee address: City; State; Zip Code \$500.00 \$500.00 \$500.00 \$500.00 \$2327 Acoma Trail Apt. 3321 Fort Worth, TX 76177 8 PURPOSE OF EXPENDITURE (a) Category (see Categores listed at the top of this schedule) Salaries/Wages/Contract Labor Commission of Texas. Complete Schedule 7. Complete ONLY if direct of the Schedule 7. Contribution of Texas. Complete Schedule 7. Contribution of	4	Date	5 Payee name				
\$500.00 3237 Acoma Trail Apt. 3321 Fort Worth , TX 76177 8		03/06/2024	Rameno, Elias				
Apt. 3321 Fort Worth , TX 76177 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Commis Support Office held Commis Support Office held Payee name 05/06/2024 Amount (s) Payee address; City; State; Zip Code Southlake, TX 76092 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete QNLY if direct expenditure to benefit C/OH Condidate/Officeholder/Political Committee Complete QNLY if direct expenditure to benefit C/OH Date 02/21/2024 Amount (s) Payee address; City; State; Zip Code Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete QNLY if direct expenditure to benefit C/OH Date 02/21/2024 Payee name Shell Service Station Amount (s) Payee address; City; State; Zip Code S14.78 S14.78 Payee address; City; State; Zip Code S14.78 S14.78 Payee address; City; State; Zip Code Fort Worth, TX 76111 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Condidate/Officeholder Insurance Office sought (b) Description Condidate/Officeholder Insurance Office Sught Code Insurance Office Schedule T. Condidate/Officeholder Insurance Office Sought Office Held Code Insurance Office Schedule T. Code Insurance Office Sought Code Insurance Office Schedule T. Code Insurance Office Sought Office Held Code Insurance Office Sought Office Held Code Insurance Office Schedule Complete ONLY if direct Complete ONLY i	6	Amount (\$)	7 Payee address; City; State; Zip Code				
Fort Worth, TX 76177 Fort Worth, TX 76111 Fort Worth, TX 76116 Fort Worth, TX 76126		\$500.00	3237 Acoma Trail				
Separate Complete ONLY if direct expenditure to benefit C/OH			Apt. 3321				
Separate Complete ONLY if direct expenditure to benefit C/OH			Fort Worth . TX 76177				
Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Commission Complete ONLY if direct expenditure to benefit C/OH Date	8	PURPOSE					
Commission Com		OF					
9 Complete ONLY if direct expenditure to benefit C/OH Date		EXPENDITURE					
Date 05/06/2024 Sean Turner Campaign Amount (\$) Payee address; City; State; Zip Code 550 Reserve Street, Ste. 250 Southlake, TX 76092 PURPOSE OF EXPENDITURE Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete QNLY if direct expenditure to benefit C/OH Date 02/21/2024 Shell Service Station Amount (\$) Payee andress; City; State; Zip Code Campaign Contribution Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Complete Schedule T. Campaign Contribution Campaign C			Comms Support				
Date 05/06/2024 Sean Turner Campaign Amount (\$) Payee address; City; State; Zip Code 550 Reserve Street, Ste. 250 Southlake, TX 76092 PURPOSE OF EXPENDITURE Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete QNLY if direct expenditure to benefit C/OH Date 02/21/2024 Shell Service Station Amount (\$) Payee andress; City; State; Zip Code Campaign Contribution Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Complete Schedule T. Campaign Contribution Campaign C							
Date 05/06/2024 Amount (\$) Payee address; City; State; Zip Code \$500.00 \$50 Reserve Street, Ste. 250 Southlake, TX 76092 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Complete ONLY if direct expenditure to benefit C/OH Date 02/21/2024 Amount (\$) Payee name 02/21/2024 Amount (\$) Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if Austin, TX, officeholder living expense Campaign Contribution Office held (b) Description Check if Austin, TX, officeholder living expense Transportation Fort Worth, TX 76111 (b) Description Check if Austin, TX, officeholder of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held	9		the state of the s				
Date		expenditure to benefit C/O	H				
Amount (\$)		Date	Payee name				
\$500.00 550 Reserve Street, Ste. 250		05/06/2024	Sean Turner Campaign				
PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution (b) Description Check if Austin, TX, officeholder Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Complete QNLY if direct expenditure to benefit C/OH Date O2/21/2024 Amount (\$) Payee name Shell Service Station Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if Austin, TX, officeholder living expense Transportation for Event (b) Description Check if Austin, TX, officeholder living expense Transportation for Event Office sought Office sought Office held		Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct expenditure to benefit C/OH Date O2/21/2024 Amount (\$) Payee name Shell Service Station Payee address; City; State; Zip Code \$14.78 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held (b) Description (c) Description (d) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$500.00	550 Reserve Street, Ste. 250				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct expenditure to benefit C/OH Date O2/21/2024 Amount (\$) Payee name Shell Service Station Payee address; City; State; Zip Code \$14.78 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held (b) Description (c) Description (d) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held							
OF EXPENDITURE Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct expenditure to benefit C/OH Date O2/21/2024 Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder in the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Southlake, TX 76092				
Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Complete ONLY if direct expenditure to benefit C/OH Date O2/21/2024 Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held							
Campaign Contribution Campaign Contribution Campaign Contribution Campaign Contribution Office held Office held Office held Office held Date 02/21/2024 Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Contributions/Bondtions Made by				
