CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00029493		2 Total pages filed: 36	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER		Charles L.			OFFICE USE ONI	LY
NAME	The Honorable	Challes L.			Date Received	
					ELECTRONICALLY FILE	ED
					07/15/2024	
	NICKNAME	LAST		SUFFIX	07/15/2024	
		Geren				
4 CANDIDATE /	ADDRESS / PO BOX; APT		-V·	ZIP CODE	Date Hand-delivered or Date Postma	arked
OFFICEHOLDER		/ SUITE #, CII	Τ,	ZIP CODE	Date mand delivered of Date Fosting	ancu
MAILING	P.O. Box 1440					
ADDRESS					Receipt # Amount	
Change of Address	Fort Worth, TX 76101					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER				IVII		
NAME	Ms.	Kit				
	NICKNAME	LAST		SUFFIX		
		Moncrief				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	r / SUITE #; CITY;	STATE; Z	IP CODE
TREASURER ADDRESS	16 Valley Ridge Rd.					
ABBIREOS						
(Residence or Business)						
	Fort Worth, TX 76107					
7 CAMPAIGN TREASURER		NE NUMBER	EXTENSION			
PHONE	(817) 732-4450					
_						
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff	15th day after campaign treas	
					appointment (officeholder onl	y)
	X July 15	8th day before	election	Exceeded modified	Final Report (Attach C/OH-FF	R)
	-			reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	02/25/2024	Τŀ	HROUGH	06/30/2024		
	02/25/2024			00/30/2024	+	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
			Seneral	Special		
				i		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Dist	rict 99 Tarrant		State Representa	ative District 99	
		GO 1	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	1474444	hice state ty u	c	Version V4.1.0	d278aba0
Forms provided by Te	xas Eulius Commission	www.et	hics.state.tx.u	5	version v4.1.0	.us/sabau

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 36

13 C / OH NAME	Geren, Charles L. (Th	ne Honorable)	14 Filer ID (00029493	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	oolitical contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Associated Republic of Texas		
		COMMITTEE ADDRESS		
	SPECIFIC SPECIFIC	807 Brazos, Suite 601		
		Austin, TX 78701		
		COMMITTEE CAMPAIGN TREASURER NAME		
		De Leon, Hector		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		901 S. Mopac, Suite 300		
		Austin, TX 78746		
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 88,250.00
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 265,673.26
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 738,704.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT	·			-
		l swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Hono	orable Charles L. Gere	en
			f Candidate or Officehol	
AFFIX NC)TARY STAMP / SEAL AB(DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oath
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 36 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Geren, Charles L. (The Honorable) 00029493 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 88,250.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 0.00 \$ X SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0.00 З. 4. X SCHEDULE E: LOANS \$ 0.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 265,673.26 \$ X 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 0.00 \$ 7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 0.00 \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 0.00 8. \$ X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 0.00 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	The Instru	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/36	
2	FILER NAME				3	Filer ID (Ethics Commiss	ion Filers)
ľ		les L. (The Honorable)			Ű	00029493	
4	Date	5 Full name of contributor out-of-state PA	C (ID#:)	7	Amount of Contribution (\$)	
	02/27/2024	A&M PAC					\$2,500.00
		6 Contributor address; City; State; Zip Code					
		Austin, TX 78768					
8	Principal occu	pation / Job title (See Instructions)	g	Employer (See Instructions)		
⊨	Date	Full name of contributor out-of-state PA	C (ID#:)		Amount of Contribution (\$)	
	02/27/2024	Associated General Contractors of Texas		,		(1)	\$2,000.00
	02/21/2024		-				Ψ <u>2</u> ,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78768					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor 🛛 out-of-state PA	C (ID#:)		Amount of Contribution (\$)	
	02/27/2024	Bellina , James & Lisa					\$10,000.00
		Contributor address; City; State; Zip Code					
		Waxhaw, NC 28173					
⊢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	;)		
	President			Rural Broadband Consu		ig, Inc.	
⊨	Data		0.415.4				
	Date		C (ID#:)		Amount of Contribution (\$)	¢1.000.00
	03/01/2024	Benda, Bob					\$1,000.00
		Contributor address; City; State; Zip Code					
		Fort Worth, TX 76108					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PA	C (ID#:)		Amount of Contribution (\$)	
	02/27/2024	Boating Trades Association of Metropoliti		ton PAC			\$500.00
		Contributor address; City; State; Zip Code					
		Contributor address, City, State, Zip Code					
		Houston, TX 77054					
⊢	Drincipal			Employer (Casharting)			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 2/10 Rpt: 5/36	
2 FILER NAME	3	Filer ID (Ethics Commissio	on Filers)
Geren, Charles L. (The Honorable)		00029493	
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
06/10/2024 Brauer Jr., Steve			\$2,500.00
6 Contributor address; City; State; Zip Code			
Fort Worth, TX 76107			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Sales Self	ions)		
Date Full name of contributor out-of-state PAC (ID#:)	1	Amount of Contribution (\$)	
02/27/2024 Bryan, Jeffrey			\$500.00
Contributor address; City; State; Zip Code			
Duncanville, TX 75138	<u> </u>		
Principal occupation / Job title (See Instructions) Employer (See Instructi	ions)		
Date Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)	
02/29/2024 Burch , Scott			\$2,000.00
Contributor address; City; State; Zip Code			
Dallas , TX 75220			
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
President Texas Entertainment	[
Date Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)	
02/29/2024 Chan, Wan-Yu			\$250.00
Contributor address; City; State; Zip Code			
San Antonio, TX 78258			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tione)		
	.101157		
Date Full name of contributor out-of-state PAC (ID#:)	, T	Amount of Contribution (\$)	
Date Full name of contributor out-of-state PAC (ID#:) 03/04/2024 Charter School Now PAC	<u>۱</u>	Amount of Contribution (\$)	\$1,000.00
	,	Amount of Contribution (\$)	\$1,000.00
03/04/2024 Charter School Now PAC)	Amount of Contribution (\$)	\$1,000.00
03/04/2024 Charter School Now PAC)	Amount of Contribution (\$)	\$1,000.00
03/04/2024 Charter School Now PAC)	Amount of Contribution (\$)	\$1,000.00
03/04/2024 Charter School Now PAC Contributor address; City; State; Zip Code) 	Amount of Contribution (\$)	\$1,000.00
03/04/2024 Charter School Now PAC Contributor address; City; State; Zip Code Austin, TX 78704) ions)	Amount of Contribution (\$)	\$1,000.00
03/04/2024 Charter School Now PAC Contributor address; City; State; Zip Code Austin, TX 78704) 	Amount of Contribution (\$)	\$1,000.00

