CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	te this form.	1 Filer ID (Ethics Commi 00084254		2 Total pages fi	led: 34
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Cody T.			Date Received	
''''					ELECTRONIC	ALL V EIL ED
						ALLI FILLD
	NICKNAME	LAST		SUFFIX	10/07/2024	
		Vasut				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	P O BOX 2724					
ADDRESS					Receipt #	Amount
Change of Address	ANGLETON, TX 77516					
	ANOLL TON, TA 11310				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER		FIRST		MI		
NAME	Mr.	Cody Thane				
	NICKNAME	LAST		SUFFIX		
		Vasut				
6 CAMPAIGN	STREET ADDRESS (NO PO I	BOX PLEASE);	AP.	T / SUITE #; CITY	; ST.	ATE; ZIP CODE
TREASURER	P.O. Box 2724					
ADDRESS						
(Residence or Business)	Angleton, TX 77516					
	Angleton, 1X 77510					
7 CAMPAIGN	AREA CODE PHONE	E NUMBER E	EXTENSION			
TREASURER	(979) 481-0715					
PHONE						
8 REPORT						
TYPE	January 15 X	30th day before	election	Runoff	15th day after ca	mpaign treasurer
			-		appointment (off	
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Att	ach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	07/01/2024	IH	IROUGH	09/26/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
				<u> </u>		
11 OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGH	Γ (if known)	
	State Representative Distri	ct 25			tative District 25	
			·			
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 34

13 C / OH NAME	Vasut, Cody T. (The	Honorable)	14 Filer ID 00084254	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 15,000.66
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 30,692.39
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 76,656.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.		
		The Ho	norable Cody T. Vasu	ıt
		Signature of	of Candidate or Officehol	lder
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 34
18 FILER NA	19 Filer ID	(Ethics C	ommission Filers)	
	ody T. (The Honorable)	00084254		
	LE SUBTOTALS SCHEDULE		SUE	BTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	15,000.66
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	15,597.73
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	14,998.66
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	96.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	40.95

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/34	
2	FILER NAME Vasut, Cody	T. (The Honorable)		3	Filer ID (Ethics Commission 00084254	on Filers)
4	Date 08/22/2024	Full name of contributor	ouston, PAC	7	Amount of Contribution (\$)	\$1,000.00
_		Houston, TX 77092				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/25/2024 Associated Builders & Contractors of Texas PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/05/2024	Full name of contributor out-of-state PAC (ID#:_ Dabeau, Jocelyn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$350.00
	Principal occu	Austin, TX 78731-6134 pation / Job title (See Instructions)	Employer (See Instructions)		
		,	, , , , , , , , , , , , , , , , , , , ,	,		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_ Nosek, Nicole Contributor address; City; State; Zip Code Austin, TX 78741			Amount of Contribution (\$)	\$1,650.00
			Employer (See Instructions Texans for Reasonable		lutions	
	Date 08/26/2024	Full name of contributor x out-of-state PAC (ID#: \(\frac{1}{2} \) Phillips 66 PAC Contributor address; City; State; Zip Code Washington, DC 20004	C00513549)		Amount of Contribution (\$)	\$2,500.66
	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	form.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/34	
2	FILER NAME Vasut, Cody	T. (The Honorable)		3	Filer ID (Ethics Commission 00084254	ion Filers)
4	Date 09/11/2024	Full name of contributor	<u>; </u>	7	Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78701				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor		•	Amount of Contribution (\$)	\$3,000.00
	Principal occi	Austin, TX 78701	Employer (See Instructions	5)		
	Principal occupation / Job title (See Instructions) Employer (See Instruction			·)		
	Date 09/13/2024	Full name of contributor	,		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78768-2246				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/24/2024	Full name of contributor out-of-state PAC (ID# Thomas Jr., Clifton Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Victoria, TX 77902 upation / Job title (See Instructions)	Employer (See Instructions C. L. Thomas, Inc.	<u> </u> S)		

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/9 Rpt: 6/34	Vasut, Cody T. (The Honorable) 00084254
4	Date	5 Payee name
	07/23/2024	Alvin Manvel Area Chamber of Commerce
6	Amount (\$) \$325.00	7 Payee address; City; State; Zip Code 105 Willis St Alvin, TX 77511
8	PURPOSE	
0	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Dues
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	08/30/2024	Anedot, Inc.
	Amount (\$) \$66.30	Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770
		New Orleans, LA 70112-5204
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/13/2024	Angleton Willing Workers 4-H
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 2498 CR 22
		Angleton, TX 77515
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	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 Comm

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	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: 2/9 Rpt: 7/34	Vasut, Cody T. (The Honorable) 00084254
4	Date	5 Payee name
	07/20/2024	Brazoria Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.00	202 W Smith St. #A
		Brazoria, TX 77422
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Membership Dues
		Membership Bucs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
_		
	Date	Payee name
	09/05/2024	Brazoria County Alliance for Children
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	139 E Myrtle St
		Angleton, TX 77515
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Bollation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	D :	
	Date	Payee name
	07/02/2024	Brazoria County Association for Children's Habilitation
	Amount (\$)	Payee address; City; State; Zip Code
	\$515.00	120 E. Hospital Dr.
