GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

| The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 2 00085847 00085847 | | | | | 2 Total pages filed: 11 | | |
|--|-------------------------|-----------------------------------|-------|---------------------|----------------------------|-----------------------------------|--------------------|
| 3 | COMMITTEE NAME | | | | | | SE ONLY |
| | Wilco 100 PAC | | | | | Date Received | |
| | | | | | | ELECTRONICA | |
| | | | | | | 08/07/2024 | |
| _ | 000447755 | | | 07475 | 710.0005 | 00/07/2024 | |
| 4 | COMMITTEE ADDRESS | | ITY; | STATE; | ZIP CODE | | |
| | ABBRECC | PO Box 953 | | | | Date Hand-delivered or | Date Postmarked |
| | Change of Address | | | | | | |
| | | Colleyville, TX 76034 | | | | Receipt # | Amount |
| | | | | | | | |
| | | | | | | Date Processed | |
| | | | | | | | |
| | | | | | | Date Imaged | |
| _ | | | | | | | |
| 5 | CAMPAIGN TREASURER | MS / MRS / MR FIRST | | | | MI | |
| | NAME | Mr. Frederick C. | | | | | |
| | | | | | | | |
| | | NICKNAME LAST | | | | SUFFIX | |
| | | Tate | | | | | |
| | | | | | | | |
| 6 | CAMPAIGN | STREET ADDRESS (NO PO BOX PLEASE) | ; | APT / SUITE | #; CITY; | STA | TE; ZIP CODE |
| | TREASURER STREET | 959 W Glade Rd. | | | | | |
| | ADDRESS | | | | | | |
| | (Residence or Business) | Hurst, TX 76054 | | | | | |
| 7 | CAMPAIGN | STREET OR PO BOX; | | APT / SUITE | #; CITY; | · ST | ATE; ZIP CODE |
| ľ | TREASURER | PO Box 953 | | | - <i>n</i> , 0111, | , 01 | |
| | MAILING ADDRESS | F O D0X 933 | | | | | |
| | ADDITESS | | | | | | |
| | Change of Address | Colleyville, TX 76034 | | | | | |
| 8 | CAMPAIGN | AREA CODE PHONE NUMBER | ΕX | TENSION | | | |
| | TREASURER | (469) 290-7500 | | | | | |
| | PHONE | | | | | | |
| 9 | REPORT | January 15 | 30th | day before election | | Dissolution (Attack | PAC-DR) |
| | TYPE | | | - | | | IT AC DRy |
| | | | Bth d | ay before election | | 10th day after can termination | npaign treasurer |
| | | July 15 | Runo | ff | | torrindation | |
| 40 | | | | | ath Davi | | |
| 10 | PERIOD COVERED | Month Day Year | гир | Mo OUGH | 2 | Year | |
| | | 01/01/2024 | | OUGH | 02/24/2024 | + | |
| 11 | | | | | ION TYPE | | |
| | ELECTION | ELECTION DATE Month Day Year | Prin | | | Other | |
| | | 03/05/2024 | | | 011 | | |
| | | | Ger | eral Spe | cial | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | GO | тс | PAGE 2 | | | |
| For | rms provided by Tex | xas Ethics Commission www. | ethi | cs.state.tx.us | | Versio | on V4.1.0.48da51f7 |
| | | | | | | | |

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 | 1. Candidates | A. Supported | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | | A Connected | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | |
| | | B. Opposed | | |
| | 3. Officeholders | | | |
| | Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M | POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | 2. TOTAL POLITICA | · | ¢ | |
| | (OTHER THAN PLE | DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 39,600.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 10,723.92 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL C OF THE REPORTING | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 44,493.75 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD | HE \$ | 0.00 |
| 16 AFFIDAVIT | • | | • | |
| | | I swear, or affirm, under penalty of pen true and correct and includes all inforr under Title 15, Election Code. | | |
| | | Ma Frada | iali O. Tata | |
| | | Signature of Car | ick C. Tate | rer |
| | | Signatio of Ou | | · - · |
| AFFIX NOTAR | Y STAMP / SEAL ABOVE | | | |
| Sworn to and subscribe | d before me, by the said | , tł | is the | day |
| | | which, witness my hand and seal of office. | | |
| | | | | |
| Signature of officer a | dministering oath | Printed name of officer administering oath | Title of offic | cer administering oath |
| Forms provided by Texas | Ethics Commission | www.ethics.state.tx.us | | Version V4.1.0.48da51f7 |

