#### CORRECTION/AMENDMENT AFFIDAVIT FORM COR-C/OH FOR CANDIDATE/OFFICEHOLDER Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00088181 18 Date Received CANDIDATE / MS / MRS / MR **FIRST** MI **ELECTRONICALLY FILED OFFICEHOLDER** Mr. Andrew J. 07/16/2024 NAME NICKNAME LAST **SUFFIX** ΑJ Louderback Date Hand-delivered or Date Postmarked **ORIGINAL** Runoff Other (specify) January 15 REPORT TYPE X July 15 Receipt # Exceeded modified reporting limit Amount 15th day after campaign treasurer 30th day before election appointment (officeholder only) Date Processed 8th day before election Final Report (Attach C/OH-FR) ORIGINAL PERIOD Month Month Day Day Year Year Date Imaged **COVERED THROUGH** 05/19/2024 06/30/2024 **EXPLANATION OF CORRECTION** The loan amount wasn't on coversheet totals **AFFIDAVIT** I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Mr. Andrew J. Louderback Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said \_\_\_\_, this the \_\_\_ \_\_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to com	nplete this form.	1 Filer ID (Ethics Commissi 00088181	ion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	Mr.	Andrew J.			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	07/16/2024	
	AJ	Lasi		SUFFIX	0171072021	
	Au	Louderback				
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	PO BOX 1792					T
ADDRESS					Receipt #	Amount
Change of Address	Victoria, TX 77902				Date Processed	
—					Date Processed	
					Date Imaged	
					and manger	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Marci R.				
NAME		Wick of Tex				
	NICKNAME	LAST		SUFFIX		
	NICKNAME	Louderback		SUFFIX		
		Louderback				
C CAMBAICNI	CTDEET ADDRESS (NO.	20 DOV DI EACE\.	ADT	/ CLUTE #: CITY:	CT.A	TE: 710 CODE
6 CAMPAIGN TREASURER	STREET ADDRESS (NO F	PO BOX PLEASE);	APT/	/ SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	PO BOX 1792					
(Residence or Business)						
	Victoria, TX 77902					
7 CAMPAIGN	AREA CODE PH	ONE NUMBER E	EXTENSION			
TREASURER	(361) 550-0422	ONE NOWBER E	.XTENSION			
PHONE	(301) 550-0422					
8 REPORT						
TYPE	January 15	30th day before	election R	Runoff	15th day after can	npaign treasurer
				_	appointment (offic	eholder only)
	X July 15	8th day before		exceeded modified eporting limit	Final Report (Atta	ch C/OH-FR)
9 PERIOD	Month Day Yea			Month Day	Year	
COVERED	05/19/2024	TH	IROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE	<u> </u>		ELECTION TYPE		
	Month Day Yea	ır   LIP	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
				_		
11 OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGHT	(if known)	
	()			State Represent		
				,		
		GO T	O PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

3 of 18

13 C / OH NAME	Louderback, Andrew	J. (Mr.)	<b>14</b> Filer ID (	Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political e These expenditures may have been made I officeholders are required to report this in	without the candidate's or office	holder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL	COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER	NAME					
		COMMITTEE CAMPAIGN TREASURER	ADDRESS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTH ES OF LOANS, OR CONTRIBUTIONS MA		\$ 0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF	F LOANS)	\$ 45,699.84				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 61,092.68				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS O RIOD	F THE LAST DAY OF THE	<b>\$</b> 110,688.07				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOTING PERIOD	ANS AS OF THE LAST DAY	<b>\$</b> 105,158.00				
17 AFFIDAVIT			er penalty of perjury, that the acc cludes all information required to n Code.					
			Mr. Andrew J. Louderback					
		Sign	nature of Candidate or Officehold	der				
AFFIX NO	TARY STAMP / SEAL AB	OVE						
		aid ertify which, witness my hand and seal of o		day				
	cer administering	Printed name of officer administering		administering oath				
Signature of Offi	oo. aaniinistoinig	. m.co. name or omeer duministering	, The or officer	and the state of t				

## **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

	4 of 18
18 FILER NAME 19 Filer ID	(Ethics Commission Filers)
Louderback, Andrew J. (Mr.)	3181
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 38,899.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 6,800.84
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 61,092.68
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
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 CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$
	•