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 6/36	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		les L. (The Honorable)			00029493	, , , , , , , , , , , ,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/29/2024	Consulting Engineers PAC, Inc.				\$500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/29/2024	Davari, Ali				\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston TV 77042				
	Dringinal occi	Houston, TX 77042 Ipation / Job title (See Instructions)	Employer (See Instructions	<u>,</u>		
	Ρπιτιμαι στου		Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/29/2024	Eidson, Kristi & Timothy				\$750.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78259				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
_	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/04/2024	Enterprise Products Partners Texas				\$2,000.00
		Contributor address; City; State; Zip Code				
		Herster TV 77000				
	Dringingloog	Houston, TX 77002	Employer (See Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
-	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/04/2024	ExxonMobil PAC				\$1,500.00
		Contributor address; City; State; Zip Code				
		Indiag TV 75030				
	Principal occu	Irving , TX 75039 pation / Job title (See Instructions)	Employer (See Instructions)	<u></u>		
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	The Instru	ction Guide explains how to comple	te this fo	orm.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 7/36	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Geren, Char	les L. (The Honorable)				00029493	
4	Date	5 Full name of contributor out-of-state	PAC (ID#:)	7	Amount of Contribution (\$)	
	02/29/2024	Fairchild, David					\$2,000.00
		6 Contributor address; City; State; Zip Code					
		Southlake, TX 76092					
8		pation / Job title (See Instructions)		9 Employer (See Instructions			
	President			Empire Media Services,	Inc	2.	
	Date	Full name of contributor 🔲 out-of-state	PAC (ID#:)		Amount of Contribution (\$)	
	02/29/2024	Friends of UNT PAC					\$2,000.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75380-3272					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor 🔲 out-of-state	PAC (ID#:)		Amount of Contribution (\$)	
	02/29/2024	HNTB Holdings Ltd. PAC					\$500.00
		Contributor address; City; State; Zip Code					
		Kansas City, MO 64105			Ļ		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
					-		
	Date	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)	
	02/29/2024	Halff Associates - State PAC					\$500.00
		Contributor address; City; State; Zip Code					
		Disbordson TV 75001					
	Dringing ago	Richardson, TX 75081		Employer (Cap Instructions			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)	* 4 5 00 00
	04/24/2024	Hodges, L. Allen					\$1,500.00
		Contributor address; City; State; Zip Code					
		Fort Worth TX 76107					
	Drinoinal asso	Fort Worth, TX 76107		Employer (See Instructions			
	Owner	pation / Job title (See Instructions)		Employer (See Instructions Hodges Cos	リ		
	UWIEI			1 IUUYES CUS			

	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/36	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		rles L. (The Honorable)			-	00029493	- ,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/04/2024	JPMorgan Chase & Co P/					\$500.00
	ł	6 Contributor address; City; St	tate; Zip Code				
		Washington, DC 20004					
8	Principal occu	<pre>upation / Job title (See Instructions</pre>	;)	9 Employer (See Instructions	,)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/29/2024	Mehmeti, Nick					\$1,000.00
	I	Contributor address; City; St					
		Dallas, TX 75230					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	;)		
			1				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/06/2024	NuStar PAC	—				\$5,000.00
	I	Contributor address; City; St	state; Zip Code				
			· ·				
	I	San Antonio, TX 78278-10	.609				
	Principal occu	pation / Job title (See Instructions	š)	Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/29/2024	Oneok Employees PAC					\$500.00
		Contributor address; City; St					
		Tulsa, OK 74102					
	Principal occu	pation / Job title (See Instructions	٤)	Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/29/2024	Pape-Dawson Engineers	PAC				\$500.00
		Contributor address; City; St	tate; Zip Code				
		San Antonio, TX 78213					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	;)		
			,				
				<u> </u>			
1							

