CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00085847 27 Date Received COMMITTEE Wilco 100 PAC **ELECTRONICALLY FILED** NAME 08/07/2024 TREASURER Tate, Frederick C. (Mr.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation 30th day before election Dissolution report Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Day Year Month Day Date Imaged **COVERED THROUGH** 02/25/2024 06/30/2024 **EXPLANATION OF CORRECTION** This correction changed the semiannual reporting dates to be consistent with now filing an 8-day report that is considered to be required by the Commission staff. 8 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. Frederick C. Tate Signature of Campaign Treasurer 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

FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00085847 3 COMMITTEE NAME **OFFICE USE ONLY** Wilco 100 PAC Date Received **ELECTRONICALLY FILED** 08/07/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 953 Date Hand-delivered or Date Postmarked Change of Address Colleyville, TX 76034 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Frederick C. NAME NICKNAME LAST **SUFFIX** Tate STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 959 W Glade Rd. STREET **ADDRESS** (Residence or Business) Hurst, TX 76054 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 953 MAILING **ADDRESS** Colleyville, TX 76034 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (469) 290-7500 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 02/25/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Wilco 100 PAC			00085847	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS Macheck here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	22,600.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	67,477.12
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	591.99
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u>'</u>	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Mr. Fredel	rick C. Tate	
		Signature of Car	mpaign Treasu	rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
		, th	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of offic	cer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			4 of	27
17 COMMI Wilco 1		18 Filer ID 00085847	(Ethics Commission Filer	s)
l	JLE SUBTOTALS F SCHEDULE	SUBTOTAL AMOU	NT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 22,6	00.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	?	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 66,5	501.76
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 9	75.36
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
I				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to con	nplete this forr	n.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 5/27	
2	FILER NAME Wilco 100 PA	AC			3	Filer ID (Ethics Commission 00085847	n Filers)
4	Date 03/13/2024			7	Amount of Contribution (\$)	\$100.00	
_	Deireirel	Austin, TX 78717	- Ia	Farada e a (O - a la atro-ati-a -	<u></u>		
8	Contractor	pation / Job title (See Instructions)	9	Employer (See Instructions Self Employed			
	Date Full name of contributor out-of-state PAC (ID#:) 04/13/2024 Armbruster, Steve Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	Principal occu	Austin, TX 78717 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Contractor	pation 7 300 title (See Instructions)		Self Employed	')		
	Date Full name of contributor out-of-state PAC (ID#:) 05/13/2024 Armbruster, Steve Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Austin, TX 78717					
	Principal occu Contractor	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
Date Full name of contributor out-of-state PAC (ID#:) O6/13/2024 Armbruster, Steve Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$100.00			
	Principal occu Contractor	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:) O3/03/2024 Carlton, Nathan Contributor address; City; State; Zip Code Georgetown, TX 78627			Amount of Contribution (\$)	\$100.00		
	Principal occu Veterinarian	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
			,				