| SUBTOTALS - GPAC | C | FORM GPAC OVER SHEET PG 3 3 of 11 |
|---|-------------------------|---|
| 17 COMMITTEE NAME Wilco 100 PAC | 18 Filer ID 00085847 | (Ethics Commission Filers) |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 39,600.00 |
| 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ |
| 3. SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ |
| 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO | DR | \$ |
| 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ |
| 6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG | ANIZATION | \$ |
| 7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | 2 | \$ |
| 8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR | ORGANIZATION | \$ |
| 9. SCHEDULE E: LOANS | | \$ |
| 10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | S | \$ 10,723.92 |
| 11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ |
| 12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI | 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 | \$ |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

| SCHEDULE | A1 |
|----------|----|
|----------|----|

| The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A1: Sch: 1/4 Rpt: 4/11 | |
|---|---|---|------------------------------|-----------------------------|--|-----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Wilco 100 P | AC | | | 00085847 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 01/13/2024 | Armbruster, Steve | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78717 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Contractor | | Self Employed | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 02/13/2024 | Armbruster, Steve | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78717 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Contractor | | Self Employed | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 01/03/2024 | Carlton, Nathan | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78627 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Veterinarian | | Self Employed | | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 02/03/2024 | Carlton, Nathan | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| L | | Georgetown, TX 78627 | 1 | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Veterinarian Self Employed | | | | | |
| Γ | Date Full name of contributor out-of-state PAC (ID#:) 01/15/2024 Elliott, Robert Contributor address; City; State; Zip Code | | Γ | Amount of Contribution (\$) | | |
| | | | | | \$100.00 | |
| | | | 1 | | | |
| | | | | | | |
| | | | | | | |
| L | | Georgetown, TX 78628 | 1 | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Owner | | TOP Equipment | | | |
| | | | | | | |
| 1 | | | | | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| The Instruction Guide explains how to complete this form. | | | | | 1 | Total pages Schedule A1: Sch: 2/4 Rpt: 5/11 | |
|---|--|--|----------|------------------------------|---------------|--|-----------|
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Wilco 100 P/ | AC | | | | 00085847 | |
| 4 | Date | 5 Full name of contributor Out-of-state P. | AC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 02/15/2024 | Elliott, Robert | | / | | | \$100.00 |
| | 02,20,202 | 6 Contributor address; City; State; Zip Code | | | | | +200.00 |
| | | | | | | | |
| | | | | | | | |
| | | Georgetown, TX 78628 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | 9 Employer (See Instructions | <u> </u> ວ | | |
| ľ | Owner | | ľ | TOP Equipment | , | | |
| | | | | | - | | |
| | Date | Full name of contributor out-of-state P. | AC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/13/2024 | Logue, Chris | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Georgetown, TX 78628 | | | | | |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Banker | | | Cadence Bank | | | |
| | Date | Full name of contributor out-of-state PA | AC (ID#: |) | | Amount of Contribution (\$) | |
| | 02/13/2024 | Logue, Chris | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Georgetown, TX 78628 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Banker | | | Cadence Bank | | | |
| | Date | Full name of contributor out-of-state PA | AC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/14/2024 | Manly, Walt | | , | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Leander, TX 78641 | | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | L;) | | |
| | | nt Consultant | | Laurel Mountain Resear | | LLC | |
| ⊨ | _ | | | ``` | | Amount of Contribution (f) | |
| | Date 02/14/2024 | | AC (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | 02/14/2024 | | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Loopdor TX 78641 | | | | | |
| ⊢ | Dringing | Leander, TX 78641 | r | Employer (Cashadring | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Practice Mgmt Consultant Laurel Mountain Resea | | | cn | | | |
| | | | | | | | |
| | | | | | | | |

