# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commiss 00080443	ion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	The Honorable	Rhetta A.			Date Received  ELECTRONICA	LLY FILED
	NICKNAME	LAST Bowers		SUFFIX	07/15/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT /	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	3526 Lakeview Pkwy. Ste.				Receipt #	Amount
Change of Address	Rowlett, TX 75088				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>.</u>	
TREASURER NAME		Richie L.				
		LAST Butler		SUFFIX		
6 CAMPAIGN	STREET ADDRESS (NO PO I	DOV DI EVSE):	ADT	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	5710 E. R L Thorton Fwy.	BOX PLEASE),	APT	/ SUITE #, CITT,	31A	TE, ZIP CODE
(Residence or Business)	Dallas, TX 75223					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONI (214) 887-3903	E NUMBER E	EXTENSION			
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after can appointment (office	
	X July 15	8th day before 6	election E	Exceeded modified eporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2024	TH	IROUGH	Month Day 06/30/202	Year 4	
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		rimary eneral	ELECTION TYPE Runoff Special	Other	
			- ··			
11 OFFICE	OFFICE HELD (if any) State Representative Distri	irt 113 Dallac		12 OFFICE SOUGHT State Representa		
	State Representative Distri	ict 113 Dallas		State Nepresent	ative District 113	
		GO T	O PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

2 of 87

13 C / OH NAME	Bowers, Rhetta A. (T	he Honorable)		14 Filer ID 00080443	(Ethics Com	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	accepted or political expenditumay have been made without equired to report this information	the candidate's or offic	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM				
	GENERAL					
		COMMITTEE ADD	RESS			
	SPECIFIC					
		COMMITTEE CAM	PAIGN TREASURER NAME			
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS 1. TOTAL UNITEMIZED POLITICAL OR GUARANTEES OF LOANS, C					, \$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	31,812.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					\$	2,318.77
	4. TOTAL POLITIC	CAL EXPENDITURE	S		\$	27,850.73
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		S MAINTAINED AS OF THE L	AST DAY OF THE	\$	15,527.87
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT			I swear, or affirm, under penalt true and correct and includes a			
			under Title 15, Election Code.			
			The Honor	rable Rhetta A. Bow	ers	
			Signature of	Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
			my hand and seal of office.			
Signature of office	cer administering	Printed name	of officer administering	Title of office	er administer	ing oath

#### SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

			C	JVER 3	3 of 87
I	ER NAN	ME chetta A. (The Honorable)	<b>19</b> Filer ID 00080443	(Ethics Co	mmission Filers)
l	ME OF		SUBT	TOTAL AMOUNT	
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	31,812.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	27,850.73
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	· 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	· 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	· 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/37 Rpt: 4/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	on Filers)
4	Date 02/25/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75232				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#:_Andress, Nanalie  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$35.00
	Principal occu	Irving, TX 75063 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#: Andress, Nanalie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00
	Principal occu	Pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 01/18/2024	Full name of contributor out-of-state PAC (ID#:_ Atmos Energy Corporation PAC Contributor address; City; State; Zip Code Dallas, TX 75240-2630			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/26/2024	Full name of contributor out-of-state PAC (ID#:_ Banks, Kymberlaine Contributor address; City; State; Zip Code Garland, TX 75040	)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/37 Rpt: 5/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/10/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Barnes, Tiffany</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$50.00
_		Calabasas, CA 91302				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#: Bass, Jerry Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Surfside Beach, TX 77541  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/02/2024	Full name of contributor out-of-state PAC (ID#:_ Bass, Jerry	)		Amount of Contribution (\$)	\$2.00
		Contributor address; City; State; Zip Code  Surfside Beach, TX 77541				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Bell-Luster, Kathy Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occu	DALLAS, TX 75287  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_Bell-Luster, Kathy  Contributor address; City; State; Zip Code  DALLAS, TX 75287			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/37 Rpt: 6/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	on Filers)
4	Date 05/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ Ben E. Kkeith Company Texas PAC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,500.00
_	Daine in all a second	Fort Worth, TX 76102				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ Benninghoven, Ellen Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$200.00
	Principal occu	Houston, TX 77056 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#:_ Boyce, Stephanie Contributor address; City; State; Zip Code Dallas, TX 75201			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_ Branson, Carolyn N  Contributor address; City; State; Zip Code  Nokesville, VA 20181			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Brown, Michelle Contributor address; City; State; Zip Code  Dallas, TX 75204			Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/37 Rpt: 7/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/03/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
_		Dallas, TX 75231				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Bryant, Judy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	Dallas, TX 75231 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/11/2024	Full name of contributor out-of-state PAC (ID#: Butler, Erma Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78721				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Calhoun, Anthony Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Frisco, TX 75035 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/26/2024	Full name of contributor out-of-state PAC (ID#:_ Carr, Snapper Contributor address; City; State; Zip Code  Austin, TX 78757	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/37 Rpt: 8/87	
2	FILER NAME Bowers, Rhe	tta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/03/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Casey, Eden</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$200.00
		Rowlett, TX 75089	,			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/31/2024	Full name of contributor  out-of-state PAC (ID#: Churchill, Laura Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#: Cogwell, William Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Sachse, TX 75048				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/10/2024	Full name of contributor out-of-state PAC (ID#: Correa, Mario M Contributor address; City; State; Zip Code El Paso, TX 79936-2702			Amount of Contribution (\$)	\$3.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/26/2024	Full name of contributor out-of-state PAC (ID#: Curry, Brenda Contributor address; City; State; Zip Code Grand Prairie, TX 75054			Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/37 Rpt: 9/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 04/14/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$50.00
_	Deinsinal	Garland, TX 75043	O Frankrije (Ozakasta stira			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 02/11/2024	Full name of contributor out-of-state PAC (ID#:_ David, Gaye  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
	Deignaignal annu	Garland Tx, TX 75043	Franklause (Coo la structione			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_ David, Gaye  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
		Garland, TX 75043				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_ David, Gaye  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Deinsinal assu	Garland, TX 75043	Franks on (Cook Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/14/2024	Full name of contributor out-of-state PAC (ID#:_ David, Gaye  Contributor address; City; State; Zip Code  Garland Tx, TX 75043	)		Amount of Contribution (\$)	\$35.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/37 Rpt: 10/87	
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	Bowers, Rhe	Bowers, Rhetta A. (The Honorable)			00080443	
4	Date 02/25/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Derrick, Tonya</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$35.00
		Terrell, TX 75160				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	06/23/2024	Dixon, Chris				\$250.00
		Contributor address; City; State; Zip Code				
		Macon, GA 31210				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	01/28/2024	Dougherty, John				\$25.00
		Contributor address; City; State; Zip Code				
	5	Rowlett, TX 75089	l = 1 /0 1:	Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/10/2024	Dougherty, John				\$25.00
		Contributor address; City; State; Zip Code				
		Rowlett, TX 75089				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/31/2024	Dougherty, John				\$15.00
		Contributor address; City; State; Zip Code				
		Rowlett, TX 75089				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/37 Rpt: 11/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 02/04/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Doyle, Carolyn</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$100.00
_		Plano, TX 75075				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ Doyle, Teresa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu	Seattle, WA 98122 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 01/14/2024	Full name of contributor	)		Amount of Contribution (\$)	\$25.00
		Rowlett, TX 75089				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Eason, Teresa  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$35.00
	Principal occu	Houston, TX 77021-1135 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Ehrhardt, Harryette Contributor address; City; State; Zip Code Dallas, TX 75214			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBU	UTIONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 9/37 Rpt: 12/87
2	FILER NAME Bowers, Rhe	tta A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080443
4	Date 06/23/2024	<ul> <li>Full name of contributor  out-of-state PA</li> <li>Eppler-Lewis, Cynthia</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$250.00
_		Plano, TX 75093-6967		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)
	Date 06/02/2024	Full name of contributor out-of-state PA Fladmark, Michael J Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$50.00
	Principal occu	Tool, TX 75143 pation / Job title (See Instructions)	Employer (See Instructions	)
		,		,
	Date 05/21/2024	Full name of contributor out-of-state PA Focused Advocacy PAC  Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$1,000.00
		Austin, TX 78701-2402		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
	Date 03/03/2024	Full name of contributor out-of-state PA Frankowski, Gerald  Contributor address; City; State; Zip Code  New York, NY 10022	AC (ID#:)	Amount of Contribution (\$) \$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
	Date 01/01/2024	Full name of contributor out-of-state PA Friends of UT Southwestern Medical Cen Contributor address; City; State; Zip Code  Dallas, TX 75230	nter/FOMCPAC	Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
			1	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/37 Rpt: 13/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	Filers)
4	Date 03/31/2024	5 Full name of contributor out-of-state PAC (ID#:_ Garcea, Mary f  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00
_	Daine in all a con-	WACO, TX 76710-2922	2 Farely (Carlot Arthur)			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_ Gardner, Gwendolyn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu	Balch Springs, TX 75180 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/05/2024	Full name of contributor out-of-state PAC (ID#:_ Garland Fire Fighter CIC  Contributor address; City; State; Zip Code  Garland, TX 75046			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_Gillespie, Timothy  Contributor address; City; State; Zip Code  Denton, TX 76210-3441			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Goldwater, Joe/Cheryl Contributor address; City; State; Zip Code Garland, TX 75044			Amount of Contribution (\$)	\$35.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/37 Rpt: 14/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 05/26/2024	5 Full name of contributor out-of-state PAC (ID#:_ Henderson, Christine  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$15.00
_	Duinning Langu	Burleson, TX 76028	O Francis var (Can Instructiona			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 02/11/2024	Full name of contributor			Amount of Contribution (\$)	\$35.00
	Principal occu	Houston, TX 77004 pation / Job title (See Instructions)	Employer (See Instructions	()		
		,		,		
	Date 04/14/2024	Full name of contributor out-of-state PAC (ID#:_ Higgs, Julia Higgs Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
		Houston, TX 77004				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_Hill, Angela  Contributor address; City; State; Zip Code  Allen, TX 75002			Amount of Contribution (\$)	\$35.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_Hillco PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>,</u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/37 Rpt: 15/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/03/2024	Full name of contributor		7	Amount of Contribution (\$)	\$35.00
_	<u> </u>	Dallas, TX 75231				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Police Retired Officers Association - P. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Houston, TX 77219 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/12/2024	Full name of contributor out-of-state PAC (ID#:_ Hutchinson, Rachelle Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Lawrenceville, GA 30044 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#: Independent Insurance Agents of TX PAC Contributor address; City; State; Zip Code  Austin, TX 78768			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#:_ Jackson, Joyce Contributor address; City; State; Zip Code  Austin, TX 78751			Amount of Contribution (\$)	\$35.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/37 Rpt: 16/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	r Filers)
4	Date 05/05/2024	Full name of contributor		7	Amount of Contribution (\$)	\$35.00
_	Deinainal agai	Austin, TX 78751	O Franks var (Caa kastrustinga			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:_ Jerolleman, Lois Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu	Alvin, TX 77511 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/14/2024	Full name of contributor out-of-state PAC (ID#:_ Jerolleman, Lois Contributor address; City; State; Zip Code Alvin, TX 77511			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#: Johnson, Wesley Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Garland, TX 75043 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:_ Kanawite, Kathy Contributor address; City; State; Zip Code Garland, TX 75043			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/37 Rpt: 17/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	on Filers)
4	Date 03/31/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$15.00
_		Garland, TX 75043				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ Kastl, Krisi Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75204 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_ Kastl, Kristina N.  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		Dallas, TX 75204				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_King, Denae  Contributor address; City; State; Zip Code  Houston, TX 77071			Amount of Contribution (\$)	\$113.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/10/2024	Full name of contributor out-of-state PAC (ID#:_ Krause, Erica Contributor address; City; State; Zip Code Toledo, OH 43609			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/37 Rpt: 18/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	ı Filers)
4	Date 04/14/2024	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Krause, Erica</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$50.00
•	Dringing oggu	Toledo, OH 43609	Employer (See Instructions			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/26/2024	Full name of contributor out-of-state PAC (ID#:_ Kull, Veda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_Kull, Veda  Contributor address; City; State; Zip Code  ROWLETT, TX 75088			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ Kusmierski, Ted  Contributor address; City; State; Zip Code  North Richland Hills, TX 76182			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#:_ L. Nealy, Carol Contributor address; City; State; Zip Code Santa Ana, CA 92707			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/37 Rpt: 19/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/10/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$15.00
_	Dein ein al. a. a.	Allen, TX 75002	D. Frankrick (Construction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 01/01/2024	Full name of contributor out-of-state PAC (ID#:_ Lloyd Gosselink Rochelle & Townsend, P.C. Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_ Looney, Cyann Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
	Dringing! goog	Denton, TX 76208	Employer (Coo Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Looney, Cyann Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
	Principal occu	Denton, TX 76208 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#: MORSE, BILL Contributor address; City; State; Zip Code Dallas, TX 75240			Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/37 Rpt: 20/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 02/04/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$35.00
_	Deignaignal annu	Dallas, TX 75214	O Franks on (Cook looks of cooks			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 03/17/2024	Full name of contributor out-of-state PAC (ID#:_ Marshall, Floyd  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Arlington, TX 76013				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_ Marshall, Floyd Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Arlington, TX 76013				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#: Martin, Candace Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$35.00
	Principal occu	Dallas, TX 75229 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_May, Yvonne  Contributor address; City; State; Zip Code  Lawrenceville, GA 30043			Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/37 Rpt: 21/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	ı Filers)
4	Date 02/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Mayo, Cheryl  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