The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/36
2 FILER NAME	les L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00029493
	, , , <u>,</u>		
4 Date 02/29/2024	5 Full name of contributor Out-of-state PA Parkhill PAC	AC (ID#:)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code		1
	Lubbock, TX 79423		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
02/29/2024	STV Infrastructure PAC		\$500.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75235		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	š)
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
02/29/2024	Saxenian, Stephen		\$1,250.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401		
	pation / Job title (See Instructions)	Employer (See Instructions	
President		Saxenian Family Partne	ərship
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
03/04/2024	Slack Davis Sanger LLP		\$2,000.00
	Contributor address; City; State; Zip Code		
Dringing and	Austin, TX 78746		Į
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
02/29/2024	Solomon, Christopher		\$500.00
	Contributor address; City; State; Zip Code		
	Cedar Park, TX 78613		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)
		I	

				_		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/36	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		les L. (The Honorable)			00029493	, ,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	02/27/2024	Steven B. Siddons Investments				\$500.00
		6 Contributor address; City; State; Zip Code				
		Fort Worth , TX 76116				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	04/04/2024	Sysco Corp. Good Gov Committee, Inc.				\$1,000.00
		Houston, TX 77077				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/13/2024	TMPA PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78752				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
=	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
	04/04/2024				· · · · · · · · · · · · · · · · · · ·	\$1,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75254				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
╞			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 500.00
	03/22/2024	TXTA TruckPac				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78762				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L		
				''		
⊢			<u> </u>			

The In	struction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/10 Rpt: 11/36	
2 FILER N	AME			3	Filer ID (Ethics Commission	on Filers)
	Charles L. (The Honorable)				00029493	5111 110.0,
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
03/22/2						\$25,000.00
	6 Contributor address; City; Sta					
		,				
	Austin, TX 78701					
8 Principal	occupation / Job title (See Instructions))	9 Employer (See Instructions	;)		
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
02/29/2						\$1,000.00
	Contributor address; City; State; Zip Code					
	Austin, TX 78701-1586					
Principal	occupation / Job title (See Instructions))	Employer (See Instructions	;)		
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
03/01/2						\$2,000.00
	Contributor address; City; Sta					
	Kerrville, TX 78028					
Principal	occupation / Job title (See Instructions))	Employer (See Instructions)	;)		
				_		
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
03/01/2	024 Texas Manufactured Hous					\$1,000.00
	Contributor address; City; Sta					
B de ste s	Austin, TX 78759			Ĺ		
Principal	occupation / Job title (See Instructions)	1	Employer (See Instructions	;)		
			<u> </u>	—		
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
02/29/2		-	Committee			\$1,000.00
	Contributor address; City; Sta	ate; Zip Code				
Drincipa	Austin, TX 78701		Employer (Soo Instructions			
ΡΠιτυμαι		,	Employer (See Instructions	り		

					1	Total pages Schodule A1:	
	The Instru	ction Guide explains hov	v to complete this f	orm.		Total pages Schedule A1: Sch: 9/10 Rpt: 12/36	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Geren, Char	rles L. (The Honorable)				00029493	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/29/2024	The Storage Place					\$750.00
		6 Contributor address; City; S	State; Zip Code		1		
		Corpus Christi, TX 78412	2				
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instructions)	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	—	Amount of Contribution (\$)	
	02/29/2024	Thompson, Teresa		/		Allount of Contribution (4)	\$1,000.00
	02/20/202	Contributor address; City; S			•		Ψ1,000.00
			late, zip couc				
		San Antonio, TX 78217					
	Principal occu	upation / Job title (See Instruction	iS)	Employer (See Instructions)	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/25/2024	Union Pacific Corporation	n Fund For Effective Go	overnment			\$2,000.00
		Contributor address; City; S	state; Zip Code		1		
		Washington, DC 20005					
	Drincinal occu	upation / Job title (See Instructions		Employer (See Instructions)	<u> </u>		
	Fillopa ooca		5)		ッ		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/15/2024	United Foodand Commer	rical Workers Internatio	nal Union			\$250.00
		Contributor address; City; S	state; Zip Code		1		
		Washington, WA 20006					
-	Principal occu	upation / Job title (See Instructions		Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
			5)		''		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	02/29/2024	Westwood PAC				,	\$500.00
		Contributor address; City; S	State; Zip Code				
		-					
		Plano, TX 75093					
	Principal occu	upation / Job title (See Instruction	S)	Employer (See Instructions)	5)		
			!	<u> </u>			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/10 Rpt: 13/36	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
[~		les L. (The Honorable)		ľ	00029493	
L						
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/27/2024	White, Joe				\$500.00
		6 Contributor address; City; State; Zip Code				
		Fort Worth, TX 76114				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
⊨	Data				Amount of Contribution (\$	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	*• • • • • • •
	02/29/2024	Wise, Curtis				\$2,000.00
		Contributor address; City; State; Zip Code				
		Flower Mound, TX 75022				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	President		8128 Camp Bowie, LLC			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	<u> </u>	Amount of Contribution (\$)	
)			¢1 000 00
	03/18/2024	Zachry Corporation PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78265-3240				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
1						
1						