MONETARY POLITICAL CONTRIBUTIONS

| SCHEDULE | A1 |
|----------|----|
|----------|----|

| The Instruction Guide explains how to complete this form. | | | | 1 | Total pages Schedule A1: Sch: 3/4 Rpt: 6/11 | |
|---|---|--|------------------------------|--|--|--|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission Filers) | |
| | Wilco 100 P | AC | | | 00085847 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 01/13/2024 | Patton, James | , | ľ | \$100.00 | |
| | 02,20.222 | 6 Contributor address; City; State; Zip Code | | • | + | |
| | | Contributor address, City, State, Zip Code | | | | |
| | | | | | | |
| | | Georgetown, TX 78628 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u>لــــــــــــــــــــــــــــــــــــ</u> | | |
| - | Owner | | Big Texas Lights | ., | | |
| ⊢ | Date | Full name of contributor Out-of-state PAC (ID#: | | — | Amount of Contribution (\$) | |
| | 02/13/2024 | Full name of contributor out-of-state PAC (ID#: Patton, James | / | | \$100.00 | |
| | 0211312024 | | | | Ψ±00.00 | |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Georgetown, TX 78628 | | | | |
| ┝ | Drincinal occu | upation / Job title (See Instructions) | Employer (See Instructions | L | | |
| | Owner | | Big Texas Lights | 'n | | |
| ⊢ | | | | — | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 01/26/2024 | | | | \$100.00 | |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78633 | | Ĺ | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| L | Retired | | Retired | _ | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 02/20/2024 | Terry Wilson, Campaign | | | \$38,000.00 | |
| | | Contributor address; City; State; Zip Code | 1 | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78626 | | | | |
| Γ | | upation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | State Repres | sentative | State of Texas | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 01/26/2024 Waters, Charlie Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | | |
| | | | | \$100.00 | | |
| | | | 1 | | | |
| | | | | | | |
| | | | | | | |
| | | Round Rock, TX 78664 | | | | |
| \vdash | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ـــــــــــــــــــــــــــــــــــــ | | |
| | Banking | | Cadence Bank | | | |
| ⊢ | I | | | | | |
| | | | | | | |

| MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDULE A1 |
|------------------------------------|--|--|----------------|--|
| The Instruc | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 4/4 Rpt: 7/11 |
| 2 FILER NAME Wilco 100 PA | ΨC | | 3 | Filer ID (Ethics Commission Filers) 00085847 |
| 01/04/2024 | Full name of contributor out-of-state PAC (ID#: Whitworth, Ursula Contributor address; City; State; Zip Code Georgetown, TX 78628 |) | 7 | Amount of Contribution (\$) \$100.00 |
| 8 Principal occup Real Estate S | pation / Job title (See Instructions) | 9 Employer (See Instructions MI Homes | <u> </u> ټ) | |
| Date 02/05/2024 | Full name of contributor out-of-state PAC (ID#: Whitworth, Ursula Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) \$100.00 |
| Dringing occur | Georgetown, TX 78628 | Employer (See Instructions | | |
| Principal occup Real Estate S | pation / Job title (See Instructions) Sales | Employer (See Instructions MI Homes | 5) | |
| | | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

| | EXPENDITURE CATEGORIES FOR BOX 8(a) |
|---|--|
| Advertising Expense Accounting/Banking Consulting 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) |
| Sch: 1/3 Rpt: 8/11 | Wilco 100 PAC 00085847 |
| 4 Date | 5 Payee name |
| 01/08/2024 | CFO Shield, LLC dba Red Elephant Reports |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$454.13 | 959 W. Glade Rd. |
| Expenditure from corporate funds | Hurst, TX 76054 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Bookkeeping Services & Support |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| Date | Payee name |
| 01/24/2024 | CFO Shield, LLC dba Red Elephant Reports |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$854.13 | 959 W. Glade Rd. |
| Expenditure from corporate funds | Hurst, TX 76054 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bookkeeping Svcs, Iss. Ann. 1099's, and file 12/202 Semi-An. TEC Rpt. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| Date | Payee name |
| 02/16/2024 | 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 EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Bookkeeping Services & Support |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| | |