_		Dallas, TX 75222				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_McDaniel, Patricia  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Indianapolis, IN 46278 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.00
		Dallas, TX 75248				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy  Contributor address; City; State; Zip Code  Dallas, TX 75248			Amount of Contribution (\$)	\$3.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/17/2024	Full name of contributor out-of-state PAC (ID#:_McGarrahan, Andy  Contributor address; City; State; Zip Code  Dallas, TX 75248			Amount of Contribution (\$)	\$3.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/37 Rpt: 22/87	
2	FILER NAME Bowers, Rhe	IE 3 Hetta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	Filers)
4	Date 04/14/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$3.00
		Dallas, TX 75248				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/14/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.00
	Principal occu	Dallas, TX 75248 pation / Job title (See Instructions)	Employer (See Instructions			
	T IIICipai occu	pation 7 300 title (See Instructions)	Employer (See Instructions	,		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#: McGarrahan, Andy Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$4.00
		Dallas, TX 75248				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/12/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$4.00
	Principal occu	Dallas, TX 75248 pation / Job title (See Instructions)	Employer (See Instructions	)		
		,	, ,, ,			
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code  Dallas, TX 75248			Amount of Contribution (\$)	\$3.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/37 Rpt: 23/87	
2	FILER NAME Bowers, Rhe	hetta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 05/26/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$4.00
_		Dallas, TX 75248				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 06/16/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.00
	Principal occu	Dallas, TX 75248 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.00
		Dallas, TX 75248				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.00
	Principal occu	Dallas, TX 75248 pation / Job title (See Instructions)	Employer (See Instructions	)		
	-					
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ McGuire Woods LLP Contributor address; City; State; Zip Code Richmond, VA 23219			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/37 Rpt: 24/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/03/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
_	Dringing Lagra	Stone Mountain, GA 30083	O Familia var (Cap Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:_ Mell, Demetria Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	· ····o.pa. ooda	panon, cos uno (cos monasnono)		,		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#: Metropolitian Anesthesia PAC  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,000.00
		Dallas, TX 75219				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#:_ Miller, Demetra Contributor address; City; State; Zip Code Forney, TX 75126			Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/17/2024	Full name of contributor out-of-state PAC (ID#:_ Mitchell, Jamila Contributor address; City; State; Zip Code Milwaukee, WI 53208	)		Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/37 Rpt: 25/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 05/21/2024	5 Full name of contributor out-of-state PAC (ID#:_ Moak Casey PAC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_	Deinsinal	Austin, TX 78701	O Frankrije (Ozakasta stira			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:_Moffitt, Cathy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringing aggr	Arlington, TX 76016 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See instructions	,		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#: Moore, April Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
		Lancaster, TX 75146				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_Moore, Edward  Contributor address; City; State; Zip Code  Garland, TX 75043			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#:_Murray, Clare  Contributor address; City; State; Zip Code  Missouri city, TX 77459			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/37 Rpt: 26/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/03/2024	5 Full name of contributor out-of-state PAC (ID#:_ Murray, Clare  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$15.00
_		Missouri city, TX 77459				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_ Murray, Clare  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Missouri city, TX 77459 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ Nealy, William Contributor address; City; State; Zip Code Wildomar, CA 92595			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/01/2024	Full name of contributor out-of-state PAC (ID#:_Pettee, James  Contributor address; City; State; Zip Code  Dallas, TX 75252	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ Phariss, Mark  Contributor address; City; State; Zip Code  Plano, TX 75093			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/37 Rpt: 27/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/10/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
0	Dringing occur	Katy, TX 77494-1867 pation / Job title (See Instructions)	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 01/28/2024	Full name of contributor out-of-state PAC (ID#:_ Poynor, Julian Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Dringinal occu	Granbury, TX 76049 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 02/11/2024	Full name of contributor	)		Amount of Contribution (\$)	\$40.00
		Forney, TX 75126				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_ Reece, Rhonda Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Pearland, TX 77584 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Reed, Charles Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 25/37 Rpt: 28/87	
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	Bowers, Rhe	etta A. (The Honorable)			00080443	
4	Date 02/04/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Reeves, Eddie</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$250.00
		DALLAS, TX 75208				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/17/2024	Robinson, Jacqueline				\$50.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Roome, Anna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
		Dallas, TX 75243				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor  ut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/14/2024	SANDERS, MONIQUE				\$250.00
		Contributor address; City; State; Zip Code				
		Pearland, TX 77584				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/12/2024	SANDERS, MONIQUE				\$250.00
		Contributor address; City; State; Zip Code				
		Pearland, TX 77584				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/37 Rpt: 29/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 06/16/2024	5 Full name of contributor out-of-state PAC (ID#:_ SANDERS, MONIQUE  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_	Dein ein al. a ann	Pearland, TX 77584	O Frankrije (Ozakasta stira			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 06/02/2024	Full name of contributor out-of-state PAC (ID#:_Salinas, Heriberto  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
	Principal occu	Joshua, TX 76058 pation / Job title (See Instructions)	Employer (See Instructions			
	Timolpai occa	pation / cos title (ese metastione)	Employor (Goo moaddaono	,		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_ Session, Ronald Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Cedar Hill, TX 75104				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_ Shaw, Antoine Contributor address; City; State; Zip Code  VILLAGE OF LAKEWOOD, IL 60014			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/14/2024	Full name of contributor out-of-state PAC (ID#:_Smith, Guillaume  Contributor address; City; State; Zip Code  Austin, TX 78704			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/37 Rpt: 30/87	
2	FILER NAME Bowers, Rhe	IAME s, Rhetta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 02/04/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
_	Deinsinal	Lithonia, GA 30038	O Frankrije (Ozakastavsti za			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Spratt, Sharon Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Rowlett, TX 75089 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	' 	,				
	Date 03/10/2024	Full name of contributor out-of-state PAC (ID#: Stephens, Matt Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
		Fort Worth, TX 76131				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 01/14/2024	Full name of contributor out-of-state PAC (ID#:_ Stevens, Victoria Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu	Garland, TX 75040 pation / Job title (See Instructions)	Employer (See Instructions	:)		
				,		
	Date 02/11/2024	Full name of contributor out-of-state PAC (ID#:_ Stevens, Victoria Contributor address; City; State; Zip Code Garland, TX 75040	)		Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	ı	Total pages Schedule A1: Sch: 28/37 Rpt: 31/87	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Bowers, Rhe	etta A. (The Honorable)		(	00080443	
4	Date 03/17/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$15.00
		Garland, TX 75040				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/14/2024	Stevens, Victoria				\$15.00
		Contributor address; City; State; Zip Code				
		Garland, TX 75040				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/12/2024	Stevens, Victoria				\$15.00
		Contributor address; City; State; Zip Code				
		Garland, TX 75040		<u> </u>		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/16/2024	Stevens, Victoria				\$15.00
		Contributor address; City; State; Zip Code				
		Garland, TX 75040				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	02/25/2024	Stewart, Karen				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77021				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/37 Rpt: 32/87	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Bowers, Rhe	etta A. (The Honorable)			00080443	
4	Date 03/31/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
		NASHVILLE, TN 37211				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/23/2024	Sullivan, Bern				\$10.00
		Contributor address; City; State; Zip Code				
		Forest Hill, TX 76140				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	01/28/2024	Syed, Hisham				\$15.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75230				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	02/04/2024	Syed, Hisham				\$15.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75230				
	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 (\$)	
	03/31/2024	Syed, Hisham				\$15.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75230				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/37 Rpt: 33/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	on Filers)
4	Date 06/23/2024	5 Full name of contributor out-of-state PAC (ID#:_ Syed, Hisham  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$15.00
_		Dallas, TX 75230				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:_ Texas American Federation of Teachers COPE Contributor address; City; State; Zip Code  Austin, TX 78704	Fund		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Sands PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code  Austin, TX 78767			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/37 Rpt: 34/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	r Filers)
4	Date 02/25/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$15.00
_	Dein ein al. a. a.	Mesquite, TX 75150	O Frankrije (Con kodernsting			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 03/17/2024	Full name of contributor out-of-state PAC (ID#:_ Theriot, Lisa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu	Mesquite, TX 75150 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/26/2024	Full name of contributor out-of-state PAC (ID#: Theriot, Lisa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	MEsquite, TX 75150 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/12/2024	Full name of contributor out-of-state PAC (ID#: Thomas, Renita Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Angleton, TX 77515 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 01/10/2024	Full name of contributor out-of-state PAC (ID#: Thompson, Mattie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/37 Rpt: 35/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)
4	Date 03/03/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Tinsley, Deborah</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$25.00
_		Fayetteville, GA 30214				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_ Turnley, Velda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00
	Principal occu	Lancaster, TX 75134 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occu	pation 7 300 title (See Instructions)	Employer (See Instructions	,		
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_ United Food and Commercial Workers Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Washington, DC 20006				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Uttley, Meredith  Contributor address; City; State; Zip Code  Greenville, SC 29615			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_ Van Cleave, Mary Contributor address; City; State; Zip Code Rowlett, TX 75088			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 33/37 Rpt: 36/87	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Bowers, Rhe	etta A. (The Honorable)			00080443	
4	Date 01/01/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,500.00
		Irving, TX 75039				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	03/03/2024	Walkowicz, Liz				\$25.00
		Contributor address; City; State; Zip Code				
		Garland, TX 75043				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/31/2024	Walkowicz, Liz				\$20.00
		Contributor address; City; State; Zip Code				
	Dringing! agg	Garland, TX 75043	Franks var (Caa Instructions	<u></u>		
	Рппсіраї оссі	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/15/2024	Walkowicz, Liz				\$15.00
		Contributor address; City; State; Zip Code				
		Garland, TX 75043				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	02/04/2024	Warren, Patrice				\$35.00
		Contributor address; City; State; Zip Code		•		
		Grand Prairie, TX 75052				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
			<u> </u>			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/37 Rpt: 37/87		
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)	
4	Date 05/05/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Weekley, Laura</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$15.00	
_	Deignaignal annu	Arlington, TX 76016-5886	O Francis var (Can Instructiona				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 03/10/2024	Full name of contributor out-of-state PAC (ID#:_ Weeks, Richard Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00	
	Principal occu	Garland, TX 75043 pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#: Wilkins, Yvette Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00	
	Principal occu	Lewisville, TX 75067 pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:_Williams, Billy Williams  Contributor address; City; State; Zip Code  Garland, TX 75043	)		Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_Wilson, Delores  Contributor address; City; State; Zip Code  Plano, TX 75093			Amount of Contribution (\$)	\$25.00	
	Principal occu	pation / Job title (See Instructions)	)				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/37 Rpt: 38/87		
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	n Filers)	
4	Date 06/23/2024	5 Full name of contributor out-of-state PAC (ID#:_ Wilson, Delores  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00	
_		Plano, TX 75093					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#:_ Wilt, Melora Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00	
	Principal occu	Garland, TX 75041-1870 pation / Job title (See Instructions)	Employer (See Instructions	)			
		,	, , ,				
Date 05/26/2024		Full name of contributor out-of-state PAC (ID#: Wing, Christopher Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$15.00		
		Sacramento, CA 95835-2010					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 03/10/2024	Full name of contributor out-of-state PAC (ID#:_ Wright, Lauren Contributor address; City; State; Zip Code Dallas, TX 75287	)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_bird, rebecca  Contributor address; City; State; Zip Code  richardson, TX 75081	)		Amount of Contribution (\$)	\$35.00	
	Principal occupation / Job title (See Instructions)  Employer (See Instructions)						