		Angleton, TX 77515
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAFENDITORE	Candidate/Officeholder/Political Committee
		Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to belieff 0/01	•

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	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: 3/9 Rpt: 8/34	Vasut, Cody T. (The Honorable) 00084254
4	Date	5 Payee name
	09/18/2024	Brazoria County Fair Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	901 S. Downing Road
		Angleton, TX 77515
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Deficition (addition parentage of oca center prioto)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	07/20/2024	Brazosport Area Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	300 Abner Jackson Pkwy
		Lake Jackson, TX 77566
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Membership Dues
		monipoleting Bucc
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date	Payee name
	07/13/2024	Chase Bank N.A.
	Amount (\$)	Payee address; City; State; Zip Code
	\$325.84	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		5/23, 5/25, 6/14 and 6/20 F4
_	Operation ONE VIII II	Orandidate (Office leaded as a sure
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	,	

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/9 Rpt: 9/34	Vasut, Cody T. (The Honorable) 00084254
4	Date	5 Payee name
	07/26/2024	Chase Bank N.A.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,449.32	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		7/20 and 7/23 F4
		720 4.16 7.20 .
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	08/08/2024	Chase Bank N.A.
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$1,392.70	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		7/29 and 8/6 F4
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	08/17/2024	Chase Bank N.A.
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,552.79	P.O. Box 15123
l		
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 8/9 and 8/16 F4
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г		

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 5/9 Rpt: 10/34	Vasut, Cody T. (The Honorable) Vasut, Cody T. (The Honorable)
4	Date	5 Payee name
•	09/09/2024	Chase Bank N.A.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,204.19	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		8/17, 8/26, 8/27, 9/1, and 9/7 F4
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	07/20/2024	Columbia Brazoria FFA Alumni
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO BOX 1354
		West Columbia, TX 77486
	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
		Candidate/Officeholder/Political Committee
		Sportsorship for furnitation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
L	08/24/2024	Columbia Heritage Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	508 E Bernard St
		West Columbia, TX 77486
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Sponsorship
		Sponsorarily
\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 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: 6/9 Rpt: 11/34	Vasut, Cody T. (The Honorable) 00084254
4	Date	5 Payee name
	09/19/2024	Direct Effect Marketing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,538.01	642 CR 605
		Angleton, TX 77515
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
		Campaign Yard Signs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	08/22/2024	Exchange Club of Angleton
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P.O. Box 1196
		Angleton, TX 77516
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Sportsorship
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-1
F	Date	Payee name
	07/12/2024	Express Self Storage
H	Amount (\$)	Payee address; City; State; Zip Code
	\$112.00	1804 E Mulberry St
		Angleton, TX 77515
H	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 Campaign Storage
		Campaign Storage
-	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 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/9 Rpt: 12/34	Vasut, Cody T. (The Honorable) 00084254
4	Date	5 Payee name
	08/02/2024	Express Self Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$97.00	1804 E Mulberry St
		Angleton, TX 77515
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
		Campaign storage
		1,43
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	09/03/2024	Express Self Storage
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.00	1804 E Mulberry St
		Angleton, TX 77515
	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
		Campaign Storage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Davida nama
	07/20/2024	Payee name Friends of the River San Bernard
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3199 Bernard Oaks St
		Brazoria, TX 77422
	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
		Candidate/Officeholder/Political Committee
		Cponsoronip for fandicasor
	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 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 complet	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/9 Rpt: 13/34	Vasut, Cody T. (The Honorable)	00084254
4	Date	5 Payee name	'
	08/22/2024	Greater Angleton Chamber of Commerce	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$75.00	222 N Velasco St	
