FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088227 14 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Lee NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Finley CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Lee NAME NICKNAME LAST **SUFFIX** Finley **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 836-9277 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 02/25/2024 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Criminal Appeals, Judge

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	Finley, Lee (Mr.)		14 Filer ID (00088227	Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure. These expenditures may have been made without to defice holders are required to report this information.	he candidate's or office	holder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE TYPE COMMITTEE NAME						
	X GENERAL	Bastrop County Conservatives PAC						
		COMMITTEE ADDRESS						
	SPECIFIC	906 Main Street, P.O. Box 157						
		Bastrop, TX 78602						
		COMMITTEE CAMPAIGN TREASURER NAME						
		Cooper, Lawson						
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS					
	906 Main Street, P.O. Box 157							
	Bastrop, TX 78602							
16 CONTRIBUTION TOTALS								
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 5,707.44				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00				
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 6,669.73				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 5,516.33				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 100,000.00				
17 AFFIDAVIT								
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.						
		N	1r. Lee Finley					
		Signature of	Candidate or Officehole	der				
AFFIX NO	TARY STAMP / SEAL AB	DVE						
Sworn to and subs	cribed before me, by the s	aid	, this the	day				
	, 20, to certify which, witness my hand and seal of office.							
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				3 of 14
18 FILER NAM	1E	19 Filer ID	(Ethics C	ommission Filers)
Finley, Le		00088227		
	E SUBTOTALS		SUB	TOTAL AMOUNT
NAME OF :	SCHEDULE			
1. X	\$	4,827.94		
2. X	\$	879.50		
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	\$			
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. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	6,669.73
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		sc	HEDULE	A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages So Sch: 1/4 Rpt		1:
	FILER NAME Finley, Lee (3	Filer ID (Eth 00088227	ics Commissi	ion Filers)
4	Date 02/27/2024				7	Amount of Col	ntribution (\$)	\$5.52
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	<u></u>			
10 Contributor's employer/law firm 11 Law firm of contributor's					oous	se (if any)		
12	If contributor is	is a child, law firm of parent(s) (if a	any)					
Date O3/23/2024 Full name of contributor out-of-state PAC (ID#: Bouma, Melissa Contributor address; City; State; Zip Code					Amount of Co	ntribution (\$)	\$104.48	
		McKinney, TX 75071						
	Contributor's F Dental Hygie	Principal Occupation		Contributor's Job Title				
		employer/law firm		Law firm of contributor's sp	วดบร	se (if any)		
	If contributor is	is a child, law firm of parent(s) (if a	any)	<u> </u>				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	T	Amount of Cor	ntribution (\$)	
04/23/2024 Bouma, Melissa Contributor address; City; State; Zip Code McKinney, TX 75071							\$104.48	
		Principal Occupation		Contributor's Job Title				
	Dental Hygie							
Contributor's employer/law firm Law firm of contributor's s					ous	se (if any)		
	If contributor is	is a child, law firm of parent(s) (if a	any)					

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Sch: 2/4 F	s Schedule A(J): Rpt: 5/14	1:
2	FILER NAME Finley, Lee (3	Filer ID (I	Ethics Commiss 7	ion Filers)
4	Date 02/26/2024	Canyon Lake Republican Women 6 Contributor address; City; State; Zip Code			7	Amount of	Contribution (\$)	\$750.00
_	O tuile , steelle	Canyon Lake, TX 78133		To Committee to Joh Tide				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title				
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	ous	se (if any)			
12	! If contributor is	s a child, law firm of parent(s) (if a	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	$\overline{\top}$	Amount of	Contribution (\$)	
	02/27/2024 Downs, Joel Contributor address; City; State; Zip Code							\$100.00
Bedford, TX 76021					<u>L</u>			
	Contributor's F	Principal Occupation		Contributor's Job Title				
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)		
	If contributor is	is a child, law firm of parent(s) (if a	any)	,				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	П	Amount of	Contribution (\$)	
	02/26/2024	Green, Maureen Contributor address; City; S	tate; Zip Code					\$17.00
		Los Angeles, TX 91423						
	Contributor's F	Principal Occupation		Contributor's Job Title				
Contributor's employer/law firm				Law firm of contributor's sp	ous	se (if any)		
	If contributor is	is a child, law firm of parent(s) (if a	any)					