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 36/37 Rpt: 39/87	
2	FILER NAME Bowers, Rhe	etta A. (The Honorable)		3	Filer ID (Ethics Commission 00080443	ı Filers)
4	Date 01/28/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$25.00
_	Duinning Langu	Austin, TX 78702-3710	O Frankrige (Cook keets et anno			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/10/2024	Full name of contributor out-of-state PAC (ID#:_mccollum, mick  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringinal occu	Bedford, TX 76021  spation / Job title (See Instructions)				
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_murray, clare  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Missouri City, TX 77459				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_rogers, michael  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Dallas, TX 75229  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		·	. , ,			
	Date 03/31/2024	Full name of contributor out-of-state PAC (ID#:_rogers, michael  Contributor address; City; State; Zip Code  Dallas, TX 75229			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

МО	NETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The I	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 37/37 Rpt: 40/87
2 FILER Bowe	NAME rs, Rhetta A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080443
4 Date 05/26	5 Full name of contributor	7 Amount of Contribution (\$) \$10.00
	Dallas, TX 75229	
8 Princip	pal occupation / Job title (See Instructions)  9 Employer (See Instructions)	ions)

#### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T.1 6111=	· · · · · · · · · · · · · · · · · · ·	
1	1 0		
	Sch: 1/47 Rpt: 41/87	Bowers, Rhetta A. (The Honorable) 00080443	
4	Date	5 Payee name	
	01/08/2024	ADVANTAGE	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$95.00	5280 HIGHWAY 78	
		Sachse, TX 75048	
Ļ			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Storage	
_	Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  H	
	Date	Payee name	
	02/05/2024	ADVANTAGE	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$85.00	5280 HIGHWAY 78	
		Sachse, TX 75048	
_	DUDDOCE		
	PURPOSE OF	(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.	
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Storage	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
$\vdash$	Data	Davida marra	_
	Date	Payee name	
	03/04/2024	ADVANTAGE	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$85.00	5280 HIGHWAY 78	
		Sachse, TX 75048	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Storage	
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/47 Rpt: 42/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	04/03/2024	ADVANTAGE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$85.00	5280 HIGHWAY 78
		Sachse, TX 75048
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Storage
		Ciorage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	D :	
	Date	Payee name
	05/02/2024	ADVANTAGE
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.00	5280 HIGHWAY 78
		Sachse, TX 75048
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		Storage
	Complete ONLY if direct	Constitute / Office helder mores Office accords
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	06/03/2024	ADVANTAGE
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.00	5280 HIGHWAY 78
		Sachse, TX 75048
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		Storage Storage
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/47 Rpt: 43/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	03/11/2024	Barrocos Latin Cuisine
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$22.84	3813 Main St
		Rowlett, TX 75088
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Meal
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	- CAPOTICITO TO SOTICITE OF CI	
	Date	Payee name
	05/06/2024	Barrocos Latin Cuisine
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.53	3813 Main St
		Rowlett, TX 75088
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meal
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies name
	06/10/2024	Payee name Barrocos Latin Cuisine
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.28	3813 Main St
		Rowlett, TX 75088
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meal
		ivical
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/47 Rpt: 44/87 00080443 Bowers, Rhetta A. (The Honorable) 4 Date Payee name 01/29/2024 **CANVA** 6 Amount (\$) Payee address; City; State; Zip Code \$12.95 350 W Java Drive Sunnyvale, CA 94089 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Marketing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/28/2024 **CANVA** Amount (\$) Payee address; City; State; Zip Code \$12.95 350 W Java Drive Sunnyvale, CA 94089 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Marketing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/28/2024 **CANVA** Amount (\$) Payee address: City; State; Zip Code \$12.95 350 W Java Drive Sunnyvale, CA 94089 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Marketing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/47 Rpt: 45/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	04/29/2024	CANVA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.95	350 W Java Drive
		Sunnyvale, CA 94089
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Marketing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/28/2024	CANVA
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.95	350 W Java Drive
		Sunnyvale, CA 94089
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Marketing
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
_	Date	Payee name
	06/28/2024	CANVA
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.95	350 W Java Drive
		Sunnyvale, CA 94089
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Marketing
		Walketing
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 6/47 Rpt: 46/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	03/04/2024	Circle 10 Council
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	8605 Harry Hines Blvd.
		Dallas, TX 75325
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Boy Scouts Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/19/2024	Circle K
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	4902 Lakeview Pkwy
		Rowlett, TX 75088
	PURPOSE	
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gas for vehicle
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/29/2024	Circle K
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	4902 Lakeview Pkwy
		Rowlett, TX 75088
	PURPOSE	
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gas for vehicle
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Total pages Schedule F1:   Sch. 7/47 Rpt. 47/87   Sowers, Rhetta A, (The Honorable)   S Filer ID (ethics Commission Filers)	Sch: 7/47 Rpt: 47/87   Bowers, Rhetta A. (The Honorable)   00080443   4 Date		Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
Sch: 7/47 Rpt: 47/87   Bowers, Rhetta A. (The Honorable)   00080443   4 Date	Sch: 7/47 Rpt: 47/87   Bowers, Rhetta A. (The Honorable)   00080443   4 Date	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Complete ONLY if direct expenditure to benefit C/OH  Purpose Of Expenditure Office Notice  Amount (\$)  Purpose Office Supplied ONLY if direct expenditure to benefit C/OH  Purpose Office Notice  Office Notice  Purpose Office Notice Office Notice  Office Supplied ONLY if direct expenditure to benefit C/OH  Office Notice  Office Notice  Office Supplied ONLY if direct expenditure to benefit C/OH  Office Notice  Office Notice  Office Supplied ONLY if direct expenditure to benefit C/OH  Office Notice  Office Supplied ONLY if direct expenditure to benefit C/OH  Office Notice  Office Notice  Office Supplied ONLY if direct expenditure to benefit C/OH  Office Notice  Office Notice  Office Notice  Office Supplied ONLY if direct expenditure to benefit C/OH  Office Notice	Complete ONLY if direct expenditure to benefit C/OH			
Amount (\$)	7	4	Date	5 Payee name
S75.00	S75.00		02/20/2024	Circle K
Rowlett, TX 75088     A) Category (Save Categories listed at the top of this schedule)   Check if drawel outside of Toxas. Complete Schedule T.   Check if Austin, TX, officeholder inling expense   Gas for vehicle   Check if Austin, TX, officeholder inling expense   Gas for vehicle	Rowlett, TX 75088    PURPOSE OF EXPENDITURE   (a) Category (see Categories listed at the top of this schedule)   (b) Description   (check if travel outside of Texas. Complete Schedule T.   (check if travel outside of Texas. Complete Schedule T.   (check if austin, TX, officientoider living oxpense Gas for vehicle   (check if austin, TX, officientoider living oxpense Gas for vehicle   (check if austin, TX, officientoider living oxpense Gas for vehicle   (check if austin, TX, officientoider living oxpense Gas for vehicle   (check if austin, TX, officientoider living oxpense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expense Gas for vehicle   (check if austin, TX, officientoider living expen	6	Amount (\$)	7 Payee address; City; State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct expenditure to benefit C/OH		\$75.00	4902 Lakeview Pkwy
Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct expenditure to benefit C/OH			
Travel Out of District	Complete ONLY if direct expenditure to benefit C/OH			Rowlett, TX 75088
## STATE OUT OF DISTRICT ## Candidate Office Notice   Candidate   Office	## STANDITURE    Travel Out of District	8		
9 Complete ONLY if direct expenditure to benefit C/OH  Date 03/06/2024 Circle K  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 03/25/2024 Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 03/25/2024 Circle K  Amount (\$) Payee name Circle K  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code  4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Circle K  Amount (\$) Payee address; City; State; Zip Code  4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Check if avastic at Justic Payer and Check if avastic payer and Check if avastic at Justic Payer and Check if avastic payer and	9 Complete ONLY if direct expenditure to benefit C/OH  Date O3/06/2024 Circle K  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date O3/25/2024 Circle K  Amount (\$) Candidate/Officeholder name Office sought Office held  O3/25/2024 Circle K  Amount (\$) Payee address; City; State; Zip Code description Check if Aussin, TX, officeholder living expense Gas for vehicle  Date O3/25/2024 Circle K  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF Circle K  Amount (\$) Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF Circle K  Candidate/Officeholder name Office sought Office kild travel outside of Texas. Complete Schedule T. Circle K Complete Schedule T. Circle K Complete Schedule T. Circle K Complete Schedule Travel Outside of Texas. Complete Schedule T. Circle K I Ausein, TX, officeholder living expense Gas for vehicle  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Travel out of Bistrict
9 Complete ONLY if direct expenditure to benefit C/OH  Date 03/06/2024	9 Complete DNLY if direct expenditure to benefit C/OH  Date 03/06/2024			l
Date 03/06/2024 Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  Camplete QNLY if direct expenditure to benefit C/OH  Date 03/25/2024 Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  Camplete QNLY if direct expenditure to benefit C/OH  Date 03/25/2024 Circle K  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)   (b) Description   (c) Check if Austin, TX. officeholder living expense   (d) Category (See Categories listed at the top of this schedule)   (b) Description   (c) Check if Austin, TX. officeholder living expense   (a) Category (See Categories listed at the top of this schedule)   (b) Description   (c) Check if Austin, TX. officeholder living expense   (a) Category (See Categories listed at the top of this schedule)   (b) Check if Austin, TX. officeholder living expense   (a) Category (See Categories listed at the top of this schedule)   (b) Check if Austin, TX. officeholder living expense   (c) Check if Austin, TX. officeholder living expense   (d) Chec	Date 03/06/2024  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Travel Out of District  Candidate/Officeholder name Office sought  Office held  Office held  Payee name Circle K  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code  Amount (\$) Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code  4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Travel Out of District  (b) Description Office held			Sub for verificie
Date 03/06/2024  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  Candidate/Officeholder name Office sought  Office held  Payee name Circle K  Amount (\$)  Payee name Circle K  Amount (\$)  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  Purpose OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  Purpose OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for vehicle  Complete QNLY if direct Candidate/Officeholder name Office sought Office held	Date 03/06/2024  Amount (\$)  Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  Candidate/Officeholder name 03/25/2024  Amount (\$)  Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088   OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Travel Out of District  Office sought  Office sought  Office held  Office held  Date 03/25/2024  Amount (\$)  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Travel Out of District  OF EXPENDITURE  (b) Description Office held	0	Complete ONLV if direct	Candidate/Officeholder name Office sought Office hold
Date 03/06/2024  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  Candidate/Officeholder name Office sought  Office held  Payee name Office held  Office held  Payee name Office Sought Officeholder living expense Gas for vehicle  Office held  Payee name Office Sought Officeholder living expense Office held  Payee name Office Sought Officeholder living expense Officeholder living expense Officeholder living expense Office held  Date O3/25/2024 Officeholder living expense	Date 03/06/2024  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  Candidate/Officeholder name Office sought Office held  Payee name Office held  Office held  Payee name Office Sought Office held  Payee name Office held  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Circle K  Amount (\$) Payee name Office held  (b) Description Office held	9		
O3/06/2024  Circle K  Amount (\$)	O3/06/2024  Amount (\$)  Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule)  Travel Out of District  Complete ONLY if direct expenditure to benefit C/OH  Date O3/25/2024  Amount (\$)  Payee andress; City; State; Zip Code  Amount (\$)  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Gas for vehicle  (b) Description  Check if Austin, TX, Officeholder Iving expense  (circle K  (b) Description  Check if Austin, TX, Officeholder Iving expense  Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	_		
Amount (\$)	Amount (\$)			
### Rowlett, TX 75088    PURPOSE OF EXPENDITURE	### ROWLET, TX 75088    PURPOSE OF EXPENDITURE	L	03/06/2024	
Rowlett, TX 75088	Rowlett, TX 75088   Rowlett, TX 75088   (a) Category (See Categories listed at the top of this schedule)		Amount (\$)	Payee address; City; State; Zip Code
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.	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  Gas for vehicle  Complete ONLY if direct expenditure to benefit C/OH  Date  03/25/2024  Circle K  Amount (\$)  Payee name  Circle K  Amount (\$)  Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  (a) Category (See Categories listed at the top of this schedule)  OF EXPENDITURE  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  Office held  Office held  Office held		\$75.00	4902 Lakeview Pkwy
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.	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  Gas for vehicle  Complete ONLY if direct expenditure to benefit C/OH  Date  03/25/2024  Circle K  Amount (\$)  Payee name  Circle K  Amount (\$)  Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  (a) Category (See Categories listed at the top of this schedule)  OF EXPENDITURE  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  Office held  Office held  Office held			
OF EXPENDITURE  Travel Out of District  Travel Out of	Travel Out of District    Check if vavel outside of Texas. Complete Schedule T.     Check if vavel outside of Texas. Complete Schedu			Rowlett, TX 75088
EXPENDITURE  Travel Out of District  Check if Austin, TX, officeholder living expense  Gas for vehicle  Complete ONLY if direct expenditure to benefit C/OH  Date 03/25/2024  Circle K  Amount (\$)  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name Office sought  Office held	EXPENDITURE    Gas for vehicle   Check if Austin, TX, officeholder living expense   Gas for vehicle			
Complete ONLY if direct expenditure to benefit C/OH  Date O3/25/2024 Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel Out of District  Candidate/Officeholder name  Office sought  Office held  Office held  Office held	Complete ONLY if direct expenditure to benefit C/OH  Date 03/25/2024  Amount (\$)  Payee address; City; State; Zip Code \$4.42  Apoly Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  Candidate/Officeholder name  Office sought  Office held  Office held  Office held			Travel out of District
Complete ONLY if direct expenditure to benefit C/OH  Date O3/25/2024  Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for vehicle  Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Complete ONLY if direct expenditure to benefit C/OH  Date O3/25/2024 Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for vehicle  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 03/25/2024 Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Date 03/25/2024  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code  \$4.42  Payee address; City; State; Zip Code  \$4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			Sub for verificio
Date 03/25/2024 Payee name Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Date 03/25/2024  Payee name Circle K  Amount (\$)  Payee address; City; State; Zip Code  \$4.42  Payee address; City; State; Zip Code  \$4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		Complete ONLV if direct	Candidate/Officeholder name Office sought Office held
O3/25/2024  Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	O3/25/2024  Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			- · · · · · · · · · · · · · · · · · · ·
O3/25/2024  Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	O3/25/2024  Circle K  Amount (\$) Payee address; City; State; Zip Code  \$4.42 4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	L		
Amount (\$)  Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	Amount (\$)  Payee address; City; State; Zip Code  4902 Lakeview Pkwy  Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			
\$4.42	\$4.42			
Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	Rowlett, TX 75088  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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			Payee address; City; State; Zip Code
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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		\$4.42	4902 Lakeview Pkwy
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 Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			
OF EXPENDITURE  Travel Out of District  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	OF EXPENDITURE  Travel Out of District  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas for vehicle  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			Rowlett, TX 75088
EXPENDITURE    Travel Out of District	EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   Gas for vehicle			, ,
Complete ONLY if direct  Candidate/Officeholder name  Candidate/Officeholder name  Candidate/Officeholder name  Candidate/Officeholder name  Candidate/Officeholder name	Complete ONLY if direct  Candidate/Officeholder name  Candidate/Officeholder name  Complete ONLY if direct  Candidate/Officeholder name  Complete ONLY if direct  Candidate/Officeholder name			Traver out or District
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
				Gas for verticle
			0 1. 0	
			onponditure to belieff 6/01	•