		Angleton, TX 77515	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
	OF EXPENDITURE	Fees I	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Membership dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office field
_	Date		
	Date	Payee name	
	07/31/2024	Harland Clarke	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.58	15955 La Cantera Parkway	
		San Antonio, TX 78256	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			New checks
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	07/01/2024	Revive Young Adult Fellowship, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	P.O. Box 1103	
		Angleton, TX 77516	
	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	Check if Austin, TX, officeholder living expense
			Donation
	Operation ONE VIII II	Out tidate 10% as hadden a see	Office I I I
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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		Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel Out of District OTHER (enter a category not listed above)				
_	Tatal marine Cabadula F1.	la ellednian		ue explains now to	Compi		- Filer ID	(Ethios Commission Filers)		
1	Total pages Schedule F1:	1		L.L.X		[3		(Ethics Commission Filers)		
	Sch: 9/9 Rpt: 14/34	Vasut, Co	dy T. (The Honora	ble)			00084254			
4	Date	5 Payee nam	e							
	09/01/2024	SquareSp	ace, Inc.							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code					
	\$14.00	225 VARIO	CK ST FL 12							
		Now York	NY 10014							
_					100					
8 PURPOSE OF			See Categories listed at the	e top of this schedule)	(a)	Description	+-:	onlesse College de la T		
	EXPENDITURE	Advertisin	g Expense			<u> </u>	tside of Texas. Con X, officeholder living			
			Additional w							
0	Complete ONLY if direct	Candidata/O	fficeholder name	Office	 sought		Office h	ald		
9	expenditure to benefit C/Ol		niceriolaer name	Office	sougni		Office fi	eiu		
	Date	Payee nam	e							
	07/20/2024	Sweeny C	hamber of Comme	erce						
	Amount (\$)	Payee addr	ess; City;	State; Zip	Code					
	\$200.00	111 W 3rd	St #5							
		Sweeny, T	X 77480							
	PURPOSE	(a) Category	See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				=	tside of Texas. Con			
	EXI ENDITORE					\Box	X, officeholder living	g expense		
						Membership d	ues			
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office	sought		Office h	eld		
	Date	Payee nam	e							
	08/03/2024	West Pear	land Republican V	Vomen PAC						
	Amount (\$)	Payee addr		State; Zip	Code					
	\$1,200.00	8325 Broa		State, Zip	Couc					
	Ψ1,200.00		-							
		Suite 202,								
		Pearland,	TX 77581-5773							
	PURPOSE	(a) Category	See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE		ons/Donations Mad				tside of Texas. Con	•		
	EXI ENDITORE	Candidate	/Officeholder/Politi	ical Committee		—	X, officeholder livin			
						to BCAC fundr		g chair and then donated		
						to bo, to furful	u.501)			
	Complete ONLY if direct		fficeholder name	Office	sought		Office h	eld		
	expenditure to benefit C/O	П								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District
Travel Out of District
OTHER (enter a cate)

Candidate/Officeriolide//Folitica		uction Guide explains how	ŭ	THEN (enter a category no	ot iistea ab	iovej	
1 Total pages Schedule F4:		·	·	3 Filer ID (Ethics 0	Commiss	ion Filers)	
Sch: 1/17 Rpt: 15/34	Vasut, Cody T. (The	e Honorable)		00084254			
4 CREDIT CARD ISSUER	Name of finan	ank N.A.	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$646.15	07/20/2024	07/26/2024				
7 PAYEE	(a) Payee name Brazoria County Dream Center		(b) Payee address;	City,	State,	Zip Code	
			792 Brazosport Blvd S				
			Clute, TX 77531				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top of		Donation				
X Political	Contributions/Donation Candidate/Officeholde						
Non-Political	olitical (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX			officeholder living expens	e		
9 Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name Office sought			Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$120.00	07/20/2024	07/26/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	True to Life Ministrie	ac .	105 This Way				
	True to Life Willistiff						
DUDDOGE OF	(a) Catagoni		Lake Jackson, TX 77566 (b) Description				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	Tickets to fundraiser				
X Political	Event Expense		rickets to idilaraiser				
Non-Political	() П						
	(c) Check if travel outside of Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens Office held	e		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Onicendider	name Onice	e sought	Office field			
·	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$658.17	07/20/2024	07/26/2024				
	Φ036.17	0772072024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			1201 San Jacinto Blvd	,		·	
	Capitol Gift Shop						
			Austin, TX 78701				
PURPOSE OF	(a) Category	of this color dula)	(b) Description				
EXPENDITURE	(See Categories listed at the top of Contributions/Donation		Framed Capitol painting to Republican Women fundra		Pearla	nd	
X Political	Candidate/Officeholde		Republican Women lunur	aisei 			
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule T.		officeholder living expens	е		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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/Officeriolder/Folitica	· ·	uction Guide explains how	•	THEN (effici a category flot is	iteu above)