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/4 Rpt: 6/14
2	FILER NAME Finley, Lee (3 Filer ID (Ethics Commission Filers) 00088227
4	Date 03/16/2024	 5 Full name of contributor Hilber, Jill 6 Contributor address; City; State Aubrey, TX 76227 	out-of-state PAC (ID#:_ te; Zip Code		7 Amount of Contribution (\$) \$100.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
10 Contributor's employer/law firm 11 Law firm of cont				11 Law firm of contributor's sp	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if ar	ny)		
Date 03/02/2024 Full name of contributor out-of-state PAC (ID#: Meehan, Tony Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$1,041.98
		Mansfield, TX 76063			
		Principal Occupation		Contributor's Job Title	
	Unknown			Unknown	
	Contributor's of Unknown	employer/law firm		Law firm of contributor's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if ar	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
05/20/2024 Preston West Republican Women Contributor address; City; State; Zip Code Dallas , TX 75229					\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if ar	ly)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1		
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 4/4 Rpt: 7/14		
2	FILER NAME Finley, Lee (3 Filer ID (Ethics Commission Filers) 00088227		
4	Date 06/03/2024 Somethal, William Gout-of-state PAC (ID#:				7 Amount of Contribution (\$) \$1,000.00		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	•		
	Unknown			Unknown			
10	Contributor's of Unknown	employer/law firm		11 Law firm of contributor's sp	pouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if an	у)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
03/11/2024 Smith, Sheldon Contributor address; City; State; Zip Code San Marcos, TX 78666			-		\$104.48		
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Continuators	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's spouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if an	y)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
	04/18/2024	Wilson County Republican Contributor address; City; Sta Floresville, TX 78114		ive Committee	\$1,000.00		
	Contributor's I	Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm Law firm of contributor			Law firm of contributor's sp	pouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if an	y)				