Complete ONLY if direct expenditure to benefit C/OH Date			Sarrandado, Sinosinodo, in Sinasan Sommittee				
Date 02/21/2024 Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Campaign Contribution				
Date 02/21/2024 Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held	\vdash	Complete ONLY !! -!!!	Condidate/Officeholder name				
Shell Service Station Amount (\$)			· · · · · · · · · · · · · · · · · · ·				
Shell Service Station Amount (\$) Payee address; City; State; Zip Code \$14.78 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held	_	Date	Payee name	_			
Amount (\$) Payee address; City; State; Zip Code 1908 Yucca Ave. Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held			· ·				
\$14.78							
Fort Worth, TX 76111 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held		` ,					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$14.78	1908 Yucca Ave.				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held							
OF EXPENDITURE Transportation Equipment And Related Expense Transportation Equipment And Related Expense Transportation for Event Complete ONLY if direct Candidate/Officeholder name Office sought Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation for Event Office held			Fort Worth, TX 76111				
EXPENDITURE Transportation Equipment And Related Check if Austin, TX, officeholder living expense Transportation for Event							
Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Transportation Equipment 7 tha Related				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held							
			Transportation for Event				
		Complete ONLY if direct	Condidate/Officeholder name Office county Office hold	_			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

1g Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/15 Rpt: 20/26	Schatzline, Nathaniel (The Honorable) 00086108
4	Date	5 Payee name
	05/20/2024	Texas GOP
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.00	807 Brazos St
		Austin , TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event Admission
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/26/2024	Tony Tinderholt for Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,300.00	P.O. Box 172713
		Arlington, TX 76003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Campaign Contribution
		Campaign Continuation
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/08/2024	True Texas Project
H	Amount (\$)	Payee address; City; State; Zip Code
	\$198.00	2300 Valley View Ln Ste 242
		Irving , TX 75062
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event Sponsorship
		Event Sponsorship
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
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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	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 10/15 Rpt: 21/26	Schatzline, Nathaniel (The Honorable) 00086108					
4	Date	5 Payee name					
	02/23/2024	UHaul					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$74.60	3401 Alma Dr					
		Plano, TX 75023					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.					
		Expense Check if Austin, TX, officeholder living expense Truck Rental for Sign Distribution					
		Truck Rental for Sign Distribution					
_	Complete ONU V if allow	Condidate/Officeholder name					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	03/08/2024	UHaul					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$72.22	3736 Basswood Blvd					
		Fort Worth, TX 76137					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.					
		Expense					
		Truck Nethal for Sign Distribution					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
	Date	Payee name					
	02/05/2024	Walmart Supercenter					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$95.11	3851 Airport Fwy					
		Fort Worth, TX 76111					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Supplies Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense					
		Office Supplies					
	0 1: 0:::::::::::::::::::::::::::::::::						
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	onponditure to beliefft 6/01	•					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/15 Rpt: 22/26	Schatzline, Nathaniel (The Honorable) 00086108
4	Date	5 Payee name
	02/29/2024	Walmart Supercenter
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.30	5336 Golden Triangle Boulevard
		Fort Worth, TX 76244
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Supplies Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Cinic Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	06/28/2024	Walmart Supercenter
	Amount (\$)	Payee address; City; State; Zip Code
	\$93.00	8520 N Beach St
		Fort Worth, TX 76111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Supplies Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Office Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	02/05/2024	Payee name Yardhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.08	11800 Domain Blvd Ste. 100
		Austin, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Meeting
		Stall Meeting
_	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 Co

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/15 Rpt: 23/26	Schatzline, Nathaniel (The Honorable) 00086108
4	Date	5 Payee name
	01/26/2024	cfw parking meter
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.00	5001 James Ave
		Fort Worth, TX 76115
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event Expense
		Event Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
┝	Date	Davida marra
	01/26/2024	Payee name
L		cfw parking meter
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.00	5001 James Ave
		Fort Worth, TX 76115
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event Expense
		Lvent Expense
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Davisa nama
	01/16/2024	Payee name mailchimp
		·
	Amount (\$) \$63.96	Payee address; City; State; Zip Code
	Ф05.90	405 N Angier Ave.