1 Total pages Schedule F4:	2 FILER NAME	· · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Con	nmission Filers)
Sch: 2/17 Rpt: 16/34	Vasut, Cody T. (The	Honorable)		00084254	
4 CREDIT CARD ISSUER	Name of finan see pro		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6 PAYMENT	(a) Amount Charged \$525.00	(b) Date of Charge 07/20/2024	(c) Date(s) Credit Card Issue 07/26/2024	r Paid	
7 PAYEE	(a) Payee name Pearland Chamber (of Commerce	(b) Payee address; 6117 Broadway St Pearland, TX 77581	City, Sta	ate, Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Membership dues				
Non-Political	(c) Check if travel outside o	f Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held	
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 07/23/2024	(c) Date(s) Credit Card Issue 07/26/2024	r Paid	
PAYEE	PAYEE (a) Payee name Texans for Medical Freedom		(b) Payee address; 1321 W RANDOL MILL R STE 2006 ARLINGTON, TX 76012-3	D	ate, Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde	ns Made By	(b) Description Gala sponsorship		
Non-Political	(c) Check if travel outside o	f Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held	
PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 07/29/2024	(c) Date(s) Credit Card Issue 08/08/2024	r Paid	
PAYEE	(a) Payee name Harvest for the Hung	gry	(b) Payee address; 4302 FM 523 Freeport, TX 77541	City, Sta	ate, Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde	ns Made By	(b) Description Gala sponsorship		
Non-Political	\(\frac{1}{2} \)	f Texas. Complete Schedule T.	—	officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer I	D (Ethics Commis	sion Filers)
	Sch: 3/17 Rpt: 17/34	Vasut, Cody T. (The	e Honorable)		000842	54	
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A CARD	\$		
6	PAYMENT	(a) Amount Charged \$259.38	(b) Date of Charge 08/06/2024	(c) Date(s) Credit Ca 08/06/2024	ard Issuer Paid		
7	PAYEE	(a) Payee name Republican Party o	f Texas	(b) Payee address; P.O. Box 2206	City,	State,	Zip Code
Ļ		() 0 :		Austin, TX 78768 (b) Description			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Contribution to Candidate F		ındidate Resourd	Resource Committee		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if	Austin, TX, officeholder l	living expense	
	expenditure to benefit C/OH			e sought	Office h	eld	
	PAYMENT	(a) Amount Charged \$128.82	(b) Date of Charge 08/06/2024	(c) Date(s) Credit Ca 08/08/2024	ard Issuer Paid		
	PAYEE (a) Payee name		(b) Payee address;	City,	State,	Zip Code	
				1201 San Jacinto	Blvd		
L				Austin, TX 78701			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Purchase of State Hungry Gala aucti		r wallet for Har	vest for
	Non-Political		of Texas. Complete Schedule T.	Check if	Austin, TX, officeholder l	living evnence	
H	Complete ONLY if direct	Candidate/Officeholder		e sought	Office h		
6	expenditure to benefit C/OH			_			
	PAYMENT	(a) Amount Charged \$4.50	(b) Date of Charge 08/06/2024	(c) Date(s) Credit Ca 08/08/2024	ard Issuer Paid		
	PAYEE	(a) Payee name City of Galveston		(b) Payee address; 823 Rosenberg	City,	State,	Zip Code
				Galveston, TX 775	553		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Parking to attend TWIA board meeting			
	Non-Political	(c) Check if travel outside	of Texas, Complete Schedule T	Check if	Austin, TX, officeholder l	living expense	
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office h			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)			
	Sch: 4/17 Rpt: 18/34	Vasut, Cody T. (The	e Honorable)		00084254					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 08/09/2024	(c) Date(s) Credit Card Issue 08/17/2024	er Paid					
7	PAYEE	(a) Payee name Villalobos, Denise		(b) Payee address; 10330 Kingsbury Dr	City,	State,	Zip Code			
L		(a) Category (b) Description								
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Campaign Contribution #TexasHouseLeads								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
	PAYMENT	(a) Amount Charged \$520.51	(b) Date of Charge 08/09/2024	(c) Date(s) Credit Card Issue 08/17/2024	er Paid					
	PAYEE	Lopez, Janie		(b) Payee address; PO Box 2073 San Benito, TX 78586	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Campaign Contribution #TexasHouseLeads						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 08/09/2024	(c) Date(s) Credit Card Issue 08/17/2024	er Paid					
	PAYEE	(a) Payee name Lujan, John		(b) Payee address; 20003 FM 1937 San Antonio, TX 78221	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By er/Political Committee	(b) Description Campaign Contribution #TexasHouseLeads						
e	Non-Political Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	Check if Austin, TX	, officeholder living exp Office held	ense				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instru	iction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 5/17 Rpt: 19/34	Vasut, Cody T. (The	Honorable)		00084254			
4 CREDIT CARD	Name of finance	cial institution	5 TOTAL OF UNITEMIZED				
ISSUER	see pre	evious	EXPENDITURES CHARGED TO A CREDIT	\$			
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$500.00	08/16/2024	08/17/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Bumgarner, Ben		5150 Kensington Ct.				