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains how to co	omple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 8/47 Rpt: 48/87		Bowers, Rhetta A. (The Honorable)		00080443
4	Date	5	Payee name		•
	03/25/2024		Circle K		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$58.93		4902 Lakeview Pkwy		
			Rowlett, TX 75088		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	<u> </u> `	Travel Out of District	`´	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin, TX, officeholder living expense
					Gas for vehicle
				<u> </u>	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office so	ught	Office held
		_			
	Date		Payee name		
	05/08/2024		Circle K		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$75.00		4902 Lakeview Pkwy		
			Rowlett, TX 75088		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense  Gas for vehicle
					Cas for Vernole
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	<u>l</u> uaht	Office held
	expenditure to benefit C/O		Sandado, em senedas mame	agiit	Cince Hold
	Date	_	Davies name		
	05/17/2024		Payee name Circle K		
		_			
	Amount (\$) \$73.51		Payee address; City; State; Zip C 4902 Lakeview Pkwy	oue	
	Ψ13.31		4902 Lakeview Fkwy		
			Doulett TV 75000		
		L	Rowlett, TX 75088	1	
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Travel Out of District		Check if Austin, TX, officeholder living expense
					Gas for vehicle
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/O	Н			

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/47 Rpt: 49/87	Bowers, Rhetta A. (The Honorable) 00080443
4 Date	5 Payee name
05/28/2024	Circle K
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$61.42	4902 Lakeview Pkwy
	Rowlett, TX 75088
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Gas for vehicle
	Cas for vertice
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/24/2024	Circle K
Amount (\$)	Payee address; City; State; Zip Code
\$75.00	4902 Lakeview Pkwy
	Rowlett, TX 75088
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Gas for vehicle
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/18/2024	Constant Contact
Amount (\$)	Payee address; City; State; Zip Code
\$127.92	1601 Trapelo Road
	Waltham, MA 02451
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit ever	·

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/47 Rpt: 50/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	02/20/2024	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$127.92	1601 Trapelo Road
		Waltham, MA 02451
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
	03/18/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$127.92	1601 Trapelo Road
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense
		Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	•
L		
	Date	Payee name
	04/18/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$127.92	1601 Trapelo Road
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense
		Fee
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

se Travel in District
nse Travel Out of Distri
es/Contract Labor OTHER (enter a ca

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/47 Rpt: 51/87 00080443 Bowers, Rhetta A. (The Honorable) 4 Date Payee name 05/20/2024 **Constant Contact** 6 Amount (\$) Payee address; State; Zip Code \$127.92 1601 Trapelo Road Waltham, MA 02451 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/18/2024 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$127.92 1601 Trapelo Road Waltham, MA 02451 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/22/2024 Courtyard Houston Amount (\$) Payee address: City; State; Zip Code \$213.71 11200 Broadway St Ste. 2000, Pearland, TX 77584 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Member Lodging Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment  The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 12/47 Rpt: 52/87	Bowers, Rhetta A. (The Honorable) 00080443		
4	Date	5 Payee name		
	02/08/2024	Dos banderas		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$46.23	614 Main St		
		Garland, TX 75040		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.		
	EXI ENDITORE	Check if Austin, TX, officeholder living expense		
		Food/Beverage		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
-	Date	Davis verse		
	05/06/2024	Payee name Drakes Flyaway		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$36.54	533 Airport Blvd		
		B. F		
		Burlingame, CA 94010		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description		
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Food & Beverage for Staff		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
	Date	Payee name		
	03/18/2024	Emerge America		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$52.48	4 EmbarcaderoCenter suite		
		San Francisco, CA 94111		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITORE	Candidate/Officeholder/Political Committee		
		Donation		
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	Complete ONLY if direct expenditure to benefit C/O			
_				

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/47 Rpt: 53/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	05/20/2024	Emerge America
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	4 EmbarcaderoCenter suite
		San Francisco, CA 94111
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	-	Candidate/Officeholder/Political Committee
		Donation
_	Operation Children	On didn't 10 ff a halden name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/14/2024	GODADDY
	Amount (\$)	Payee address; City; State; Zip Code
	\$217.34	1445 N. Hayden Rd
		Scottsdale, AZ 85257
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website
		Website
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	03/18/2024	Garland Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$640.00	520 N. Glenbrook Drive
		Garland, TX 75040
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event Expense
	Commission ONE V. C. P.	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	- Firming to solione of of	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/47 Rpt: 54/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	02/09/2024	Garland NAACP
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$131.74	222 Carver Street
		Garland, TX 75040
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Event
		Lycht
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Davies same
		Payee name
	02/05/2024	Girl Scouts of Northeast Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$518.15	6001 Summerside Dr.
		Dallas, TX 75252
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 01/31/2024	Payee name
		Goodman Campaigns
	Amount (\$)	Payee address; City; State; Zip Code
	\$739.95	211 E 7th St., Ste. 20
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Fundraising and Communications Service
		r unuraising and communications service
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/47 Rpt: 55/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	01/31/2024	Goodman Campaigns
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,773.05	211 E 7th St., Ste. 20
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Fundraising and Communications Service
		T difficulting and communications convice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/26/2024	Goodman Campaigns
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,003.70	211 E 7th St., Ste. 20
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Fundraising and Communications Service
		Tanadaning and Communications Convice
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/24/2024	Goodman Campaigns
	Amount (\$)	Payee address; City; State; Zip Code
	\$867.65	211 E 7th St., Ste. 20
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Fundraising and Communications Service
		Fundraising and Communications Service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment  The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 16/47 Rpt: 56/87	Bowers, Rhetta A. (The Honorable)	00080443	
4	Date	5 Payee name		
	06/18/2024	Grain&Berry		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$23.07	4724 Lakeview Pkwy Suite 200		
		Rowlett, TX 75088		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.	
			Check if Austin, TX, officeholder living expense  Food & Beverage for Staff	
			ood a Bovorago for Stain	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/OI			
	Date	Payee name		
	05/23/2024	HOTEL VAN ZANDT		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$265.67	605 Davis St		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	
	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE		Check if Austin, TX, officeholder living expense	
			Austin Fundraiser	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/OI	9	Office field	
_	Date	Davies name		
	01/26/2024	Payee name HYATT REGENCY		
	Amount (\$) \$328.99	Payee address; City; State; Zip Code 1200 Louisiana St		
	Ψ320.33	1200 Louisiana St		
		Houston, TX 77002		
	DUDDOCE		No contrast our	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District	Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Traver out or bistrict	Check if Austin, TX, officeholder living expense	
			odging for Hearing for Crown Act	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held	
	experialitie to belieff C/Of			