	MONET	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 2/8 Rpt: 6/27	
2	FILER NAME Wilco 100 PA	AC	3	Filer ID (Ethics Commission F 00085847	ilers)
4	Date 04/03/2024 5 Full name of contributor out-of-state PAC (ID#:) Carlton, Nathan 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00	
_	Deignaignal	Georgetown, TX 78627	anla var (Caa Inatru atiana)		
8	Veterinarian		nployer (See Instructions) If Employed		
	Date Full name of contributor out-of-state PAC (ID#:) 05/03/2024 Carlton, Nathan Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$100.00
	Deinsinal	Georgetown, TX 78627	(Contractions)		
	Principal occupation / Job title (See Instructions) Veterinarian Employer (See Instructions Self Employed				
	Date Full name of contributor out-of-state PAC (ID#:) 06/03/2024 Carlton, Nathan Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$100.00
		Georgetown, TX 78627			
	Principal occu Veterinarian		nployer (See Instructions) If Employed		
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Elliott, Robert Contributor address; City; State; Zip Code Georgetown, TX 78628			Amount of Contribution (\$)	\$100.00
	Principal occu Owner		nployer (See Instructions) P Equipment		
	Date O4/15/2024 Full name of contributor out-of-state PAC (ID#:) Elliott, Robert Contributor address; City; State; Zip Code Georgetown, TX 78628			Amount of Contribution (\$)	\$100.00
	Principal occu Owner		nployer (See Instructions) P Equipment		
		1			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	SCHEDULE A1	
	The Instruc	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 3/8 Rpt: 7/27		
2	FILER NAME Wilco 100 PA	AC			3	Filer ID (Ethics Commission 00085847	on Filers)	
4	Date 03/31/2024			7	Amount of Contribution (\$)	\$2,000.00		
8	Principal occu	Georgetown, TX 78627 pation / Job title (See Instructions)	l ₉	Employer (See Instructions	;) 			
•	Retired	pation / 300 title (See instructions)		Retired	•)			
	Date Full name of contributor out-of-state PAC (ID#:) 03/13/2024 Logue, Chris Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00			
		Georgetown, TX 78628			<u></u>			
Principal occupation / Job title (See Instructions) Employer (See Instructions Banker Cadence Bank		5)						
	Date Full name of contributor out-of-state PAC (ID#:) 04/13/2024 Logue, Chris Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00			
		Georgetown, TX 78628						
	Principal occu Banker	pation / Job title (See Instructions)		Employer (See Instructions Cadence Bank	5)			
Date O5/13/2024 Full name of contributor out-of-state PAC (ID#:) Logue, Chris Contributor address; City; State; Zip Code Georgetown, TX 78628			Amount of Contribution (\$)	\$100.00				
	Principal occu Banker	pation / Job title (See Instructions)		Employer (See Instructions Cadence Bank	5)			
	Date Full name of contributor out-of-state PAC (ID#:) Logue, Chris Contributor address; City; State; Zip Code Georgetown, TX 78628			Amount of Contribution (\$)	\$100.00			
	Principal occu Banker	pation / Job title (See Instructions)		Employer (See Instructions Cadence Bank	5)			
			•					

	MONET	ARY POLITICAL C	SCHEDULE A			
	The Instruc	ction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: Sch: 4/8 Rpt: 8/27	
2	FILER NAME Wilco 100 PA	AC			3 Filer ID (Ethics Commission F 00085847	ilers)
4	Date 03/14/2024			7 Amount of Contribution (\$)	\$100.00	
8	Principal occu	Leander, TX 78641 pation / Job title (See Instructions)	9	Employer (See Instructions	s)	
	Practice Mgr	nt Consultant		Laurel Mountain Resea	rch LLC	
	Date 04/14/2024	Full name of contributor Manly, Walt Contributor address; City; Sta)	Amount of Contribution (\$)	\$100.00
	Delegational	Leander, TX 78641				
		pation / Job title (See Instructions) nt Consultant		Employer (See Instructions Laurel Mountain Resear		
_				Laurer Wourtain Resear	Amount of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#:) 05/14/2024 Manly, Walt Contributor address; City; State; Zip Code				\$100.00	
	Dringinal goog	Leander, TX 78641 pation / Job title (See Instructions)		Employer (See Instructions		
		nt Consultant		Laurel Mountain Resea		
Date Full name of contributor out-of-state PAC (ID#:) 06/14/2024 Manly, Walt Contributor address; City; State; Zip Code Leander, TX 78641)	Amount of Contribution (\$)	\$100.00		
		pation / Job title (See Instructions) nt Consultant		Employer (See Instructions Laurel Mountain Resear		
Date 03/13/2024 Patton, James Contributor address; City; State; Zip Code Georgetown, TX 78628		Amount of Contribution (\$)	\$100.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions) (3)	
	Owner			Big Texas Lights		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	DULE A1	
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 9/27		
2	FILER NAME Wilco 100 PA	AC			3	Filer ID (Ethics Commission 00085847	on Filers)	
4	Date 04/13/2024 5 Full name of contributor out-of-state PAC (ID#:) Patton, James 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00			
_		Georgetown, TX 78628	_		_			
8	Owner	pation / Job title (See Instructions)	9	Employer (See Instructions Big Texas Lights	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 05/13/2024 Patton, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00			
	Dringing! goog	Georgetown, TX 78628	_	Employer (See Instructions	<u></u>			
	Owner	pation / Job title (See Instructions)		Big Texas Lights	·)			
	Date Full name of contributor out-of-state PAC (ID#:) 06/13/2024 Patton, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00			
		Georgetown, TX 78628	_					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Big Texas Lights	5)			
Date Full name of contributor out-of-state PAC (ID#:) 03/08/2024 Redden, Greg Contributor address; City; State; Zip Code Taylor, TX 76574			Amount of Contribution (\$)	\$1,200.00				
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/26/2024 Stevens, David Contributor address; City; State; Zip Code Georgetown, TX 78633		•	Amount of Contribution (\$)	\$100.00			
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)			
			•					