			Florida Attack				
8 PURPOSE OF	(a) Category		Flower Mound, TX 75022 (b) Description				
EXPENDITURE	(See Categories listed at the top of		Campaign Contribution				
X Political	Contributions/Donation Candidate/Officeholder		#TexasHousel eads				
Non-Political		Texas. Complete Schedule T.	Check if Austin TX	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder r	·	e sought	Office held			
expenditure to benefit C/OH			J				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$32.00	08/21/2024	09/07/2024				
	, , , , , ,						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Face are in Development Alliance		4005 Technology Drive				
	Economic Developm	ient Amance					
	() 2 :		Angleton, TX 77515				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	f this schedule)	(b) Description Event ticket				
X Political	Event Expense		Lvent licket				
Non-Political	/		<u> </u>				
	(c) Check if travel outside of Candidate/Officeholder r	Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense Office held			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder 1	iame Ome	Sought	Office field			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$318.26	08/26/2024	09/07/2024				
	Ψ010.20	00/20/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			1201 San Jacinto Blvd				
	Capitol Gift Shop						
			Austin, TX 78701				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	f this schedule)	(b) Description				
<u></u>	Contributions/Donation	is Made By	Additional tote bag for Bra	zoria Heritage Foundation auction			
X Political	Candidate/Officeholder		<u> </u>				
Non-Political	1	Texas. Complete Schedule T.		officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder r	name Office	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 6/17 Rpt: 20/34	Vasut, Cody T. (The	e Honorable)		00084254				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$255.93	(b) Date of Charge 09/02/2024	(c) Date(s) Credit Card Issue 09/07/2024	r Paid				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
	Keep Pearland Bea	utiful	5800 Magnolia Pkwy					
	Pearland, TX 77584							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Sponsorship for fundraise			\r				
X Political	Contributions/Donations Made By Candidate/Officeholder/Political Committee			2 1				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$260.25	09/07/2024	09/07/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	McLaughlin, Don		PO Box 1707					
			Uvalde, TX 78802					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodulo)	(b) Description					
l <u> </u>	Contributions/Donatio		Campaign Contribution #TexasHouseLeads					
X Political	Candidate/Officeholde	er/Political Committee	# TCAUSI TOUSCECUUS					
Non-Political	(*)	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH	() 4 () 4	L (1) D (0)	1/20/12/20/13/20/13	D : 1				
PAYMENT	(a) Amount Charged \$261.77	(b) Date of Charge 09/07/2024	(c) Date(s) Credit Card Issue 09/07/2024	er Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Idio and Otavia		2506 Valley Forge					
	Kinard, Steve							
			Richardson, TX 75080					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
l <u>—</u>	Contributions/Donatio		Campaign Contribution #TexasHouseLeads					
X Political	Candidate/Officeholde	er/Political Committee	I SAGOI IOGOCECUGO					
Non-Political	(⁹	of Texas. Complete Schedule T.		, officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
I								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)				
Sch: 7/17 Rpt: 21/34	Vasut, Cody T. (The	e Honorable)			00084254						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF U EXPENDITUI CHARGED T CARD	RES	\$						
6 PAYMENT	(a) Amount Charged \$261.77	(b) Date of Charge 08/09/2024	(c) Date(s) Cred 08/17/2024	it Card Issuer	Paid						
7 PAYEE	(a) Payee name Kinard, Steve		(b) Payee addre	orge	City,	State,	Zip Code				
			Richardson, T (b) Description	X 75080							
8 PURPOSE OF EXPENDITURE X Political	Contributions/Donation	See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		ntribution Leads							
Non-Political	Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin			eck if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held						
PAYMENT	(a) Amount Charged \$520.51	(b) Date of Charge 08/09/2024	(c) Date(s) Cred 08/17/2024	it Card Issuer	Paid						
PAYEE (a) Payee name		(b) Payee addre	SS;	City,	State,	Zip Code					
	Harris, Caroline		PO Box 700								
			Round Rock,	TX 78680							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio	ns Made By	(b) Description Campaign Col #TexasHouse								
Non-Political		er/Political Committee		174 5 774	· · · · · · · · · · · · · · · · · · ·						
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	ieck if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 09/26/2024	(c) Date(s) Cred	it Card Issuer	Paid						
PAYEE	(a) Payee name		(b) Payee addre	ss;	City,	State,	Zip Code				
	Harris, Caroline		PO Box 700								
			Round Rock,	TX 78680							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Contributions/Donatio		(b) Description Campaign Co								
X Political		er/Political Committee	#TexasHouse	Leads							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Ch	eck if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics 0	Commiss	ion Filers)
Sch: 8/17 Rpt: 22/34	Vasut, Cody T. (The	e Honorable)		00084254		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$300.00	(b) Date of Charge 08/17/2024	(c) Date(s) Credit Card Issuer 09/07/2024	r Paid		
7 PAYEE	(a) Payee name Brazoria County Fa	ir Association	(b) Payee address; 901 S. Downing Road	City,	State,	Zip Code
	(a) Category		Angleton, TX 77515 (b) Description			
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		r			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$25.98	(b) Date of Charge 08/27/2024	(c) Date(s) Credit Card Issuer 09/07/2024	r Paid		
PAYEE	823 Congress Parking		(b) Payee address; 823 Congress Ave. Austin, TX 78701	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Parking			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issuer	r Paid		
PAYEE	(a) Payee name Hull, Lacey		(b) Payee address; PO Box 19231 Houston, TX 77224	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Campaign Contribution #TexasHouseLeads			
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	Check if Austin, TX,	officeholder living expens	se	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Co	ommiss	ion Filers)			
	Sch: 9/17 Rpt: 23/34	Vasut, Cody T. (The	e Honorable)		00084254					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$500.00	09/07/2024	09/07/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City, S	tate,	Zip Code			
	LaHood, Marc			127 Encino Blanco						
_		() 0 :		San Antonio, TX 78232						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign Contribution						
	X Political	X Political Contributions/Donations Made By Candidate/Officeholder/Political Committee #Tex		#TexasHouseLeads						
	Non-Political	1	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX							
	expenditure to benefit C/OH			sought	Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$250.00	09/26/2024							
	PAYEE	(a) Payee name		(b) Payee address;	City, S	tate,	Zip Code			
Lopez, Janie			PO Box 2073							
				San Benito, TX 78586						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	X Political	Contributions/Donatio	ns Made By	Campaign Contribution #TexasHouseLeads						
	Non-Political	Candidate/Officeholde (c) Check if travel outside	of Texas. Complete Schedule T.							