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 14/36 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Geren, Charles L. (The Honorable) 00029493 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9) (If applicable) pledge (\$) 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS		SCHEDUI	LEE
The Instruction Guide explains how to complete this form.		ges Schedule E: 1 Rpt: 15/36	
2 FILER NAME Geren, Charles L. (The Honorable)	3 Filer ID 000294	(Ethics Commission	Filers)
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:)	9 Loan Amount (\$)	
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions))		
14 Description of Collateral 15 Check if personal funds we None	re deposited	into political account (See Instructions)	
16 GUARANTOR 17 Name of guarantor INFORMATION INFORMATION		19 Amount Guarante	ed (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instructions)	;)		

	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/Awards/Memorials Expense	Loan Rep Office Ove Polling Ex Printing E Salaries/V	aymer erhead pense xpens Vages	nt/Reimbursement d/Rental Expense e e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 1/21 Rpt: 16/36		Geren, Charles L. (The Honorable)					00029493		
4	Date	5	Payee name							
	03/30/2024		American Airlines							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode		_			
	\$1,055.19		PO Box 582880							
			MD 755							
			Tulsa, OK 74158							
_	DUDDOCE	<u> </u>			(b)					
8	PURPOSE OF		Category (See Categories listed at the top of this sch	nedule)	(u)	Description	outsi	de of Texas. Com	oloto Schadula T	
	EXPENDITURE		Travel Out of District					officeholder living		
						Airfare from [
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office he	eld	
	Date		Payee name							
	05/31/2024		American Airlines							
	Amount (\$)	-	Payee address; City; State	; Zip Co	de					
	\$7,556.94		PO Box 582880	· · · ·						
	φη,00010 .									
			MD 755							
			Tulsa, OK 74158		-					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Travel Out of District					de of Texas. Com officeholder living		
						Airfare	, 17,	описенониет нитту	experise	
						Amare				
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OF	H								
	Date		Payee name							
	05/03/2024		American Airlines							
	Amount (\$)	-	Payee address; City; State	; Zip Co	nde					
	\$1,451.00		PO Box 582880	., zip oc	ac					
	φ1,401.00									
			MD 755							
			Tulsa, OK 74158							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Travel Out of District					de of Texas. Com		
	-					Airfare	, TX,	officeholder living	expense	
						Alliare				
		L								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office he	eld	

	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/Beverag Gift/Awards/M mmittee Legal Services	e Expense emorials Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)		
1		 ²					 ³				
	Sch: 2/21 Rpt: 17/36		Geren, Charles L. (Th	e Honorable)				00029493			
4	Date	5	Payee name								
	03/11/2024		American Airlines								
6	Amount (\$)	7	Payee address; City	: State:	Zip Co	le					
	\$4,639.40		PO Box 582880								
	\$ 1,000110										
			MD 755								
			Tulsa, OK 74158								
8	PURPOSE	(a)	Category (See Categories li	sted at the top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Travel Out of District	·		Check if travel	outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITORE						n, TX	, officeholder living	l expense		
						Airfare					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder na	ime C	Office sou	Jht		Office he	eld		
	Date		Payee name								
	05/03/2024		American Airlines								
⊢	Amount (\$)	-	Payee address; City	· Stato:	Zip Co	10					
	.,			, State,							
	\$3,940.80		PO Box 582880								
			MD 755								
			Tulsa, OK 74158								
	PURPOSE	(a)	Category (See Categories li	stad at the tap of this sch	odulo)	(b) Description					
	OF	ľ	Travel Out of District		euule)		outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE					Check if Austin	n, TX	, officeholder living) expense		
						Airfare					
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder na	ime C	Office soug	ıht		Office he	eld		
	expenditure to benefit C/Oł					,					
		<u> </u>									
	Date		Payee name								
	06/28/2024		Anedot								
	Amount (\$)		Payee address; City	; State;	Zip Co	le					
	\$205.95		PO Box 84314								
			Baton Rouge, LA 708	84							
			_								
	PURPOSE OF	(a)	Category (See Categories li	sted at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Accounting/Banking					ide of Texas. Com			
								, officeholder living	l expense		
						Banking Fee	5				
	Complete ONLY if direct		Candidate/Officeholder na	ime C	Office sou	Iht	_	Office he	eld		
	expenditure to benefit C/OI	Н									

			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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	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: 3/21 Rpt: 18/36		Geren, Charles L. (The Honorable)				00029493	
4	Date 05/31/2024	5	Payee name Avis Rent A Car					
6	Amount (\$) \$143.72	7	Payee address; City; State; 6000 Airline Dr., Suite 112 Beaumont, TX 77705	Zip Co	le			
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rental Car Service							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held	
	Date		Payee name					
	05/03/2024		Avis Rent A Car					
	Amount (\$) \$50.41		Payee address; City; State; 6000 Airline Dr., Suite 112 Beaumont, TX 77705	Zip Coo	le			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense İCE	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	Office sou	ht		Office held	
	Date		Payee name					
	03/11/2024		Avis Rent A Car					
	Amount (\$) \$68.13		Payee address;City;State;6000 Airline Dr., Suite 112	Zip Co	le			
			Beaumont, TX 77705					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)			de of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	Office sou	ht		Office held	