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 10/27	
2	FILER NAME Wilco 100 PA	AC			3	Filer ID (Ethics Commission 00085847	n Filers)
4	Date 03/26/2024 5 Full name of contributor out-of-state PAC (ID#:) Stevens, David 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00			
8	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
•	Retired			Retired	,		
	Date Full name of contributor out-of-state PAC (ID#:) 04/26/2024 Stevens, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Georgetown, TX 78633					
Principal occupation / Job title (See Instructions) Employer (See Instructions Retired Retired		s)					
	Date Full name of contributor out-of-state PAC (ID#:) 05/26/2024 Stevens, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Georgetown, TX 78633					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/26/2024 Waters, Charlie Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$100.00		
	Principal occu Banking	pation / Job title (See Instructions)		Employer (See Instructions Cadence Bank	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/26/2024 Waters, Charlie Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$100.00		
	Principal occu Banking	pation / Job title (See Instructions)		Employer (See Instructions Cadence Bank	s)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 11/27	
2	FILER NAME Wilco 100 PA	AC			3	Filer ID (Ethics Commission 00085847	n Filers)
4	Date 04/26/2024			7	Amount of Contribution (\$)	\$100.00	
8		Round Rock, TX 78664 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Banking Cadence Bank Date Full name of contributor out-of-state PAC (ID#:) 05/26/2024 Waters, Charlie Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$100.00		
Principal occupation / Job title (See Instructions) Banking Employer (See Instructions) Cadence Bank		5)					
	Date Full name of contributor out-of-state PAC (ID#:) 03/04/2024 Whitworth, Ursula Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	Principal occu	Georgetown, TX 78628 pation / Job title (See Instructions) Sales		Employer (See Instructions MI Homes	<u> </u> s)		
	Date 04/04/2024	Full name of contributor out-of-state PAC (ID# Whitworth, Ursula Contributor address; City; State; Zip Code Georgetown, TX 78628)		Amount of Contribution (\$)	\$100.00
	Principal occu Real Estate	pation / Job title (See Instructions) Sales		Employer (See Instructions MI Homes	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/04/2024 Whitworth, Ursula Contributor address; City; State; Zip Code Georgetown, TX 78628		•	Amount of Contribution (\$)	\$100.00		
	Principal occu Real Estate	pation / Job title (See Instructions) Sales		Employer (See Instructions MI Homes	5)		
			•				

N	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1
Т	he Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/8 Rpt: 12/27
	ILER NAME Vilco 100 P			3	Filer ID (Ethics Commission Filers) 00085847
	4 Date		7	Amount of Contribution (\$) \$100.00	
8 P	Principal occu	Georgetown, TX 78628 upation / Job title (See Instructions)	9 Employer (See Instructions	8)	
	Real Estate		MI Homes	ه)	
	Date Full name of contributor out-of-state PAC (ID#:) 02/29/2024 Wilson, Terry Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$16,000.00	
		Georgetown, TX 78626			
	rincipal occu State Repre	upation / Job title (See Instructions) sentative	Employer (See Instructions State of Texas	s)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7 1 0 1 1 5	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	
Sch: 1/14 Rpt: 13/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
03/06/2024	Angvine, Jake
6 Amount (\$)	7 Payee address; City; State; Zip Code
` *	
\$1,000.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from	
corporate funds	Georgetown, TX 78626
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/27/2024	Bilbo, Toya
Amount (\$)	Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
, –, – , – , – , – , – , – , – , – , –	
Expenditure from	
corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Douge name
	Payee name
03/06/2024	Bilbo, Toya
Amount (\$)	Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
-	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel systems of Taxas, Complete Schedule T
EXPENDITURE	Salaries/Wages/Contract Labor
	Independent PAC/Campaign Contractor
	independent i Moreumpuign Contractor
Complete ONU V. C. F.	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORANCIO TO DOTIONE O/OI	•