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to con	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 17/47 Rpt: 57/87	Bowers, Rhetta A. (The Honorable)		00080443
4	Date	5 Payee name		<u>.</u>
l	06/17/2024	Hilton Americas		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$232.83	1600 Lamar St		
l				
l		Houston, TX 77010		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE			Check if Austin, TX, officeholder living expense  Lodging Thourgood Marshal Speaking engagement
				Loughly Thourgood Marshal Speaking engagement
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
ľ	expenditure to benefit C/O		grit	Office field
⊨	Date	Payes name		
l	06/17/2024	Payee name Hilton Americas		
┝			do	
l	Amount (\$) \$330.29	Payee address; City; State; Zip Co 1600 Lamar St	ue	
l	Ψ550.29	1000 Lamai St		
l		Hauston TV 77010		
L	DUDD 0.5	Houston, TX 77010	<i>(</i> 1.)	
l	PURPOSE OF	,	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense
l				Lodging for Jack and Jill Teen Conference - Speaker
L				
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
L	expenditure to benefit C/Ol			
	Date	Payee name		
	05/16/2024	Intrinsic Smokehouse Brewery & Catering		
	Amount (\$)	Payee address; City; State; Zip Co	de	
l	\$4.33	509 W. State St.		
l				
		Garland, TX 75040		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l				Food & Beverage for Staff
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	4		
ı				

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 18/47 Rpt: 58/87	Bowers, Rhetta A. (The Honorable)		00080443
4	Date	5 Payee name		
	05/16/2024	Intrinsic Smokehouse Brewery & Catering		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$38.63	509 W. State St.		
		Garland, TX 75040		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Food/Beverage Expense	( - ,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	5 1		Check if Austin, TX, officeholder living expense
				Food & Beverage for Staff
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	- CAPCHARATO TO DOMONE GAO			
	Date	Payee name		
	04/29/2024	Loews Hotel		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$304.84	1065 Peachtree St NE		
		Atlanta, GA 30309		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Lodging for Heal Collaboration Conference -
				Speaker
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		,,,,	Cince Hold
	Date	Davies name		
	04/15/2024	Payee name MICHAELS STORE		
			d a	
	Amount (\$) \$251.61	Payee address; City; State; Zip Coo 5325 N Garland Ave	ле	
	φ251.01	3323 N Garianu Ave		
		Carland TV 75040		
		Garland, TX 75040		
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Supplies for District Office
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
_				

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/47 Rpt: 59/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	01/02/2024	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$117.26	195 Montague St.
		Brooklyn Heights, NY 11201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email Tool
		Linui 1001
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	01/30/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	195 Montague St.
		Brooklyn Heights, NY 11201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Email Tool
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
-	Data	David and the second se
	Date 03/01/2024	Payee name  Mailchimp
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	195 Montague St.
		Brooklyn Heights, NY 11201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email Tool
		Email 1001
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
<u> </u>		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 20/47 Rpt: 60/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	04/01/2024	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$117.26	195 Montague St.
		Brooklyn Heights, NY 11201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Email Tool
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiorare to benefit C/Of	
	Date	Payee name
	04/30/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	195 Montague St.
		Brooklyn Heights, NY 11201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email Tool
		Enali 1001
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	<b>y</b>
_	Data	Development
	Date	Payee name Mailahimp
	05/30/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.26	195 Montague St.
L		Brooklyn Heights, NY 11201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Email Tool
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/47 Rpt: 61/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	04/09/2024	Marriot-Houston
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$631.52	1777 Walker St
		Houston, TX 78744
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lodging for NBCSL Quarterly Meeting
		Loaging to Negot quartony mouning
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
L		
	Date	Payee name
	02/26/2024	McAfee
	Amount (\$)	Payee address; City; State; Zip Code
	\$162.36	2821 Mission College Blvd
		Santa Clara, CA 95054
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Virus Protection Software
		Vilus i roteottori contware
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/20/2024	Mesquite Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$260.00	617 N. Ebrite Street
		Mesquite, TX 75149
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPETICITUTE TO DETICITE C/OI	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/47 Rpt: 62/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	01/30/2024	Public Opinion
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	P.O. Box 151122
		Dallas, TX 75315
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign Finance Report Prep
		Campaight mance Report Fep
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	01/30/2024	Public Opinion
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 151122
		Dallas, TX 75315
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Finance Report Prep
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	06/25/2024	ROSALIND COFFE
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.26	107 N 6th St
		Garland, TX 75040
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Meal
	0 1 0 0 1 1 1 1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/47 Rpt: 63/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	01/31/2024	Regus Management Group LLC.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$146.72	PO Box 842456
		Dallas, TX 75284
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Office Rent
Ļ	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	03/19/2024	Rowlett Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$320.00	4418 Main St
		Rowlett, TX 75088
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Luncheon
		<u> </u>
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/11/2024	Rowlett Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	4418 Main St
	,	
		Rowlett, TX 75088
	PURPOSE	<u> </u>
	OF	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Luncheon
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	cyperiulture to beliefft C/OI	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above) Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 24/47 Rpt: 64/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date	5 Payee name	
	05/17/2024	Rowlett Strong	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	Requested	
		Rowlett, TX 75088	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Continuations/Donations Made by	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Candidate/Officeholder/Political Committee	ii, i.v., oincertoider living expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	04/23/2024	STARBUCKS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$12.57	100 E Pratt St	
		Baltimore, MD 21202	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	T 000/Develage Expense	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Meal	ii, i.x., omeender iving expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	04/15/2024	STARBUCKS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3.65	313 W Irving Blvd	
		Irving, TX 75060	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 ood/beverage Expense	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Meal	3
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

Fees Offic Food/Beverage Expense Poll Gift/Awards/Memorials Expense Prin Legal Services Sala

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/47 Rpt: 65/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	04/15/2024	STARBUCKS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.36	313 W Irving Blvd
		Irving, TX 75060
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Meal
		Wedi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
$\vdash$	Data	
	Date	Payee name
	03/11/2024	STARBUCKS
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.15	5000 Beltline Rd / #450
		Dallas, TX 75240
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Meal
		ivical
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	D :	
	Date	Payee name
	04/23/2024	Sonesta
	Amount (\$)	Payee address; City; State; Zip Code
	\$702.84	20 Massachusetts Ave NW
L		Washington, DC 20001
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Lodging Emerge Fellowship in Washington DC
		Loughly Enlerge Fellowship in washington DC
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 26/47 Rpt: 66/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date	5 Payee name	•
	01/29/2024	Southwest Airlines	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$367.98	P.O. Box 36647-1CR	
		Dallas, TX 75235	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		I outside of Texas. Complete Schedule T. n, TX, officeholder living expense
			Lifetime Achievement Award
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	03/21/2024	Southwest Airlines	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.60	P.O. Box 36647-1CR	
		Dallas, TX 75235	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 663	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Fee	i, in, oilidentified living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Н	
	Date	Payee name	
	03/22/2024	Southwest Airlines	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$175.98	P.O. Box 36647-1CR	
		Dallas, TX 75235	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Thaver out or district	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
			Day in Houston
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	н	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
l	Sch: 27/47 Rpt: 67/87	Bowers, Rhetta A. (The Honorable) 00080443	
4	Date	5 Payee name	_
l	04/01/2024	Southwest Airlines	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
l	\$299.98	P.O. Box 36647-1CR	
l			
l		Dallas, TX 75235	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF	Travel Out of District  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		NBCSL Conference in Houston	
L			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	'		_
	Date	Payee name	
L	04/01/2024	Southwest Airlines	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$771.96	P.O. Box 36647-1CR	
		Dallas, TX 75235	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
l		Flight to DC Emerge Felowship Kickoff	
		g. to 20 Instige : stellerp the teacher.	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
F	Date	Payee name	-
	04/04/2024	Southwest Airlines	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$45.00	P.O. Box 36647-1CR	
l			
		Dallas, TX 75235	
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF	Travel Out of District  Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Points for Airfare	
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experience to beliefit 6/01	·	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/47 Rpt: 68/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	04/19/2024	Southwest Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$345.99	P.O. Box 36647-1CR
		Dallas, TX 75235
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Houston for Thurgood Marshall Speaking
		engagement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/13/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$517.96	P.O. Box 36647-1CR
		Dallas, TX 75235
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Jack and Jill Teen Conference
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/27/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$295.92	P.O. Box 36647-1CR
	,	
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Flight to American Psychiatric Association Foundation Mental Health Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