	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/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	oense 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: 4/21 Rpt: 19/36		Geren, Charles L. (The Honorable)				00029493		
4	Date 03/01/2024	5	Payee name Azle Area Chamber of Commerce						
6	Amount (\$) \$1,000.00		Payee address; City; State; 252 W. Main Street, Suite 102 Azle, TX 76020	Zip Co	le				
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 18th Annual Clay Shoot Event 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held		
	Date		Payee name						
	03/01/2024		Baird Walker, CPA						
	Amount (\$) Payee address; City; State; Zip Code \$135.00 101 Summit Ave., Suite 100 Fort Worth , TX 76102								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)	Check if Austir	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense rvices for 2023 1099's		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held		
	Date		Payee name						
	05/31/2024		Crescent Hotel Fort Worth						
	Amount (\$) \$5,412.50		Payee address;City;State;3300 Camp Bowie Blvd.	Zip Co	le				
			Fort Worth, TX 76107						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel In District	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense NG		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held		

		EXPEND	TURE CATEGORIES FC	R BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	e e	Expense Office O Polling E porials Expense Printing	Expense Wages/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:	ILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 5/21 Rpt: 20/36	Geren, Charles L. (The	Honorable)		00029493
4	Date 03/11/2024	ayee name Crescent Hotel Fort Wo	orth		
6	Amount (\$)	ayee address; City;	State; Zip C	ode	
	\$1,989.96	300 Camp Bowie Blvc Fort Worth, TX 76107	l.		
_				1	
8	PURPOSE OF EXPENDITURE	Category (See Categories list Travel In District	ed at the top of this schedule)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder nan	ne Office so	ught	Office held
	Date	ayee name			
	03/11/2024	ort Worth Fire Charitie	2S		
	Amount (\$)	ayee address; City;	State; Zip C	ode	
	\$1,500.00	855 Tulsa Way Fort Worth, TX 76107			
	PURPOSE OF EXPENDITURE	ategory _{(See Categories list} Contributions/Donation Candidate/Officeholder	s Made By	Check if Austin	outside of Texas. Complete Schedule T. h, TX, officeholder living expense sic Sponsorship
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder nan	ne Office so	ught	Office held
	Date	ayee name			
	03/01/2024	Garza, Sandy			
	Amount (\$) \$500.00	Payee address; City; o box 1895	State; Zip C	ode	
		Fort Worth, TX 76101		1	
	PURPOSE OF EXPENDITURE	category (See Categories list Salaries/Wages/Contra		Check if Austin	outside of Texas. Complete Schedule T. h, TX, officeholder living expense h Contract Labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder nan	ne Office so	ught	Office held

		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 Committee 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)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/21 Rpt: 21/36	Geren, Charles L. (The Honorable)	00029493
4	Date 04/01/2024	5 Payee name Garza, Sandy	
6	Amount (\$) \$500.00	 Payee address; City; State; Zip Code po box 1895 Fort Worth, TX 76101 	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T. TX, officeholder living expense Ontract labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/01/2024	Garza, Sandy	
	Amount (\$) \$500.00	Payee address; City; State; Zip Code po box 1895	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense contract Labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/07/2024	Garza, Sandy	
	Amount (\$) \$500.00	Payee address; City; State; Zip Code po box 1895	
		Fort Worth, TX 76101	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense contract Labor
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

			EXPENDITURE CA	TEGOR	RIES FOR	BOX 8(a)		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/Awards/Memorials Expens tee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense								
1	Total pages Schedule F1:	2 FII	ER NAME				3	Filer ID (Ethics Commission Filers)								
	Sch: 7/21 Rpt: 22/36		eren, Charles L. (The Honorab	le)				00029493									
4	Date 03/11/2024		yee name EB Austin #425														
6	Amount (\$)	7 Pa	yee address; City;	State;	Zip Coo	е											
	\$142.83		00 E. 41st St.														
		AL	istin, TX 78751														
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies 																
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		didate/Officeholder name	0	office soug	ht		Office held	1								
	Date	Pa	yee name														
	03/30/2024	He	ertz Dollar Thrifty														
	Amount (\$)	Pa	yee address; City;	State;	Zip Coo	е											
	\$130.78		0 Gallatin Field Rd. Igrade, MT 59714														
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the top o avel Out of District	of this sche	edule)		ı, ТХ,	de of Texas. Comple officeholder living ex Car Service									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	0	office soug	ht		Office held	I								
	Date	Pa	yee name														
	06/05/2024		I Country Springs														
	Amount (\$) \$28.40	Pa	yee address; City; 019 S IH 35 Frontage Rd.	State;	Zip Coc	e											
		Αι	istin, TX 78747														
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the top o fice Overhead/Rental Expense		edule)		ı, ТХ,	de of Texas. Comple officeholder living ex enser Rental									
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		didate/Officeholder name	0	office soug	ht		Office held	I								