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 5/18		
2	FILER NAME Louderback,	Andrew J. (Mr.)		3	Filer ID (Ethics Commission 00088181	on Filers)	
4 Date 06/18/2024  5 Full name of contributor out-of-state PAC (ID#:) Avera, Ashley  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00			
_	<u> </u>	Austin, TX 78704					
8	Gov Affairs (		9 Employer (See Instructions Avera Governmental Aff		LLC		
Date Full name of contributor out-of-state PAC (ID#:)  06/06/2024 Diebel, Stephen  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00			
	Principal occu	Victoria, TX 77904  spation / Job title (See Instructions)	Employer (See Instructions	-/- 			
	rancher	pation / 300 title (See Instructions)	Diebel Cattle Company	·)			
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#: GT Oilfield Repair Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,500.00	
		Edna, TX 77957					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#:_Hobbs, Lynda Contributor address; City; State; Zip Code  Yorktown, TX 78164	)		Amount of Contribution (\$)	\$50.00	
	Principal occuretired	pation / Job title (See Instructions)	Employer (See Instructions retired	5)			
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Police Officers Union PAC Contributor address; City; State; Zip Code Houston, TX 77007			Amount of Contribution (\$)	\$1,500.00	
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE A1
	The Instru	ction Guide explains how to con	nplete this forr	m.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 6/18
2	FILER NAME Louderback,	Andrew J. (Mr.)			3	Filer ID (Ethics Commission Filers) 00088181
4	Date 06/18/2024	<ul> <li>Full name of contributor  out-of Jones, Don</li> <li>Contributor address; City; State; Zip C</li> </ul>	-state PAC (ID#:	)	7	Amount of Contribution (\$) \$50.00
_		Hallettsville, TX 77964				
8	Principal occu retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	)	
Date Full name of contributor out-of-state PAC (ID#:)  06/07/2024 Muir, Patricia  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$25,000.00			
	Principal occu	Cuero, TX 77954 pation / Job title (See Instructions)		Employer (See Instructions	)	
	laywer			self employed		
	Date 06/01/2024	Full name of contributor out-of Parkinson, Thomas Contributor address; City; State; Zip C	-state PAC (ID#: Code			Amount of Contribution (\$) \$50.00
		San Antonio , TX 78217				
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)	
Date Full name of contributor out-of-state PAC (ID#:)  05/20/2024 Poole, Jon  Contributor address; City; State; Zip Code  Edna, TX 77957				Amount of Contribution (\$) \$200.00		
		Employer (See Instructions self-employed	)			
	Date 05/21/2024	Reed, Karen	-state PAC (ID#:			Amount of Contribution (\$) \$99.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)	
			·			

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instru	ction Guide explains how to compl	1	Total pages Schedule A1: Sch: 3/3 Rpt: 7/18					
2	FILER NAME Louderback,	Andrew J. (Mr.)			3	Filer ID (Ethics Commission 00088181	on Filers)		
4	5 Full name of contributor out-of-state PAC (ID#:) 7 Sahadi, Reagan 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00				
8	Principal occu	Corpus Christi, TX 78412 pation / Job title (See Instructions)	9	Employer (See Instructions	)				
	attorney			self employed					
	Date Full name of contributor out-of-state PAC (ID#:)  06/04/2024 TX & Southwestern Cattle Raisers Association PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00				
		Fort Worth, TX 76185							
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)				
	Date 06/13/2024	Full name of contributor out-of-state  Texas Dental Association PAC  Contributor address; City; State; Zip Code	te PAC (ID#:			Amount of Contribution (\$)	\$500.00		
		Austin, TX 78704							
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)				
	Date 05/19/2024	Full name of contributor out-of-star Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701		)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)				
	Date 06/05/2024	Zafereo, Mark	te PAC (ID#:			Amount of Contribution (\$)	\$1,000.00		
	Principal occu retired	oation / Job title (See Instructions)		Employer (See Instructions retired	)				
			<b>,</b>						