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/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: 2/14 Rpt: 14/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
03/13/2024	Britton, Hawes
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,050.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from	
corporate funds	Georgetown, TX 78626
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Independent PAC/Campaign Contractor
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
03/15/2024	CFO Shield, LLC dba Red Elephant Reports
Amount (\$)	Payee address; City; State; Zip Code
\$454.13	959 W. Glade Rd.
Evnanditura from	
Expenditure from corporate funds	Hurst, TX 76054
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Campaign Bookkeeping Services & Support
	Campaigh Bookkeeping Services & Support
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date 04/16/2024	Payee name CFO Shield, LLC dba Red Elephant Reports
Amount (\$)	Payee address; City; State; Zip Code
\$454.13	959 W. Glade Rd.
Expenditure from corporate funds	Hurst, TX 76054
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking
	Campaign Bookkeeping Services & Support
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

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

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: 3/14 Rpt: 15/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
02/29/2024	Campaign Advocacy Managment Professionals, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$35,560.00	401 NE 46th Street
Expenditure from corporate funds	Oklahoma City, OK 73105
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Design, Print, Mail PAC Mailer
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/05/2024	Cornerstone Payment Systems
Amount (\$)	Payee address; City; State; Zip Code
\$28.70	2675 W 600 N
Expenditure from corporate funds	Lindon, UT 84042
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Online Donation Processing Fee
	Offiline Boliation Processing Fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/04/2024	Cornerstone Payment Systems
Amount (\$)	Payee address; City; State; Zip Code
\$64.40	2675 W 600 N
Expenditure from corporate funds	Lindon, UT 84042
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
	Online Donation Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/14 Rpt: 16/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
05/07/2024	Cornerstone Payment Systems
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$87.00	2675 W 600 N
Expenditure from corporate funds	Lindon, UT 84042
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
	Online Donation Processing Fee
	Chimic Bollation 1 Toccssing 1 cc
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
06/20/2024	Cornerstone Payment Systems
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	2675 W 600 N
Expenditure from corporate funds	Lindon, UT 84042
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
	Online Donation Processing Fee
	Chimic Bollation (100000) ing 1 00
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/27/2024	Denise Ricks, Lisa
Amount (\$)	Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
Ψ1,100.00	. 15 T. S S. S. G.
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
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 Committ 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:	
Sch: 5/14 Rpt: 17/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
03/06/2024	Denise Ricks, Lisa
03/00/2024	
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
·	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Independent PAC/Campaign Contractor
	independent 17 to/outhpuigh contiductor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/O	
Date	Payee name
04/03/2024	Florence Focus
Amount (\$)	Payee address; City; State; Zip Code
\$665.00	2920 FM 971
Ψ003.00	2320 T WI 37 I
Expenditure from	
corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Florence Magazine PAC Campaign Advertisement
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
02/27/2024	Fugate, Thomas
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	723 W. University Blvd., Suite 110, Box 339
Evnonditura from	
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica		ages/Contract Labor OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to cor	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/14 Rpt: 18/27	Wilco 100 PAC	00085847
4 Date	5 Payee name	•
03/06/2024	Fugate, Thomas	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$466.00	723 W. University Blvd., Suite 110, Box 339	
Expenditure from corporate funds	Georgetown, TX 78626	
8 PURPOSE		(b) Description
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Independent PAC/Campaign Contractor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ht Office held
experialitie to belieff C/OI		
Date	Payee name	
02/27/2024	Gafford, Wesley	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$1,166.00	723 W. University Blvd., Suite 110, Box 339	
Expenditure from		
corporate funds	Georgetown, TX 78626	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Independent PAC/Campaign Contractor
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		The Office Held
D-4-		
Date 03/06/2024	Payee name Gafford, Wesley	
Amount (\$)	Payee address; City; State; Zip Col	de
\$1,000.00	723 W. University Blvd., Suite 110, Box 339	
Expenditure from		
corporate funds	Georgetown, TX 78626	
PURPOSE OF	, , ,	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense
		Independent PAC/Campaign Contractor
Complete ONLY if direct	Candidate/Officeholder name Office sout	tht Office held
expenditure to benefit C/OI	H	
İ		