			EXPENDITURE CATEGO	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/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain	Office O Polling I Printing Salaries	Expens Expens Expen Wage	se s/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: 8/21 Rpt: 23/36		Geren, Charles L. (The Honorable)					00029493					
4	Date	5	Payee name										
	05/03/2024		Hill Country Springs										
6	Amount (\$)	7	Payee address; City; Stat	e; Zip C	code								
	\$8.66		10019 S IH 35 Frontage Rd.										
			Austin, TX 78747										
8	PURPOSE	(a)	Category (See Categories listed at the top of this se	abodulo)	(b)	Description							
-	OF		Office Overhead/Rental Expense	chequie)	(-)		outsi	ide of Texas. Complete Schedule T.					
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense					
						Bottled Wate	r Se	ervice					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sc	ought			Office held					
	Date		Payee name										
	06/05/2024		Hilton Garden Inn										
	Amount (\$)		Payee address; City; Stat	e; Zip C	code								
	\$161.74		3755 I-10	· •									
	+=0=												
			Beaumont, TX 77705										
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description							
	EXPENDITURE		Travel Out of District					ide of Texas. Complete Schedule T.					
							I, IX,	, officeholder living expense					
						Louging							
	Complete ONLY if direct		Candidate/Officeholder name	Office so				Office held					
	expenditure to benefit C/OI			Once su	uynt			Once neid					
	Data		D										
	Date 05/31/2024		Payee name Hilton Garden Inn										
	Amount (\$)		5	e; Zip C	code								
	\$163.09		3755 I-10										
			Beaumont, TX 77705										
	PURPOSE	(a)	Category (See Categories listed at the top of this set	chedule)	(b)	Description							
	OF EXPENDITURE		Travel Out of District					ide of Texas. Complete Schedule T.					
	LAFENDITORE						ı, ТХ,	, officeholder living expense					
						Lodging							
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ought			Office held					
	expenditure to benefit C/OI	1											

			EXPENDITURE CATEGO	RIES FOR	R 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	Loan Rep Office Ove Polling Ex Printing E Salaries/M	ayment/Reimbursement rrhead/Rental Expense pense xpense /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: 9/21 Rpt: 24/36		Geren, Charles L. (The Honorable)				00029493	
4	Date 05/03/2024		Payee name Hilton Garden Inn					
6	Amount (\$) \$172.21	7	Payee address; City; State; 3755 I-10 Beaumont, TX 77705	; Zip Co	de			
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held	
	Date		Payee name					
	03/11/2024		Hilton Garden Inn					
	Amount (\$) \$33.91		3755 -10	; Zip Co	de			
	PURPOSE OF EXPENDITURE	(a)	Beaumont, TX 77705 Category (See Categories listed at the top of this sch Travel Out of District	iedule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held	
	Date		Payee name					
	03/11/2024		Hotel Zaza Museum District					
	Amount (\$) \$466.09		Payee address; City; State; 5701 Main St.	; Zip Co	de			
			Houston, TX 77005					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Travel Out of District	nedule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held	

			EXPENDITUR	E CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials B	e Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Distr	uipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 10/21 Rpt: 25/36		Geren, Charles L. (The Hon	orable)				00029493	
4	Date	5	Payee name						
	03/11/2024		Hyde Media Group Azle						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	le			
	\$1,409.60		2615 Centennial Blvd., Suite	e 200					
			Tallahassee, FL 32303						
8	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Advertising Expense					ide of Texas. Compl	
								, officeholder living e	expense
						Political Adve	ertis	sing	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ht		Office hel	d
	Date		Payee name						
	05/17/2024		John McQueeney Campaigr	ı					
	Amount (\$)		Payee address; City;	State:	Zip Co	le			
	\$1,000.00		P.O. Box 100458						
	41,000,000		1.0. 200 100						
			Fort Worth, TX 76185						
	PURPOSE OF	(a)	Category (See Categories listed at th		edule)	(b) Description			
	EXPENDITURE		Contributions/Donations Ma					ide of Texas. Compl , officeholder living e	
			Candidate/Officeholder/Polit	ical Comm	littee	Campaign C		-	expense
						Campaign C	onu	indulori	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	ht		Office hel	d
	Date		Payee name						
	06/05/2024		Juanitas Country Kitchen						
	Amount (\$)		Payee address; City;	State;	; Zip Co	le			
	\$38.07		3113 Nederland Ave.						
			Nederland, TX 77627						
	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Compl	
								, officeholder living e	expense
						Constituents	LUI	nch	
	Complete ONLY if direct	Ļ	Candidate/Officeholder name		Office sou	iht		Office hel	d
	expenditure to benefit C/OI				2000 300	р. н.			~
-									

			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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	oense 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: 11/21 Rpt: 26/36		Geren, Charles L. (The Honorable)				00029493		
4	Date	5	Payee name			I			
	05/03/2024		Kirk Watson for Mayor						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
-	\$450.00		PO Box 1088	1					
			Austin, TX 78767						
8	PURPOSE	(a)			(b) Description				
ľ	OF	(4)	Category (See Categories listed at the top of this sche Contributions/Donations Made By	edule)		outs	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee	Check if Austir	n, TX	a, officeholder living expense		
					Campaign C	ont	ribution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office sou	ht		Office held		
	Date		Payee name						
	05/15/2024		Klick Campaign						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$5,000.00		PO Box 2910						
			Austin, TX 78768						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Contributions/Donations Made By			outside of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Commi	ittee			a, officeholder living expense		
					Campaign C	ont	ribution		
_	Complete ONLY if direct		Candidate/Officeholder name O	office sou	bt		Office held		
	expenditure to benefit C/OI				li it		Office field		
_	Date	Γ	Payee name						
	05/08/2024		Macy Hill for City Council						
	Amount (\$)			Zip Co	le				
	\$500.00		PO Box 471121	2.0 00					
	+000.00								
			Fort Worth, TX 76147						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	EXPENDITURE		Contributions/Donations Made By	ittaa			vide of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Commi	lillee	Campaign C				
					Campaign O	2110			
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name O	office soug	ht		Office held		
	expenditure to benefit C/Oł						5		
-									