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: 8/14 FILER NAME 3 Filer ID (Ethics Commission Filers) Finley, Lee (Mr.) 00088227 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 05/20/2024 Glashee, Kevin \$667.00 i 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) Glasheen, Valles, Inderman, LLP 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 05/01/2024 Wintersteen, Marylee \$212.501 Contributor address; City; State; Zip Code Rockport, TX 78382 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) unknown unknown Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) unknown If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nse Travel Out of District es/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 1/5 Rpt: 9/14	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4	Date 05/09/2024	5 Payee name CAPITOL PROMOTIONS	-
6	Amount (\$) \$1,443.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO BOX 231 Glenside, PA 19038	
8	PURPOSE OF EXPENDITURE	Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ideo production and editing
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 05/24/2024	Payee name Doordash	
	Amount (\$) \$66.10 Reimbursement from political contributions intended	Payee address; City; State; Zip Code TX	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense D	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense oor dash Convention
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 05/09/2024	Payee name Double U Marketing and Communications	
	Amount (\$) \$172.00	Payee address; City; State; Zip Code 1608 S. Washington	
	Reimbursement from political contributions intended	Amarillo, TX 79102	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ush Cards
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	/Awards/Memorials Expense Printing Expense gal Services Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)		
			The Instruction Guide explains I	how to co	omplete this form.				
1	Total pages Schedule G:	2 FILER NAME	Ē			3	Filer ID	(Ethics Commission Filers)	
	Sch: 2/5 Rpt: 10/14	Finley, Lee	(Mr.)				000882	227	
4	Date	5 Payee name							
	05/28/2024	FOGO SAN	I ANTONIO						
6	Amount (\$)	7 Payee addre	ss; City; State;	Zip Co	ode				
	\$222.13	-							
	Reimbursement from								
	political contributions intended	TX							
_					la.				
8	PURPOSE OF		ee Categories listed at the top of this sche	edule)	(b) Description	=		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense	
	EXPENDITURE	Food/Bevei	age Expense		L	_			
					Dinner at Conver	ntioi	n with C	consultant	
9	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	holder name		Office sought			Office held	
	C/OH								
	Date	Payee name							
	05/20/2024	Fed Ex							
	Amount (\$)	Payee addre	ss; City; State;	Zip Co	ode				
	\$69.31								
	Reimbursement from								
	political contributions intended	TX							
	PURPOSE	Category (s	ee Categories listed at the top of this sche	edule)	Description	Ch	eck if trave	el outside of Texas. Complete Schedule T.	
	OF	Advertising				T Ch	eck if Austi	in, TX, officeholder living expense	
	EXPENDITURE	ا ا	,		State Convention	าร			
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit								
	C/OH								
	Date	Payee name							
	05/22/2024	Fed Ex							
	Amount (\$)	Payee addre	ss; City; State;	Zip Co	ode				
	\$105.58								
	Reimbursement from								
	political contributions intended	TX							
	PURPOSE	_	0-4	! -! - \	Description	7 Ch	ook if trovo	el outside of Texas. Complete Schedule T.	
	OF		ee Categories listed at the top of this sche	eaule)	Description	=		in, TX, officeholder living expense	
	EXPENDITURE	Advertising	Expense		State Convention	_		3 · p · · ·	
					State Convention	1			
	Complete ONLY !! -!!	Condidata (Offi	holder name		Office accorded			Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	noluer name		Office sought			Office held	
	C/OH								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Salaries/\	xpense Nages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above	e)
1	Total pages Schedule G: Sch: 3/5 Rpt: 11/14	2 FILER NAI Finley, Le				3 Filer ID (Ethics Commission 00088227	Filers)
4	Date	5 Payee nan					
	05/28/2024	1	HYATT SAN ANTONI				
6	Amount (\$)	7 Payee add	ress; City;	State; Zip Co	ode		
	\$677.21						
	Reimbursement from political contributions intended	TX					
8	PURPOSE OF	(a) Category	(See Categories listed at the top of	this schedule)	(b) Description	Check if travel outside of Texas. Complete S	
	EXPENDITURE	Travel In	District		L	Check if Austin, TX, officeholder living expens	se
					Hotel at State Co	onvention	
9	Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Offic	ceholder name		Office sought	Office held	
	Date	Payee nan	ne				
	05/21/2024	GRAND I	HYATT SAN ANTONIO				
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode		
	\$343.63						
	Reimbursement from political contributions intended	TX					
	PURPOSE OF	Category	(See Categories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete S	
	EXPENDITURE	Travel In	District		L	Check if Austin, TX, officeholder living expens	se
					State Convention	1	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offic	ceholder name		Office sought	Office held	
	Date	Payee nan	ne				
	04/02/2024	l í	Directions				
	Amount (\$) \$3,225.80 Reimbursement from political contributions intended	Payee add 403 Daws Suite 8 San Anto	•	State; Zip Co	ode		
	PURPOSE		(See Categories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete S	
	OF EXPENDITURE	Advertisir	ig Expense		L Video oditina sus	Check if Austin, TX, officeholder living expens	se
					Video editing and	ı ıvarralıdı iees	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Offic	ceholder name		Office sought	Office held	