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/18					
2 FILER NAME Louderback	, Andrew J. (Mr.)	3 Filer ID (Ethico) 00088181	s Commission Filers)				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
5 Date 05/23/2024	<ul> <li>Full name of contributor</li></ul>	contribution (\$) \$1,983.96	campaign endorsement text messages				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON		outside of Texas. Complete Schedule T.			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (	FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 05/22/2024	Full name of contributor out-of-state PAC (ID#: Dan Patrick Campaign  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$2,436.93	In-kind contribution description campaign endorsement text messages			
	Houston, TX 77046		Check if travel of	I I outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ii	nstructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (	FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 05/20/2024	Full name of contributor X out-of-state PAC (ID#: C0 Gun Owners of America Texas Contributor address; City; State; Zip Code	0278101 )	Amount of contribution (\$) \$2,379.95	In-kind contribution description I bus tour stop			
Principal occi	Springfield , VA 22151  upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		outside of Texas. Complete Schedule T.			
· 	, , ,	, , ,	,	, 			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)			
Contributor's	Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

### 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		Travel Out of District OTHER (enter a category not listed above)
┡	Total manage Cabadyla F1.		2 Files ID (Ethics Commission Filess)
ľ	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 1/10 Rpt: 9/18	Louderback, Andrew J. (Mr.)	00088181
4	Date	5 Payee name	
	06/19/2024	7 ELEVEN	
L	00/13/2024		
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4.52	3601 John Stockbauer	
		Viotorio TV 77004	
L		Victoria, TX 77904	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE		TX, officeholder living expense
		ice/water for p	ooll greeters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office hold
١	Complete ONLY if direct expenditure to benefit C/OI		Office held
	experiantare to serious eyes	•	
Г	Date	Payee name	
	06/18/2024	Anedot	
L			
	Amount (\$)	Payee address; City; State; Zip Code	
	\$16.86	1920 McKinney Ave 7th Floor	
		Dallas, TX 75201	
L		Dallas, 17 73201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel of	outside of Texas. Complete Schedule T.
	LXI LINDITORE	Check if Austin,	TX, officeholder living expense
		Service Fees	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
L			
	Date	Payee name	
	06/08/2024	Dacosta Volunteer Fire Department	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$26.00	144 Commerce Ave	
	Φ20.00	144 Confinerce Ave	
1			
		Victoria, TX 77905	
$\vdash$	PURPOSE		
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Ponations wade by	TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, fundraiser do	
1		lunuraiser dol	าเลแบบ
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
1	expenditure to benefit C/O	1	
$\vdash$			
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1			

### 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 Committee Credit Card Payment	Legal Services  The Instruction Guide explains h	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2 FILER N	IAME		3 Filer ID (Ethics Commission Filers)
Sch: 2/10 Rpt: 10/18 Louder	back, Andrew J. (Mr.)		00088181
4 Date 5 Payee r	name		
06/08/2024 Dacost	a Volunteer Fire Department		
6 Amount (\$) 7 Payee a	•	Zip Code	
\$250.00 144 Co	mmerce Ave		
Victoria	a, TX 77905		
8 PURPOSE (a) Categor	y (See Categories listed at the top of this sche	edule) (b) Description	
	outions/Donations Made By		l outside of Texas. Complete Schedule T.
Candid	ate/Officeholder/Political Commi	fundraiser do	n, TX, officeholder living expense
		idildidisci de	Shalon
9 Complete ONLY if direct Candidate	e/Officeholder name O	ffice sought	Office held
expenditure to benefit C/OH	or emocricia en riame	moe sought	Silice Held
Date Payee r	name		
	ines & Associates		
Amount (\$) Payee a	address; City; State;	Zip Code	
``,	Coyote Call Way	p	
Ψ2,500.00	Coyote Can Way		
Austin,	TX 78725		
PURPOSE (a) Categor	y (See Categories listed at the top of this sche	(b) Description	
OF Consul	ting Expense		l outside of Texas. Complete Schedule T.
		media consu	n, TX, officeholder living expense
		media consu	aurig
Complete ONLY if direct Candidate	e/Officeholder name O	ffice sought	Office held
expenditure to benefit C/OH	or om contour name	moe sought	Sinde neid
Date Payee r	name		
	ines & Associates		
Amount (\$) Payee a		Zip Code	
· · · · · · · · · · · · · · · · · · ·	Coyote Call Way	Lip Code	
Ψ2,300.00	Coyote Can way		
Austin,	TX 78725		
PURPOSE (a) Categor	y (See Categories listed at the top of this sche	(b) Description	
I 0E I	ting Expense	Check if travel	l outside of Texas. Complete Schedule T.
ZXI ZXISXISXI			n, TX, officeholder living expense
		media consu	лину
Complete ONLY if direct Candidate	e/Officeholder name O	ffice sought	Office held
expenditure to benefit C/OH	G-Omocholaci name O	moc sought	Office field