	Complete ONLY if direct	Candidate/Officeholder		e sought	Office held					
e	xpenditure to benefit C/OH			· ·						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$145.00	09/07/2024							
	PAYEE	(a) Payee name		(b) Payee address;	City, S	tate,	Zip Code			
		Harvest for the Hun	gry	4302 FM 523						
				Freeport, TX 77541						
	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top		Donation (auction purchas	se)					
	X Political	Contributions/Donatio Candidate/Officeholde								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense					
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	esought	Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)						
Sch: 10/17 Rpt: 24/34	Vasut, Cody T. (The	e Honorable)		00084254								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	 \$								
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid								
	\$26.03	09/13/2024										
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code						
	Barry, Jeff		4418 Broadway St.									
			Pearland, TX 77581									
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description									
	Event Expense	of this scriedule)	Ticket to fundraiser									
X Political	'											
Non-Political		of Texas. Complete Schedule T.		, officeholder living exp	ense							
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid								
	\$530.00	09/19/2024										
PAYEE (a) Payee name		(b) Payee address;	City,	State,	Zip Code							
	Kinard, Steve		2506 Valley Forge									
			Richardson, TX 75080									
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Campaign Contribution									
X Political	Contributions/Donatio Candidate/Officeholde											
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		, officeholder living exp	ense							
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issue	er Paid								
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code						
			3838 Oak Lawn Avenue									
	Meyer, Morgan		Suite 400									
			Dallas, TX 75219									
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	(b) Description									
X Political	Contributions/Donatio	ns Made By	Campaign Contribution #TexasHouseLeads									
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX	x, officeholder living exp	ense							
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held								
expenditure to benefit C/OH												

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete t	his form.		.,	,
1	Total pages Schedule F4:	ule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 11/17 Rpt: 25/34	Vasut, Cody T. (The Honorable)				00084254		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$250.00	09/26/2024					
7	PAYEE	(a) Payee name Villalobos, Denise		(b) Payee a	address; ngsbury Dr	City,	State,	Zip Code
L					hristi, TX 78410			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
		Contributions/Donatio			n Contribution ouseLeads			
	X Political	Candidate/Officeholde		#16/43110	JuseLeaus			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
l	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$250.00	09/26/2024					
	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
		Wilson, Terri Leo		29 Pirates	s Bch W			
				Galvestor	n, TX 77554			
	PURPOSE OF	(a) Category		(b) Descrip	tion			
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Campaigr	n Contribution			
	X Political	Candidate/Officeholde						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense	
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$500.00	09/26/2024					
一	PAYEE	(a) Payee name	l	(b) Payee a	address;	City,	State,	Zip Code
l				P.O. Box	83			
l		Junior Achievemen	t of Brazoria					
l				Lake Jack	kson, TX 77566			
Г	PURPOSE OF	(a) Category		(b) Descrip	tion			
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio	,	Donation				
	X Political	Candidate/Officeholde						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ĺ	Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense
Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(*	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 12/17 Rpt: 26/34	Vasut, Cody T. (The	e Honorable)			00084254		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$156.15	09/13/2024					
7	PAYEE	(a) Payee name Barry, Jeff		(b) Payee 4418 Bro	address; adway St.	City,	State,	Zip Code
				Pearland	, TX 77581			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Descrip Campaig	otion In contribution (sp	ponsorship for	golf hole)	1
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$10.95	09/17/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Uber		1515 Thi	rd Street			
					ncisco, CA 94158	B		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Transportation for legislative meeting				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense	
	Complete ONLY if direct	Candidate/Officeholder		e sought	Oricott ii / tustiii, 1/4,	Office held		
е	xpenditure to benefit C/OH			_				
	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 09/21/2024	(c) Date(s)) Credit Card Issue	r Paid		
	PAYEE	(a) Payee name Capitol Commission	n Texas	(b) Payee 12302 M	address; arshall Dr.	City,	State,	Zip Code
					ı, TX 77354			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio	ns Made By	(b) Description				
	Non-Political	Candidate/Officeholde	of Texas. Complete Schedule T.	<u> </u>	Chock if Austin TV	officeholder living exp	noneo	
	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	·	e sought	Crieck if Austin, TX,	Office held	JE119E	
е	xpenditure to benefit C/OH	2		×y		55514		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeriolide//Folitica		ruction Guide explains how	to complete this form.	OTTLK (enter a categor	y not listed at	bove)
1 Total pages Schedule F4:	2 FILER NAME	<u> </u>		3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 13/17 Rpt: 27/34	Vasut, Cody T. (The	e Honorable)		00084254		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
	\$500.00	09/22/2024				
7 PAYEE	(a) Payee name True to Life Ministri	es	(b) Payee address; 105 This Way	City,	State,	Zip Code
			Lake Jackson, TX 7756	6		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cahadula)	(b) Description			
l <u> </u>	Contributions/Donatio		Donation			
X Political	Candidate/Officeholde	er/Political Committee				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u>L</u>	TX, officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
	\$10.00	09/24/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	City of Austin		301 W. 2nd St.			