SCHEDULE G

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials E Legal Services The Instruction Gu	Expense		xpense Vages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2	FILER NAME	Ξ				3	Filer ID (Ethics Commission Filers)	
	Sch: 4/5 Rpt: 12/14		Finley, Lee	(Mr.)					00088227	
4	Date	5	Payee name							
	05/07/2024		SHELL SEF	RVICE						
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode			
	\$73.65									
	Reimbursement from political contributions intended		WAXAHAC	HIE, TX						
8	PURPOSE	(a)	Category (s	ee Categories listed at th	e top of this sche	edule)	(b) Description	=	eck if travel outside of Texas. Complete Schedule	: T.
	OF EXPENDITURE		Travel In Di	strict			L	Ch	eck if Austin, TX, officeholder living expense	
							Gas			
Ļ		Ļ							25.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought		Office held	
	Date		Payee name							
	05/20/2024		Texas GOF)						
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode			_
	\$79.00									
	Reimbursement from									
	political contributions intended		TX							
	PURPOSE		Category (s	ee Categories listed at th	e top of this sch	edule)	Description	Ch	eck if travel outside of Texas. Complete Schedule	: Т.
	OF EXPENDITURE		Advertising	Expense				Ch	eck if Austin, TX, officeholder living expense	
	ZAI ZABITORZ						State Convention	n Ad	Imission	
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Office	holder name			Office sought		Office held	
	C/OH									
	Date		Davisa nama							
	05/28/2024		Payee name Uber							
	Amount (\$)	┝	Payee addre	ss; City;	State:	Zip Co	ado.			
	\$34.09		rayee addre	55, City,	Siale,	Zip Cc	oue			
	Reimbursement from political contributions intended		TX							
	PURPOSE OF			ee Categories listed at th	e top of this sche	edule)	Description	=	eck if travel outside of Texas. Complete Schedule	: Т.
	EXPENDITURE		Travel In Di	strict			L	Cn	eck if Austin, TX, officeholder living expense	
							Uber			
	Complete ONLY if allowed	<u></u>	adidata/Offi-	holder reserve			Office accorded		Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Office	noider name			Office sought		Office held	
l										

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.		T T	ravel in Distric ravel Out of D		
		i	<u> </u>	10W to CC	omplete this form.			
1	Total pages Schedule G:	2 FILER NAMI				1	•	Ethics Commission Filers)
	Sch: 5/5 Rpt: 13/14	Finley, Lee	(Mr.)			0	0088227	
4	Date	5 Payee name						
	05/01/2024	Uber						
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode			
	\$26.92							
	Reimbursement from							
	political contributions intended	TX						
_					(h) Decemention F	7 Char	ale if traveal acute	side of Toyan Complete Cahadula T
8	PURPOSE OF	1	ee Categories listed at the top of this sche	edule)	(b) Description			side of Texas. Complete Schedule T. K, officeholder living expense
	EXPENDITURE	Travel In D	ISINCI		Political Event		,	,,
					Folitical Everit			
_	Operation ONLY if allower	0	h-1d		Office accorded			O#: -
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	nolder name		Office sought		(Office held
	C/OH							
	Date	Payee name						
	05/01/2024	Uber						
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	nde			
	\$30.96	Uber	oss, Oily, State,	Zip Ct	oue			
		Obei						
	Reimbursement from political contributions							
	intended	TX						
	PURPOSE	Category (S	ee Categories listed at the top of this sche	edule)	Description	=		side of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel In D	istrict		L	Chec	ck if Austin, TX	K, officeholder living expense
					Political Event			
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		(Office held
	C/OH							
	Data	<u> </u>						
	Date 05/21/2024	Payee name						
		Uber						
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode			
	\$100.35							
	Reimbursement from political contributions							
	intended	TX						
	PURPOSE	Category (S	ee Categories listed at the top of this sche	edule)	Description	Chec	ck if travel outs	side of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel In D	istrict			Chec	ck if Austin, TX	K, officeholder living expense
	LXI LINDITORL				Paxton Event			
		Candidate/Office	holder name		Office sought		(Office held
	expenditure to benefit C/OH							
_	0,011							

	OUTSTAN	SCHEDULE L	
	The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 14/14
2	FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
	LENDER INFORMATION	4 Name of lender Finley, Lee (Mr.)	•
		5 Lender address; City; State; Zip Code	
		Richardson, TX 75082-3102	
	GUARANTOR INFORMATION	6 Name of guarantor	
	X not applicable	7 Guarantor address; City; State; Zip Code	