### 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (carbon a extension and listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Cabadula F1:	2 FILED NAME	3 Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 3/10 Rpt: 11/18	Louderback, Andrew J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00088181
4	Date	5 Payee name	•
	05/31/2024	Garcia, Jaycob	
6	Amount (\$) \$2,000.00	<ul><li>7 Payee address; City; State; Zip Code</li><li>609 Mallette Dr Apt 427</li></ul>	
		Victoria , TX 77904	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/ Wages/Contract Eabor	vel outside of Texas. Complete Schedule T.
	2/11/21/01/12		stin, TX, officeholder living expense
		canvassino	)
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/20/2024	Griffin Communications LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,650.00	7111 Harvest Trail Dr	
		Austin , TX 78736	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		vel outside of Texas. Complete Schedule T.
			stin, TX, officeholder living expense
		consulting	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/20/2024	Griffin Communications LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9,141.06	7111 Harvest Trail Dr	
		Austin , TX 78736	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consuling Expense	vel outside of Texas. Complete Schedule T.
			stin, TX, officeholder living expense
		consulting	
	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 Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Git/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	/ - al Cor	nmittee	Gift/Awards/Memorials   Legal Services	·		/ages	/Contract Labor		Travel Out of I OTHER (enter	District a category not listed above	e)
	2. Jan Gara Caymon			The Instruction Gu	ide explains	how to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)
	Sch: 4/10 Rpt: 12/18		Louderback	, Andrew J. (Mr.	)					00088181		
4	Date	5	Payee name									
L	05/22/2024		Griffin Com	munications LLC	<b>:</b>							
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$7,608.11		7111 Harve	st Trail Dr								
			Austin , TX	78736								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Consulting I					브			implete Schedule T.	
	Za Labitone							_	, TX,	officeholder livi	ng expense	
								consulting				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	(	Office sou	ght			Office	held	
	CAPETIGITUTE TO DETICITE C/OI	' '										
	Date		Payee name									
	05/22/2024		Griffin Com	munications LLC	;							
	Amount (\$)	Г	Payee addres	ss; City;	State	; Zip Co	de					
	\$4,650.00		7111 Harve	st Trail Dr								
			Austin , TX	78736								
	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Consulting I					<b>=</b>			mplete Schedule T.	
								<b>—</b>		officeholder livi	ng expense	
								Text messagi	ıng			
_												
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	(	Office sou	ght			Office	neid	
	Date		Payee name									
L	06/17/2024		Griffin Com	munications LLC	<u> </u>							
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$7,500.00		7111 Harve	st Trail Dr								
			Austin , TX	78736								
	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Consulting I					브			mplete Schedule T.	
								ш	, TX,	officeholder livi	ng expense	
								consulting				
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	(	Office sou	ght			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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 5/10 Rpt: 13/18	2 FILER NAME Louderback, Andrew J. (Mr.) 3 Filer ID (Ethics Commission Filers) 00088181
4	•	
4	Date 05/19/2024	5 Payee name Jackson County Herald Tribune
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$504.00	306 N Wells
		edna, TX 77957
8	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
		ad
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/15/2024	Koehl, Dylan
	Amount (\$)	Payee address; City; State; Zip Code
	\$61.30	12858 J2 Ranch Rd
	402.00	12555 02 Marion Na
		Inez, TX 77968
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	contractor living expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		rental repair
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/14/2024	Koehl, Dylan
	Amount (\$)	Payee address; City; State; Zip Code
	\$251.68	12858 J2 Ranch Rd
		Inez, TX 77968
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	contractor living expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		rental repair
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	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 Commi

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: 6/10 Rpt: 14/18	Louderback, Andrew J. (Mr.) 00088181
4	Date	5 Payee name
	06/30/2024	Louderback, AJ
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$14,819.60	PO BOX 1792
		Victoria, TX 77902
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if Austin, TX, officeholder living expense
		Expense Check if Austin, TX, officeholder living expense mileage reimbursement
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
⊨		
	Date	Payee name
L	06/28/2024	Louderback, Marci
	Amount (\$)	Payee address; City; State; Zip Code
	\$841.27	PO BOX 1792
		Victoria, TX 77902
	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 supplies/expenses, office supplies/expenses
		Crefit Supplies/expenses, office supplies/expenses
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
F	Date	Payee name
	05/25/2024	Matagorda VFD
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	PO Box 70
	φου.σσ	T & BOX TO
		Matagorda, TX 77457
	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.
	EX. ENDITORE	Candidate/Officeholder/Political Committee
		iunuraisei uonation
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
$\vdash$		