			Austin, TX 78701			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cahadula)	(b) Description	_		
X Political	Travel Out of District	or this scriedule)	Parking for legislative m	neeting		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	ΓX, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issu	uer Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Button, Angie		6914 Clear Springs Cir. Garland, TX 75044			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Campaign Contribution			
X Political	Contributions/Donatio Candidate/Officeholde	,	#TexasHouseLeads			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	_	TX, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held		
					·	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 14/17 Rpt: 28/34	Vasut, Cody T. (The	e Honorable)			00084254		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
	\$250.00	09/26/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	LaHood, Marc		127 Encino	o Blanco			
			San Anton	io, TX 78232			
8 PURPOSE OF	(a) Category	(d): 1 11 X	(b) Descripti				
EXPENDITURE X Political	(See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	#TexasHo	Contribution useLeads			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
	\$250.00	09/26/2024					
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	Lujan, John		20003 FM	1937			
			San Anton	io, TX 78221			
PURPOSE OF	(a) Category	(II)	(b) Descripti				
EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Campaign Contribution #TexasHouseLeads				
X Political	Candidate/Officeholde	,	#Texasno	useLeaus			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$250.00	09/26/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Male de Bar		PO Box 17	07			
	McLaughlin, Don						
			Uvalde, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descripti				
l <u>—</u>	Contributions/Donatio	•	#TexasHo	Contribution			
X Political	Candidate/Officeholde		πιολασιίο	430L0443			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)		
Sch: 15/17 Rpt: 29/34	Vasut, Cody T. (The	e Honorable)		00084254			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$150.00	09/26/2024					
7 PAYEE	(a) Payee name Junior Achievemen	t of Brazoria	(b) Payee address; P.O. Box 83	City,	State,	Zip Code	
			Lake Jackson, TX 77566				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Event Expense	or this seriedale)	Event tickets				
X Political			<u> </u>				
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH	(a) Amazunt Chavarad	(h) Data of Charge	(a) Data(a) Cradit Card Inc.	. Daid			
PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 09/07/2024	(c) Date(s) Credit Card Issuer 09/07/2024	Paid			
PAYEE (a) Payee name			(b) Payee address;	City,	State,	Zip Code	
	Villalobos, Denise		10330 Kingsbury Dr				
			Corpus Christi, TX 78410				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign Contribution				
X Political	Contributions/Donation		#TexasHouseLeads				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$35.00	(b) Date of Charge 09/24/2024	(c) Date(s) Credit Card Issuer	r Paid			
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code	
	Economic Developi	ment Alliance	4005 Technology Drive				
		Angleton, TX 77515					
PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
EXPENDITURE	Event Expense	or ans scriedule)	Event ticket				
X Political	,						
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	•						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 16/17 Rpt: 30/34	Vasut, Cody T. (The	e Honorable)			00084254		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
		\$250.00	09/26/2024					
7	PAYEE	(a) Payee name Bumgarner, Ben		(b) Payee 5150 Kei	address; nsington Ct.	City,	State,	Zip Code
L					lound, TX 75022			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodula)	(b) Descrip				
		Contributions/Donatio			n Contribution ouseLeads			
	X Political	Candidate/Officeholde		#16/4311	ouseleaus			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	expenditure to benefit C/OH		T	1				
	PAYMENT	(a) Amount Charged \$266.47	(b) Date of Charge 09/26/2024	(c) Date(s)) Credit Card Issuer	Paid		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Next Day Flyers		435 N Mi	dland Ave.			
l				Saddle B	rook, NJ 07663			
	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)	Rack Ca	rds			
	X Political Non-Political	<u> </u>			—			
┡		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	2 cought	Check if Austin, TX,	officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeriolder	Tidille Office	e sought		Office field		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
		\$40.00	09/16/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Pearland Chamber	of Commerce	6117 Bro	adway St			
				Pearland	, TX 77581			
Г	PURPOSE OF	(a) Category		(b) Descrip				
l	EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Ticket to	Alvin ISD update			
1	X Political	Lveni Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
Г	Complete ONLY if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	e sought		Office held		
e	expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		The Insti	ruction Guide explains ho	ow to complete this form.	