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	y - al Con	nmittee	Legal Serv		·		/ages	s/Contract Labor		Travel Out of OTHER (ente		ct tegory not listed above)
					ruction Gui	de explains	how to co	mple	ete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(	Ethics Commission Filers)
	Sch: 29/47 Rpt: 69/87	⊢	Bowers, Rh	etta A. (	The Hon	orable)					00080443	3	
4	Date	5	Payee name										
L	02/05/2024		St. Lukes co	ommuni	ty								
6	Amount (\$)	7	Payee addre	ss; C	City;	State	; Zip Co	de					
	\$329.52		5710 E R L	Thornto	n Fwy								
			Dallas, TX	75223									
8	PURPOSE	⊢	Category (Se		as listed at the	e ton of this so	hedule)	(b)	Description				
	OF		Contribution				neuuie)	` ´	_ `	outsi	ide of Texas. Co	omple	te Schedule T.
	EXPENDITURE		Candidate/0				nittee		Check if Austin	, TX	, officeholder liv	ing ex	kpense
									Donation				
9	Complete ONLY if direct		Candidate/Offi	ceholder	name		Office sou	ght			Office	held	l
L	expenditure to benefit C/O	H											
	Date		Payee name										
	06/07/2024		Switchboard	d Public	Benefit (	Corp.							
	Amount (\$)		Payee addre	ss; C	City;	State	e; Zip Co	de					
	\$98.23		P.O. Box 33	3485									
			Washington	, DC 20	033								
	PURPOSE OF		Category (Se				hedule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Re	ental Exp	ense			<u></u>		ide of Texas. Co		
									Campaign Ro		, officeholder liv	ırıg ex	cpense
									Campaign R	JJU	icalis		
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder	name		Office sou	aht			Office	held	<u> </u>
	expenditure to benefit C/O		zariaidate/OIII	oci ioiuei	name	,	omoc sou	Aur			Office	riciu	•
H	Date	Г	Dayes re-										
	Date		Payee name										
	02/09/2024		Target										
	Amount (\$)	1	Payee addre		City;	State	e; Zip Co	de					
	\$27.96		4701 Lakev	iew Pkv	vy								
			Rowlett, TX	75088									
	PURPOSE	(a)	Category (Se	ee Categori	es listed at the	e top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Food/Bever	age Exp	oense				<b></b>		ide of Texas. Co		
									Check if Austin			ıng ex	kpense
									Phonebank F	-00	u/SHacks		
	Complete ONLY if direct	Ļ	Candidate/Offi	ceholder	namo		Office sou	aht			Office	hold	<u> </u>
	expenditure to benefit C/O		Jai iuiuate/O∏	cenoider	nane		Onice Sou	yrıl			Office	пеіа	ı
	•												
L		_											
		_											

#### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/47 Rpt: 70/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	05/28/2024	Texas Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,300.00	1106 Lavaca St, #100
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		TDP VAN Acess
		121 7/114/10033
Ļ	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨		
	Date	Payee name
	01/22/2024	Thompson
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.00	221 Tingey St SE
		Washington, DC 20001
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Lodging
L	Commiste ONII V if diseast	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
L	01/23/2024	Thompson
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.90	221 Tingey St SE
		Washington, DC 20001
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Food/Beverage
L	Operation ONE VIII II	Overfields (Office health and over a complete co
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete	this form.			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 31/47 Rpt: 71/87	Bowers, Rhetta A. (The Honorable)	00080443			
4	Date	5 Payee name				
	02/20/2024	Treasured Blossoms				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$137.47	5101 Rowlett Rd				
		Rowlett, TX 75088				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description			
	OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.			
		L	Check if Austin, TX, officeholder living expense			
			ont.			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
ľ	expenditure to benefit C/O		Since Hold			
_	Date	Payee name				
	01/22/2024	UBER				
_	Amount (\$)	Payee address; City; State; Zip Code				
	\$31.76	555 Market St				
	Ψ31.70	333 Warket St				
		San Francisco, CA 04105				
		San Francisco, CA 94105				
	PURPOSE OF		Description  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense			
			axi			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O	1				
	Date	Payee name				
	01/22/2024	UBER				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$32.03	555 Market St				
		San Francisco, CA 94105				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description			
	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.			
	LAFENDITORE		Check if Austin, TX, officeholder living expense			
		''	axi			
	Complete ONLY if divert	Candidate/Officeholder name	Office hold			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 32/47 Rpt: 72/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date 01/22/2024	5 Payee name UBER	
6	Amount (\$) \$34.39	7 Payee address; City; State; Zip Code 555 Market St	
		San Francisco, CA 94105	
8	PURPOSE OF EXPENDITURE	1 Have out of Bistrict	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	01/22/2024	UBER	
	Amount (\$) \$35.03	Payee address; City; State; Zip Code 555 Market St	
		San Francisco, CA 94105	
	PURPOSE OF EXPENDITURE	Have out of District	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought H	Office held
	Date 01/22/2024	Payee name UBER	
	Amount (\$) \$35.77	Payee address; City; State; Zip Code 555 Market St	
		San Francisco, CA 94105	
	PURPOSE OF EXPENDITURE	Traver out or District	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 33/47 Rpt: 73/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date	5 Payee name	
	01/22/2024	UBER	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$37.59	555 Market St	
		San Francisco, CA 94105	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Taxi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	01/22/2024	UBER	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.69	555 Market St	
		San Francisco, CA 94105	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Taxi
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	01/22/2024	UBER	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$48.51	555 Market St	
		San Francisco, CA 94105	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Taxi
			Tuni
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 34/47 Rpt: 74/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	01/22/2024	UBER
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$71.18	555 Market St
		San Francisco, CA 94105
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Taxi
		Ιαλί
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/23/2024	UBER
	Amount (\$)	Payee address; City; State; Zip Code
	\$227.94	555 Market St
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Taxi
		Ιαλί
_	Operation ONLY if allowed	Our stide to 100% as health as a sure
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u> </u>	
	Date	Payee name
	01/25/2024	UBER
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.88	555 Market St
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Taxi
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to benefit 0/01	•

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 35/47 Rpt: 75/87	Bowers, Rhetta A. (The Honorable)		00080443
4	Date	5 Payee name		<b>'</b>
	01/25/2024	UBER		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$192.54	555 Market St		
		San Francisco, CA 94105		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
ľ	OF	Travel Out of District	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Taxi
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held
		·		
	Date	Payee name		
	01/26/2024	UBER		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$49.78	555 Market St		
		San Francisco, CA 94105		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Taxi
	Complete ONLY if direct	Candidate/Officeholder name Office sou	l Jaht	Office held
	expenditure to benefit C/OI		3	
_	Date	Payee name		
	01/29/2024	UBER		
_	Amount (\$)	Payee address; City; State; Zip Co	ahe	
	\$53.12	555 Market St	Juc	
	400.122	oos market et		
		San Francisco, CA 94105		
	PURPOSE		(b)	Providetion
	OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District	(0)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense
				Taxi
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
	expenditure to benefit C/OI	¬		

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	. •	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
L	Sch: 36/47 Rpt: 76/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date	5 Payee name	
Ļ	04/04/2024	UBER	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$57.31	555 Market St	
		San Francisco, CA 94105	
8	DUDDOCE		
ľ	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver out or District	Check if Austin, TX, officeholder living expense
			Taxi
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	d Office held
┡			
	Date	Payee name	
L	04/05/2024	UBER City City Code	
	Amount (\$) \$67.43	Payee address; City; State; Zip Code 555 Market St	
	\$07.43	555 Market St	
		San Francisco, CA 0410E	
L	DUDDOOF	San Francisco, CA 94105	N
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver Out or District	Check if Austin, TX, officeholder living expense
			Taxi
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
┡			
	Date 04/05/2024	Payee name UBER	
L			
	Amount (\$) \$137.78	Payee address; City; State; Zip Code 555 Market St	
	Ψ137.70	333 Market St	
		San Francisco, CA 94105	
┝	PURPOSE		) Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Taxi
$\vdash$	Complete ONLY if direct	Candidata/Officeholder name	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
$\vdash$			
ı			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
4	Sch: 37/47 Rpt: 77/87  Date	5 Payee name
	04/08/2024	UBER
6	Amount (\$) \$50.04	7 Payee address; City; State; Zip Code 555 Market St
		San Francisco, CA 94105
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  Taxi
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 04/08/2024	Payee name UBER
	Amount (\$) \$64.28	Payee address; City; State; Zip Code 555 Market St
		San Francisco, CA 94105
	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  Taxi
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 04/22/2024	Payee name UBER
	Amount (\$) \$22.04	Payee address; City; State; Zip Code 555 Market St
		San Francisco, CA 94105
	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  Taxi
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 38/47 Rpt: 78/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date	5 Payee name	
	04/22/2024	UBER	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$37.03	555 Market St	
L		San Francisco, CA 94105	
8	PURPOSE OF	, -	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense
			Taxi
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experialture to beriefit C/O	1	
	Date	Payee name	
	04/22/2024	UBER	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$39.66	555 Market St	
L		San Francisco, CA 94105	
	PURPOSE OF	,	Description  Chask if traval sutside of Taylor Complete Schoolule T
	EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Taxi
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experialitate to beliefit C/OI	1	
	Date	Payee name	
	04/22/2024	UBER	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$90.06	555 Market St	
		Con Francisco CA 0410F	
L		San Francisco, CA 94105	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver Out of District	Check if Austin, TX, officeholder living expense
			Taxi
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
dash			
l			

#### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 39/47 Rpt: 79/87	Bowers, Rhetta A. (The Honorable) 00080443
4	Date	5 Payee name
	04/22/2024	UBER
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$197.14	555 Market St
		San Francisco, CA 94105
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Taxi
		Ιαλί
Ļ	Operation ONLY & Street	One district Office health and the second se
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕	<u> </u>	
	Date	Payee name
	04/25/2024	UBER
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.29	555 Market St
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Taxi
		Ιαλί
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
L		
	Date	Payee name
	05/21/2024	UBER
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.33	555 Market St
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Taxi
L	Operation ON 11 M 17 17	Overhild to 100% or helder a country of the country
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		
L		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Candidate/Officeholder/Political Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	П
Sch: 40/47 Rpt: 80/87	Bowers, Rhetta A. (The Honorable) 00080443	
4 Date	5 Payee name	
05/22/2024	UBER	
6 Amount (\$) \$17.99	7 Payee address; City; State; Zip Code 555 Market St  San Francisco, CA 94105	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel Out of District  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Taxi	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
05/22/2024	UBER	
Amount (\$)	Payee address; City; State; Zip Code	
\$71.73	555 Market St	
	San Francisco, CA 94105	
OF	(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.	
EXPENDITURE	Check if Austin, TX, officeholder living expense  Taxi	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
06/14/2024	UBER	
Amount (\$)	Payee address; City; State; Zip Code	
\$106.18	555 Market St	
	San Francisco, CA 94105	
PURPOSE OF	(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.	
EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Taxi	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete th	nis form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 41/47 Rpt: 81/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date	5 Payee name	•
	06/14/2024	Urban Rocks	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$910.38	3 Winslow Way	
		The Woodlands, TX 77382	
8	PURPOSE		scription
	OF EXPENDITURE	Onto Wards/Wemonals Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			ck and Jill Silent Auction Items
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	01/24/2024	VONLANE	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$94.00	6310 Lemmon Ave Suite 125	
		Dallas, TX 75209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Have out of District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		I — I —	s to Houston for Crown Act Hearing
			5
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	01/25/2024	VONLANE	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$135.00	6310 Lemmon Ave Suite 125	
		Dallas, TX 75209	
	PURPOSE OF		scription
	EXPENDITURE	Have out of District	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			s to Dallas from Crown Act hearing
			S
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 42/47 Rpt: 82/87	Bowers, Rhetta A. (The Honorable)	00080443
4	Date	5 Payee name	•
l	05/20/2024	VONLANE	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$270.00	6310 Lemmon Ave Suite 125	
l			
l		Dallas, TX 75209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
l	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
l		B	tus fare to Austin for Fundraiser
Ļ	0 1 0 0 1 1 1 1		0.00
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┡	·		
l	Date	Payee name	
	03/13/2024	Valentinos	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$41.78	2507 Lakeview Pkwy	
l			
		Rowlett, TX 75088	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
l	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		L   F(	Cood/Beverage
			5
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	03/22/2024	WHATABURGER	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.49	2545 Firewheel Pkwy.	
l		·	
l		Garland, TX 75040	
⊢	PURPOSE		escription
l	OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
		F	ood/Beverage
L	0 1. 2		277
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			
L			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 43/47 Rpt: 83/87	Bowers, Rhetta A. (The Honorable)		00080443
4	Date	5 Payee name		
	04/22/2024	Wall Street Almeda		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$46.82	5101 Almeda Rd.		
		Houston, TX 77004		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Food/Beverage
Ļ	Opening the ONE Wife disease	Open listed (Office helder recover)	la 4	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt	Office held
┡				
	Date	Payee name		
	01/18/2024	Whitepages		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$25.53	1301 Fifth Ave / Ste 1700		
L		Seattle, WA 98101		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Online Directory Services
				, , , , , , , , , , , , , , , , , , , ,
H	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
F	Date	Payee name		
	02/20/2024	Whitepages		
┝	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$25.53	1301 Fifth Ave / Ste 1700		
		Seattle, WA 98101		
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Office Overhead/Rental Expense	(2)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Online Directory Services
L				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
ldash	The straight of the straight of the	•		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenoider/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 44/47 Rpt: 84/87	Bowers, Rhetta A. (The Honorable) 00080443
4 Date	5 Payee name
03/18/2024	Whitepages
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.53	1301 Fifth Ave / Ste 1700
	Seattle, WA 98101
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Online Directory Services
	Crimic Directory Services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
	T
Date	Payee name
04/18/2024	Whitepages
Amount (\$)	Payee address; City; State; Zip Code
\$25.53	1301 Fifth Ave / Ste 1700
	Seattle, WA 98101
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Online Directory Services
	Crimic Directory Services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
	<u> </u>
Date	Payee name
05/20/2024	Whitepages
Amount (\$)	Payee address; City; State; Zip Code
\$25.53	1301 Fifth Ave / Ste 1700
	Seattle, WA 98101
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Online Directory Services
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
experience to belief eye	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·					
	Sch: 45/47 Rpt: 85/87	Bowers, Rhetta A. (The Honorable) 00080443					
4	Date	5 Payee name					
	06/18/2024	Whitepages					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$25.53	1301 Fifth Ave / Ste 1700					
		Seattle, WA 98101					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		Online Directory Services					
		J 2					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
_	Date	Davies same					
	01/22/2024	Payee name Wiseguy					
		<u> </u>					
Amount (\$)		Payee address; City; State; Zip Code					
	\$118.82	300 Massachusetts Ave NW Retail #1					
		Washington, DC 20001					
PURPOSE		(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Food/Beverage					
		1 oou/Develage					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	<b>y</b>					
H	Data						
	Date 01/04/2024	Payee name Zoom Video Communications Inc.					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$34.10	55 Almaden Blvd / 6th Floor					
		San Jose, CA 95113					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense					
		Check if Austin, TX, officeholder living expense					
		Video communications platform					
	Complete ONLY if direct	Condidate/Office holder name Office as white					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 46/47 Rpt: 86/87	Bowers, Rhetta A. (The Honorable) 00080443							
4	Date	5 Payee name							
	02/05/2024	Zoom Video Communications Inc.							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$34.10	55 Almaden Blvd / 6th Floor							
		San Jose, CA 95113							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense							
		Video communications platform							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O	1							
	Date	Payee name							
	03/04/2024	Zoom Video Communications Inc.							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$34.10	55 Almaden Blvd / 6th Floor							
		San Jose, CA 95113							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE		Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense							
		Video communications platform							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	<del>1</del>							
	Date	Payee name							
	04/04/2024	Zoom Video Communications Inc.							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$34.10	55 Almaden Blvd / 6th Floor							
		San Jose, CA 95113							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE		Office Overhead/Rental Expense							
		Check if Austin, TX, officeholder living expense  Video communications platform							
		video communications piationn							
Complete ONLY if direct Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/OH								

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment		The Instruction Guide explains how to comple	te this form.						
1	Total pages Schedule F1:	2	FILER NAME		3	Filer ID	(Ethics Commission Filers)			
	Sch: 47/47 Rpt: 87/87		Bowers, Rhetta A. (The Honorable)			00080443				
4	Date	5	Payee name							
	05/06/2024		Zoom Video Communications Inc.							
6	Amount (\$)	ı	Payee address; City; State; Zip Code							
	\$34.10		55 Almaden Blvd / 6th Floor							
			San Jose, CA 95113							
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b)	Description						
	OF EXPENDITURE		Office Overhead/Rental Expense				nplete Schedule T.			
				Video commu		, officeholder livin				
				VIGCO COMMIN	arm	cations plati	OIIII			
9	Complete ONLY if direct		Candidate/Officeholder name Office sought			Office h	eld			
ľ	expenditure to benefit C/O		Cince sought			01110011	old			
_	Date	Π	Payee name							
	06/04/2024	ı	Zoom Video Communications Inc.							
_	Amount (\$)	┡	Payee address; City; State; Zip Code							
	\$34.10	1	55 Almaden Blvd / 6th Floor							
	Ψ04.10		33 / Almaden Biva / Oth Floor							
			San Jose, CA 95113							
	PURPOSE	├		Description						
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							
	Complete ONLY if direct		Candidate/Officeholder name Office sought			Office h	eld			
	expenditure to benefit C/Ol	П								
l										