### 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/Officenoider/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: 7/10 Rpt: 15/18	Louderback, Andrew J. (Mr.) 00088181			
4	Date	5 Payee name			
	05/25/2024	Matagorda VFD			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$280.00	PO Box 70			
		Matagorda, TX 77457			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		fundraiser donation			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
_	Date	Payee name			
	06/19/2024	PJ's Coffee			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$37.97	4102 N Navarro			
	401.01	1202 W Mayano			
		Victoria, TX 77901			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		meeting coffee			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				
-	Date	Payee name			
	06/27/2024	PJ's Coffee			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$30.31	4102 N Navarro			
	Ψ30.31	4102 N Navallo			
		Victoria, TX 77901			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense			
	EXI ENDITORE	Check if Austin, TX, officeholder living expense			
		meeting coffee			
	Complete ONLY if direct	Condidate/Office helder name			
	Complete ONLY if direct expenditure to benefit C/O	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 Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 8/10 Rpt: 16/18	Louderback, Andrew J. (Mr.) 00088181
4	Date	5 Payee name
	05/26/2024	Sacred Heart Church
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$180.00	PO BOX H
		Hallettsville, TX 77964
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		iditalisei donatori
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
-	Data	
	Date	Payee name Shiner Catholic Church
	05/26/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$365.00	306 S Avenue F
		Shiner, TX 77984
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	06/11/2024	Trujillo, Victoria
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$) \$600.00	Payee address; City; State; Zip Code
	φουο.υυ	
		Vistoria TV 77004
		Victoria, TX 77904
	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	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		blockwalking
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
ı		

### 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
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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this	s form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 9/10 Rpt: 17/18	Louderback, Andrew J. (Mr.)	00088181		
4	Date	5 Payee name			
	05/28/2024	Vera Cruz			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$850.00	3110 N Navarro			
		Victoria, TX 77901			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	ription		
	OF EXPENDITURE	Event Expense	heck if travel outside of Texas. Complete Schedule T.		
		I	heck if Austin, TX, officeholder living expense ch party meal		
		Wate	in party meai		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O		565 1.6.6		
_	Date	Payee name			
	06/10/2024	Victoria Generals			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$60.00	1307 E Airline Ste H			
	400.00	130. 27 310 11			
		Victoria, TX 77901			
	PURPOSE		suitant a sa		
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By	лгрион heck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Continuations/Donations Wade By	heck if Austin, TX, officeholder living expense		
		spor	nsorship donation		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
	experialitate to beliefit of of	'			
	Date	Payee name			
	05/19/2024	Victory Made Media			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$525.00	709 Pheasant Dr			
		Victoria, TX 77905			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc			
	OF EXPENDITURE	Advertising Expense	heck if travel outside of Texas. Complete Schedule T.		
		I	heck if Austin, TX, officeholder living expense		
		l vius			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI	9			
l					

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		
Ļ		· · · · · · · · · · · · · · · · · · ·	_
1	Total pages Schedule F1:		
	Sch: 10/10 Rpt: 18/18	Louderback, Andrew J. (Mr.) 00088181	
4	Date	5 Payee name	
L	05/22/2024	Victory Made Media	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$350.00	709 Pheasant Dr	
		Victoria, TX 77905	
8	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	
		video work	
		WIGG WORK	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
	Date	Payee name	=
	06/11/2024	Warriors Weekend	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$400.00	4802 John Stockbauer	
	* ******		
		Victoria, TX 77904	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee	
		fundraiser donation	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
			_
	Date	Payee name	
	06/01/2024	Yoakum Chamber of Commerce	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.00	105 Huck St	
		Yoakum, TX 77995	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	LAI LINDITURE	Candidate/Officeholder/Political Committee	
		festival donation	
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		_
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
		·•	
	rms provided by Texas E	thics Commission Washing state type Version V/ 1.0 d278ab	~