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 7/14 Rpt: 19/27	2 FILER NAME Wilco 100 PAC 3 Filer ID (Ethics Commission Filers) 00085847
4 Date	5 Payee name
02/27/2024	Garey, Edward
02/21/2024	Galey, Edward
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$300.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from	C
corporate funds	Georgetown, TX 78626
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/06/2024	Garey, Edward
Amount (\$)	Payee address; City; State; Zip Code
\$466.00	723 W. University Blvd., Suite 110, Box 339
	·
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Dayso nama
	Payee name
04/30/2024	Gomez, Giancarlo
Amount (\$)	Payee address; City; State; Zip Code
\$664.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVEN DITUE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/14 Rpt: 20/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
03/01/2024	HD Digital Strategies, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,175.00	LC 6548 Cetone Terrace
Expenditure from corporate funds	Round Rock, TX 78665
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 Monthly Retainer for Website Design & Maintenance
	Monthly Netainer for Website Design & Maintenance
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/01/2024	HD Digital Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$1,175.00	LC 6548 Cetone Terrace
Expenditure from corporate funds	Round Rock, TX 78665
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 Monthly Retainer for Website Design & Maintenance
	Monthly Netainer for Website Design & Maintenance
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/01/2024	HD Digital Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$1,175.00	LC 6548 Cetone Terrace
Expenditure from corporate funds	Round Rock, TX 78665
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Monthly Retainer for Website Design & Maintenance
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

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: 9/14 Rpt: 21/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
02/27/2024	Jones, Jenifer
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/06/2024	Payee name Jones, Jenifer
Amount (\$)	Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Independent PAC/Campaign Contractor
	independent FAC/Campaign Contractor
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
03/13/2024	Minuteman Press
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	1904 S Austin Ave
Ψ1,300.00	
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Sign Printing for the PAC
	Sign Filliung for the PAC
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/14 Rpt: 22/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
04/03/2024	Minuteman Press
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$547.50	1904 S Austin Ave
- "	
Expenditure from corporate funds	Georgetown, TX 78626
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign Stationery
	Sampaigh Stationery
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/27/2024	Pena, Lauren
Amount (\$)	Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
, ,	
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
	independent 17 to/outhpuigh Contractor
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/06/2024	Pena, Lauren
	· · · · · · · · · · · · · · · · · · ·
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense 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		
1 Total pages Schedule F1:)
Sch: 11/14 Rpt: 23/27	Wilco 100 PAC 00085847	
4 Date	5 Payee name	
03/13/2024	Seather, Paige	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$498.00	723 W. University Blvd., Suite 110, Box 339	
Expenditure from corporate funds	Georgetown, TX 78626	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Independent PAC/Campaign Contractor	
	independent PAC/Campaign Contractor	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	
02/29/2024	Vera Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$15.00	1111 W 6th St Bldg B Suite 200	
Expenditure from corporate funds	Austin, TX 78703	
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 Bank Service Charge	
	Bank Schalge	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Data	Power name	
Date	Payee name Vora Pank	
04/23/2024	Vera Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$2.95	1111 W 6th St Bldg B Suite 200	
Expenditure from		
corporate funds	Austin, TX 78703	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Bank Service Charge	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
,		
Forms provided by Tayas F	thice Commission Waway athics state ty us Version VA 1.0.48daF	1 f 7

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 (outer a category not listed above)