	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/Reimt Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contrac The Instruction Guide explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
_	Sch: 12/21 Rpt: 27/36	Geren, Charles L. (The Honorable)	00029493			
4	Date 03/22/2024	Payee name Monticello Neighborhood News				
6	Amount (\$) \$495.00	Payee address; City; State; Zip Code 3329 W 6th Street Fort Worth , TX 76107				
8	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense Elect Charlie Geren Ad			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	03/01/2024	Murphy Nasica				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$63,579.60	815-A Brazos St., Suite 304 Austin , TX 78701				
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense sulting Expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	03/08/2024	Murphy Nasica				
	Amount (\$) \$89,574.29	Payee address; City; State; Zip Code 815-A Brazos St., Suite 304				
		Austin , TX 78701				
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense sulting Expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held			

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/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	oense 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: 13/21 Rpt: 28/36		Geren, Charles L. (The Honorable)				00029493
4	Date 03/08/2024		Payee name Murphy Nasica				
6	Amount (\$)			Zip Co	10		
0	\$6,334.10		Austin , TX 78701	ziρ co	16		
8	PURPOSE			r	(b) Description		
8	OF EXPENDITURE		Category (See Categories listed at the top of this sche Consulting Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense CNSE
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held
	Date		Payee name				
	03/15/2024		Murphy Nasica				
	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$15,000.00		815-A Brazos St., Suite 304 Austin , TX 78701				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Consulting Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense PNSE
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held
	Date		Payee name				
	05/03/2024		Murphy Nasica				
	Amount (\$) \$5,000.00		Payee address; City; State; 815-A Brazos St., Suite 304	Zip Co	le		
			Austin , TX 78701				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Consulting Expense	edule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense PNSE
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - 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: 14/21 Rpt: 29/36		Geren, Charles L. (The Honorable)				00029493
4	Date 05/24/2024	5	Payee name Murphy Nasica				
6	Amount (\$) \$9,993.68	7	Payee address; City; State; 815-A Brazos St., Suite 304 Austin , TX 78701	Zip Coo	le		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Consulting Expense	dule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense PNSE
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice souç	ht		Office held
	Date		Payee name				
	06/21/2024		Murphy Nasica				
	Amount (\$) \$5,000.00		Payee address; City; State; 815-A Brazos St., Suite 304	Zip Coo	le		
	PURPOSE	(2)	Austin , TX 78701		(h) Description		
	OF	(4)	Category (See Categories listed at the top of this sche Consulting Expense	dule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense PISES
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice souç	ht		Office held
	Date		Payee name				
	05/03/2024		Quorum Report				
	Amount (\$) \$389.70		Payee address; City; State; PO Box 8	Zip Coo	le		
			Austin, TX 78767	i			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Advertising Expense	dule)		ı, ТХ,	de of Texas. Complete Schedule T. , officeholder living expense sing
ļ	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Travel in District Travel Out of Dist	uipment & Related Expense		
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 15/21 Rpt: 30/36		Geren, Charles L. (The Honor	able)				00029493	`
4	Date		ayee name						
	03/11/2024		ailhead Smokehouse						
6	Amount (\$) \$251.44	2	ayee address; City; 900 Montgomery St. ort Worth, TX 76107	State;	Zip Coo	le			
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t ood/Beverage Expense	op of this sche	edule)		n, TX	ide of Texas. Comp , officeholder living (]	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	0	office sou	ht		Office hel	d
	Date	Р	ayee name						
	02/26/2024	F	eggie Smith Campaign						
	Amount (\$) \$5,000.00	3	ayee address; City; 00 N. Travis St.	State;	Zip Co	le			
	PURPOSE OF EXPENDITURE	(a) C	therman, TX 75090 ategory _{(See Categories listed at the t} contributions/Donations Made andidate/Officeholder/Politic	e By			ı, TX	ide of Texas. Comp , officeholder living d ribution	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	0)ffice sou	ht		Office hel	d
	Date	P	ayee name						
	03/11/2024		eservation Hotels						
	Amount (\$) \$195.92		ayee address; City; 00-260 Queen St. W.	State;	Zip Co	le			
		Т	oronto Ontario M5V1Z8 Can	ada					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t ravel Out of District	op of this sche	edule)			ide of Texas. Comp , officeholder living (
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	0	Office sou	ht		Office hel	d