		Atlanta , GA 30308
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		email services
		Sinai Garriaga
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		

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/Political Committee Credit Card Payment			Legal Services The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 13/15 Rpt: 24/26	Schatzline,	Nathaniel (The Hor	norable)				00086108	
4	Date	5 Payee name							
	02/16/2024	mailchimp							
6	Amount (\$)	7 Payee addre		State; Zip C	ode				
	\$103.94	405 N Angi	er Ave.						
		Atlanta, GA	30308						
8	PURPOSE OF		ee Categories listed at the top	of this schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense			_		de of Texas. Com officeholder living	
						Mail services	, ,,,	oc.ioidei iivilig	,
9	Complete ONLY if direct		ceholder name	Office so	<u>I</u> ught			Office he	eld
	expenditure to benefit C/OI								
	Date	Payee name							
	03/18/2024	mailchimp							
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$103.94	405 N Angi	er Ave.						
		Atlanta, GA	30308						
	PURPOSE OF		ee Categories listed at the top	of this schedule)	(b)	Description	or.+	do of Toylor Or	plata Sahadula T
	EXPENDITURE	Advertising	∟xpense			<u></u>		de of Texas. Com officeholder living	
						Email Service			•
	Complete ONLY if direct		ceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	<u>-</u>							
	Date	Payee name							
	04/04/2024	mailchimp							
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$17.00	405 N Angi	er Ave.						
		Atlanta, GA	30803						
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense			<u></u>		de of Texas. Com	
						Email Service		officeholder living	expense
						Email Scivice	,3		
_	Complete ONLY if direct	Candidate/Off	ceholder name	Office so	<u>l</u> ught			Office he	eld
	expenditure to benefit C/OH								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 14/15 Rpt: 25/26	Schatzline, Nathaniel (The Honorable) 00086108					
4	Date	5 Payee name					
	04/16/2024	mailchimp					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$103.94	405 N Angier Ave.					
		Atlanta, GA 30308					
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 Email Services					
		Littali Services					
0	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
_							
	Date	Payee name					
	05/16/2024	mailchimp					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$103.94	405 N Angier Ave.					
		Atlanta, GA 30308					
	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					
		Email Support					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	Complete ONLY if direct expenditure to benefit C/OI	y					
	Date	Payee name					
	06/17/2024	mailchimp					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$103.94	405 N Angier Ave.					
L		Atlanta, GA 30308					
	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 Email Services					
		Eitidii Services					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
<u> </u>							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

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	/ - Il Co	mmittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	pense	Polling Exp Printing Exp	ense pense ages/Contract Labor		Travel in District Travel Out of Di			
	Credit Card Payment The Instruction Guide explains how to complete this form.											
1	Total pages Schedule F1: Sch: 15/15 Rpt: 26/26	2		E Nathaniel (The H	onorable))		3	Filer ID 00086108	(Ethics Commission Filers)	
4	Date	5	Payee name	1								
	06/28/2024		racetrac									
6	Amount (\$)	7	Payee addre	ess; City;	State:	Zip Cod	le					
ľ	\$9.39	ľ	-	ern Center Blvd	o tato,	p						
	Ψ0.00		2022 11000	om Comor Biva								
			Fort Worth,	TX 76131								
8	PURPOSE	(a)	Category (S	ee Categories listed at the t	top of this sche	edule)	b) Description					
	OF EXPENDITURE		Event Expe	Expense Check if travel outside of Texas. Complete Schedule T.								
	LXI LINDITORL			Check if Austin, TX, officeholder living expense								
		Event Transportation Expense										
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	C	Office soug	ht		Office h	eld		
I												