| POLITICAL EXPENDITURES FROM POLITICAL | |
|---------------------------------------|--|
| CONTRIBUTIONS | |

SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | |
|---|--|---|--|--|--|--|--|
| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Fees Office OV Food/Beverage Expense Polling E: - Gitt/Awards/Memorials Expense Printing E | Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above) | | | | | |
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | | | |
| Sch: 2/3 Rpt: 9/11 | Wilco 100 PAC | 00085847 | | | | | |
| 4 Date 01/04/2024 | 5 Payee name Cornerstone Payment Systems | | | | | | |
| | | | | | | | |
| 6 Amount (\$) \$29.70 | Amount (\$) 7 Payee address; City; State; Zip Code \$29.70 2675 W 600 N | | | | | | |
| Expenditure from corporate funds | Lindon, UT 84042 | | | | | | |
| 8 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 Online Donation Processing Fee | | | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł | Candidate/Officeholder name Office sou | ught Office held | | | | | |
| Date | Payee name | | | | | | |
| 02/06/2024 | Cornerstone Payment Systems | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Co | Code | | | | | |
| \$28.70 | 2675 W 600 N | | | | | | |
| Expenditure from corporate funds | Lindon, UT 84042 | | | | | | |
| 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 Online Donation Processing Fee | | | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sou | ught Office held | | | | | |
| Date | Payee name | | | | | | |
| 02/01/2024 | HD Digital Strategies, LLC | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Co | code | | | | | |
| \$1,175.00 | LC 6548 Cetone Terrace | | | | | | |
| Expenditure from corporate funds | Round Rock, TX 78665 | | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly Retainer for Website Design & Maintenance | | | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sou | ught Office held | | | | | |
| | | | | | | | |

| POLITICAL EXPENDITURES FROM POLITICAL | |
|---------------------------------------|--|
| CONTRIBUTIONS | |

SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a) | | | |
|---|--|--|--|
| Advertising Expense Accounting/Banking Consulting 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) | | |
| Sch: 3/3 Rpt: 10/11 | Wilco 100 PAC 00085847 | | |
| 4 Date | 5 Payee name | | |
| 01/31/2024 | Harrison, Brian | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | |
| \$1,300.00 | 1109 Quarry View Lane | | |
| Expenditure from corporate funds | Georgetown, TX 78628 | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | |
| OF EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. | | |
| | Check if Austin, TX, officeholder living expense Food & Beverage Expenses for PAC Recruiting Event | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | | |
| Date | Payee name | | |
| 02/17/2024 | Office Depot | | |
| Amount (\$) | Payee address; City; State; Zip Code | | |
| \$428.13 | 1013 W University Ave. | | |
| Expenditure from corporate funds | Georgetown, TX 78628 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Copies and Flyers | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | | |
| Date | Payee name | | |
| 01/23/2024 | Williamson County GOP | | |
| Amount (\$) | Payee address; City; State; Zip Code | | |
| \$6,000.00 | 716 S rock Street | | |
| Expenditure from corporate funds | Georgetown, TX 78626 | | |
| 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 Contribution/Donation Made to Reagan Day | | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | | |
| | | | |

TEXT ANNOTATION

Sch: 1/1 Rpt: 11/11

| FILER NAME | Filer ID (Ethics Commission Filers) |
|---------------|-------------------------------------|
| Wilco 100 PAC | 00085847 |

Schedule

Cover Sheet

Information entered by filer as a memo:

This 8-Day Report and the related amended Semi-Annual report were both submitted within two business day of my learning that the 8-day report was considered required by the Commission staff.