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:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 16/21 Rpt: 31/36	Geren, Charles L. (The Honorable)	00029493		
4	Date	Payee name			
	03/11/2024	SD 9			
6	Amount (\$) \$100.00	Payee address;City;State;ZipCode6200 Lake Way			
		NRH, TX 76180			
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense d Program		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	05/03/2024	Spring Creek			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$70.92	6701 Lake Worth Blvd. Fort Worth, TX 76135			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	03/22/2024	Tarrant County Jr. Livestock Show			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$18,620.00	PO Box 162793			
		Fort Worth, TX 76161			
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Image: Contribution of the schedule of the s					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		

	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/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.			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: 17/21 Rpt: 32/36		Geren, Charles L. (The Honorable)				00029493		
4	Date	5	Payee name						
	05/03/2024		The Fort Worth PAC						
6	Amount (\$)	7		Zip Co	le				
	\$1,000.00		3110 Greene Ave.						
			Fort Worth, TX 76109						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche		(b) Description				
-	OF		Contributions/Donations Made By	edule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee		I, TX,	, officeholder living expense		
					Contribution				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	lht		Office held		
	Date		Payee name						
	06/05/2024		The Post Hotel						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$900.77		1600 W. Loop S.						
			Houston, TX 77027						
	PURPOSE	(a)			(b) Description				
	OF	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)	(b) Description Check if travel	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austir	, TX	, officeholder living expense		
					Lodging				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held		
	Date		Payee name						
	03/15/2024		Tri-County Reporter						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$704.80		321 W. Main St.						
			Azle, TX 76020						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T. , officeholder living expense		
					Political Ad				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name O	office sou	ıht		Office held		
┣—									

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 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				Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	FILER NA	AME				3	Filer ID	(Ethics Commission Filers)
	Sch: 18/21 Rpt: 33/36	Geren, C	Charles L. (The Hono	rable)				00029493	
4	Date 03/22/2024	Payee na U-Stor V							
6	Amount (\$)	Payee ad	dress; City;	State:	Zip Cod	e			
-	\$120.00	7111 W.	Vickery Blvd. k , TX 76116	,	F				
8	PURPOSE	a) Category	(See Categories listed at the	ton of this scho	odulo) (b) Description			
	OF EXPENDITURE	Fees	(See Categories insten at the	top of this sche		Check if travel	n, TX,	officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/	Officeholder name	0	Office soug	nt		Office he	eld
	Date	Payee na	ıme						
	05/17/2024	U-Stor V	/ickery						
	Amount (\$)	Payee ad	dress; City;	State;	Zip Cod	e			
	\$120.00		Vickery Blvd. k , TX 76116						
	PURPOSE OF EXPENDITURE	a) Category Fees	(See Categories listed at the	top of this sche	edule) (Check if Austin	n, TX,	officeholder living	plete Schedule T. I expense ampaign Signs
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/	Officeholder name	0	Office soug	nt		Office he	eld
	Date	Payee na	Ime						
	06/21/2024	U-Stor V							
	Amount (\$) \$120.00	Payee ad 7111 W.	dress; City; Vickery Blvd.	State;	Zip Cod	e			
		Benbroo	k , TX 76116						
	PURPOSE OF EXPENDITURE	a) Category Fees	(See Categories listed at the	top of this sche	edule) (Check if Austin	n, TX,	officeholder living	plete Schedule T. I expense ampaign Signs
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/	Officeholder name	0	Office soug	nt		Office he	eld

EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:		Filer ID (Ethics Commission Filers)		
1	Sch: 19/21 Rpt: 34/36	Geren, Charles L. (The Honorable)	00029493		
4	Date 06/14/2024	5 Payee name USPS			
6	Amount (\$) \$204.00	7 Payee address; City; State; Zip Code 251 W. Lancaster Ave. Fort Worth , TX 76102			
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	05/31/2024	USPS			
	Amount (\$) \$204.00	Payee address; City; State; Zip Code 251 W. Lancaster Ave. Fort Worth , TX 76102			
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date 03/11/2024	Payee name USPS			
	Amount (\$) \$204.00	Payee address; City; State; Zip Code 251 W. Lancaster Ave.			
		Fort Worth , TX 76102			
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	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: 20/21 Rpt: 35/36		Geren, Charles L. (The Honorable)				00029493
4	Date 05/31/2024		Payee name Weatherford, Bryan				
6	Amount (\$) \$1,061.66		Payee address; City; State; 4725 Collinwood Fort Worth, TX 76107	Zip Coo	le		
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense os & Tshirts
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held
	Date		Payee name				
	03/15/2024		White Settlement Area Chamber of Con	nmerce			
	Amount (\$) \$500.00		PO Box 150578	Zip Coo	le		
	PURPOSE OF EXPENDITURE		White Settlement, TX 76108 Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi		Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense able Sponsor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held
	Date		Payee name				
	03/29/2024		White Settlement Area Chamber of Con	nmerce			
	Amount (\$) \$50.00		Payee address; City; State; PO Box 150578	Zip Coo	le		
			White Settlement, TX 76108				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held

Total pages Schedule F1: Sch: 21/21 Rpt: 36/36	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Geren, Charles L. (The Honorable) 00029493
Date 06/28/2024	5 Payee name Worthington National Bank
Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 200 West Main Street Arlington, TX 76010
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment Total pages Schedule F1: Sch: 21/21 Rpt: 36/36 Date 06/28/2024 Amount (\$) \$25.00 PURPOSE OF EXPENDITURE