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 17/17 Rpt: 31/34	Vasut, Cody T. (The	e Honorable)		00084254
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMI EXPENDITURES	ZED \$
	ISSUER	see pi	revious	CHARGED TO A CR CARD	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid
		\$30.06	09/17/2024		
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
				4032 S Lamar Blvd	
		Freebird's		Suite 100	
				Austin, TX 78704	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	
		Food/Beverage Exper		Lunch with Chief of S	Staff to discuss legislative issues
	X Political				
	Non-Political		of Texas. Complete Schedule T		tin, TX, officeholder living expense
	Complete ONLY if direct conditure to benefit C/OH	Candidate/Officeholder	name Off	fice sought	Office held
_					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 32/34 Vasut, Cody T. (The Honorable) 00084254 Date Payee name 07/05/2024 Texas Dow Employees Credit Union 6 Amount (\$) Payee address; State; Zip Code City; \$96.00 120 Hwy 332 W Reimbursement from political contributions intended Х Lake Jackson, TX 77566 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Payment for 5/31/2024 F4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: ./2 Rpt: 33/34	
2	FILER NAME		3	Filer ID	(Ethics Commission F	-ilers)
	Vasut, Cody T. (The Honorable)				254	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	07/31/2024	Texas Dow Employees Credit Union				\$2.25
		6 Address of person from whom amount is received; City; State; Zip Code				, -
		Address of person from whom amount is received, City, State, 21p Code				
		Lake Jackson, TX 77566				
		-	if nolitic	ral conti	I ribution returned to filer	
		Interest Received	ii politic	Jai Coriti	indution returned to mer	
_					1	
	Date	Name of person from whom amount is received			Amount (\$)	#0.00
	07/31/2024	Texas Dow Employees Credit Union				\$2.23
		Address of person from whom amount is received; City; State; Zip Code				
		Lake Jackson TV 77FCC				
		Lake Jackson, TX 77566				
			if politic	cal conti	ribution returned to filer	
		Interest Received				
	Date	Name of person from whom amount is received			Amount (\$)	
	07/31/2024	Texas Dow Employees Credit Union				\$0.06
		Address of person from whom amount is received; City; State; Zip Code				
		Lake Jackson TV 77566				
		Lake Jackson, TX 77566			7	
		Purpose for which amount is received Check Interest Received	if politic	cai conti	ribution returned to filer	
	Date	Name of person from whom amount is received			Amount (\$)	
	08/31/2024	Texas Dow Employees Credit Union				\$1.63
		Address of person from whom amount is received; City; State; Zip Code				
		Lake Jackson, TX 77566				
			if polition	cal conti	ribution returned to filer	
		Interest Received				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/31/2024	Texas Dow Employees Credit Union				\$2.23
		Address of person from whom amount is received; City; State; Zip Code		•••••	1	
		Lake Jackson, TX 77566				
			if polition	cal conti	ribution returned to filer	
L		Interest Received				
l						

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: 2/2 Rpt: 34/34	
2	FILER NAME		3	Filer ID	(Ethics Commission	Filers)
	Vasut, Cody	00084	254			
┰	Date	5 Name of person from whom amount is received	<u> </u>		8 Amount (\$)	
	08/31/2024	Texas Dow Employees Credit Union			7 (4)	\$0.06
	00/01/2024					Ψ0.00
		6 Address of person from whom amount is received; City; State; Zip Code				
		Lake Jackson, TX 77566				
		7 Purpose for which amount is received Check if p	olitic	al contr	ribution returned to filer	
		Interest Received				
⊨	Data	Name of passage from them are until a specified			Λ == 0.1.154 (Φ)	
	Date	Name of person from whom amount is received			Amount (\$)	ф11 OO
	09/25/2024	Texas Dow Employees Credit Union				\$11.09
		Address of person from whom amount is received; City; State; Zip Code				
		Lake Jackson, TX 77566				
		Purpose for which amount is received Check if p	olitic	al contr	ribution returned to filer	
		Interest Received				
F	Date	Name of person from whom amount is received			Amount (\$)	
	07/25/2024	Texas Gulf Bank			, ,	\$10.26
		Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is received, Gity, State, Zip Gode				
		Angleton, TX 77515				
		-	olitic	al contr	Iribution returned to filer	
		Interest Received	Ontio	ai oonii	induction rotation to mor	
⊨					Γ	
	Date	Name of person from whom amount is received			Amount (\$)	
	08/25/2024	Texas Gulf Bank				\$11.14
		Address of person from whom amount is received; City; State; Zip Code				
		Angleton, TX 77515				
			olitic	al contr	ribution returned to filer	
		Interest Received				