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manage Cabadala F4	
1 Total pages Schedule F1:	
Sch: 12/14 Rpt: 24/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
04/29/2024	Vera Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2.95	1111 W 6th St Bldg B Suite 200
Ψ2.00	TITI W din di Bidg B dake 200
Expenditure from	
corporate funds	Austin, TX 78703
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Bank Service Charge
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
05/01/2024	Vera Bank
Amount (\$)	
\$32.00	1111 W 6th St Bldg B Suite 200
Expenditure from	
corporate funds	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank Service Charge
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
05/07/2024	Vera Bank
Amount (\$)	Payee address; City; State; Zip Code
\$32.00	1111 W 6th St Bldg B Suite 200
Expenditure from	
corporate funds	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank Service Charge
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Н

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Cabadula F1:	· · · · · · · · · · · · · · · · · · ·	٠)
1 Total pages Schedule F1:)
Sch: 13/14 Rpt: 25/27	Wilco 100 PAC 00085847	
4 Date	5 Payee name	
05/31/2024	Vera Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$32.00	1111 W 6th St Bldg B Suite 200	
, , , , , , , , , , , , , , , , , , , ,	, variable of the second of th	
Expenditure from	A	
corporate funds	Austin, TX 78703	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Bank Service Charge	
	Dailk Service Charge	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
experialiture to beliefit C/OI	1	
Date	Payee name	
04/23/2024	Watkins Insurance	
Amount (\$)	Payee address; City; State; Zip Code	
\$4,795.00	510 N Valley Mills Dr., Suite 203	
Ψ4,133.00	510 IV Validy Millis Dr., Suite 200	
Expenditure from		
corporate funds	Waco, TX 76710	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Annual D&O Insurance Premium	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OF	1	
Date	Payee name	
04/29/2024	Watkins Insurance	
Amount (\$)	Payee address; City; State; Zip Code	
\$200.00	510 N Valley Mills Dr., Suite 203	
Expenditure from		
corporate funds	Waco, TX 76710	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Annual D&O Insurance Premium	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OF	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

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: 14/14 Rpt: 26/27	Wilco 100 PAC 00085847
4 Date	5 Payee name
02/27/2024	Wornardt, Rochelle
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Independent PAC/Campaign Contractor
	independent FAC/Campaign Contractor
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/06/2024	Wornardt, Rochelle
Amount (\$)	Payee address; City; State; Zip Code
\$1,166.00	723 W. University Blvd., Suite 110, Box 339
Expenditure from corporate funds	Georgetown, TX 78626
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Independent PAC/Campaign Contractor
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Loan Repayment/Reimbursement Event Expense

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By		Office Of		Transportation Equipment & Related Expense Travel in District Travel Out of District
Candidate/Officeholder/Politica	-	Salaries n Guide explains how to c	Wages/Contract Labor	OTHER (enter a category not listed above)
1 Total pages Schedule F2:		Ti Guide explains flow to C	ompiete this form.	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 27/27	Wilco 100 PAC			00085847
4				0000047
TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$				
5 Date	6 Payee name			
05/01/2024	CFO Shield, LLC dba Red Elephant Reports			
7 Amount (\$) \$487.68	8 Payee address; City; 959 W. Glade Rd.	State; Zip C	ode	
Expenditure from corporate funds	Hurst, TX 76054			
9 TYPE OF EXPENDITURE	X Political	Non-Po	litical	
10 PURPOSE	(a) Category (See Categories listed	d at the top of this schedule)	(b) Description	
OF EXPENDITURE	Accounting/Banking		1 <u>1</u>	outside of Texas. Complete Schedule T.
				pokkeeping Services & Support
				2
11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
Date	Payee name			
06/01/2024	CFO Shield, LLC dba Re	ed Elephant Reports		
Amount (\$)	Payee address; City;	State; Zip C	ode	
\$487.68	959 W. Glade Rd.			
Expenditure from corporate funds	Hurst, TX 76054			
TYPE OF EXPENDITURE	X Political	Non-Po	litical	
PURPOSE	(a) Category (See Categories listed	d at the top of this schedule)	(b) Description	
OF EXPENDITURE	/ ccounting/ Banking		I -	outside of Texas. Complete Schedule T.
			_ _	n, TX, officeholder living expense Dokkeeping Services & Support
			Campaign B	Sourceping Services & Support
Complete <u>ONLY</u> if direct expenditure to benefit C/O	L Candidate/Officeholder name H	e Office so	<u>l</u> ught	Office held