CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commi 00085754		2 Total pages	filed: 56
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Caroline			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LACT		SUFFIX	10/07/2024	
	NICKNAME	LAST Harris Davila		SUFFIX	10/01/2024	
		nailis Daviia				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	P. O. Box 700					
ADDRESS					Receipt #	Amount
Change of Address	Round Rock, TX 78680				2 . 2	
	,				Date Processed	
					Date Imaged	
					Date illiageu	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Amberly		IVII		
NAME	IVII 3.	Amberry				
	NICKNAME	LAST		SUFFIX		
		Ward				
				_,		
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY	′; S⊺	TATE; ZIP CODE
ADDRESS	1201 Winding Way					
(Residence or Business)						
	Georgetown, TX 78628					
7 CAMPAICNI	ADEA CODE DUON		VTENCION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(979) 219-3729					
8 REPORT						
TYPE	January 15	30th day before	election \square	Runoff	15th day after o	ampaign treasurer
		_ countary belove		L	appointment (of	fficeholder only)
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (A	ttach C/OH-FR)
				reporting iiriit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	ROUGH	09/26/20	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	PI	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
				Ш.		
11 OFFICE	OFFICE HELD (if any)	<u> </u>		12 OFFICE SOUGH	T (if known)	
III OFFICE	State Representative Distr	ict 52			tative District 52	
	State Representative Distr	ICt 32		State Represen	itative District 32	
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Harris Davila, Carolin	e (The Honorable)	14 Filer ID (Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou I officeholders are required to report this information	t the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	X GENERAL	Texas Alliance for Life		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Drive		
	-	Ste 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS	
		4505 Corazon Cv		
		Round Rock, TX 78681		
16 CONTRIBUTION TOTALS	AN PLEDGES, LOANS, ECTRONICALLY)	\$ 0.00		
	IS)	\$ 167,368.18		
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 97,989.06
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 91,821.79
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required to	
		The Honora	able Caroline Harris Da	avila
		Signature of	of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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					3 01 50
18 FIL	ER NAN	AE	19 Filer ID	(Ethics	Commission Filers)
Ha	ırris Da	vila, Caroline (The Honorable)	00085754		
		E SUBTOTALS		SI	JBTOTAL AMOUNT
NA	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	90,662.55
2.	X	\$	76,705.63		
3.		\$			
4.		\$			
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$	70,245.26	
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	25,500.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	2,243.80
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

МО	NET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A			
The I	Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/20 Rpt: 4/56		
2 FILER Harris		a, Caroline (The Honorable)		3	Filer ID (Ethics Commission 00085754	on Filers)	
4 Date 09/09/	/2024	 Full name of contributor out-of-state PAC (ID#:_ALHI Life Insurance PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00	
9 Dringin	and annual	Austin, TX 78767	• Employer (Coo Instructions				
8 Princip	oai occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
Date 09/09/	/2024	Full name of contributor out-of-state PAC (ID#:_ Aegis Advocacy Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$200.00	
Princip	oal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
Date 09/09/	//2024	Full name of contributor out-of-state PAC (ID#:_ American Pharmacy GPAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,750.00	
Princip	oal occu	Corpus Christi, TX 76401 pation / Job title (See Instructions)	Employer (See Instructions)			
Date 09/09/	/2024	Full name of contributor out-of-state PAC (ID#: Associated Builders and Contractors of TX PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
Princip	oal occu	Austin, TX 78757 pation / Job title (See Instructions)	Employer (See Instructions)			
Date 09/26/	/2024	Full name of contributor out-of-state PAC (ID#: Associated General Contractors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 75788			Amount of Contribution (\$)	\$1,500.00	
Princip	oal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 2/20 Rpt: 5/56	
2	FILER NAME Harris Davila	, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/09/2024	Biard, Amy	-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	l ₉	Employer (See Instructions	:) 		
	Consultant	pation 7 oob title (occ mondonors)		Self	''		
	Date 09/08/2024	Full name of contributor out-of Birk, Carla Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$104.10
	Dringinal acqu	Round Rock, TX 78681 pation / Job title (See Instructions)		Employer (See Instructions	·/-		
	Retired			Employer (See Instructions Retired)		
	Date 09/09/2024	Full name of contributor out-of Blackridge Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/26/2024	Brecht, Dan	-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 09/19/2024	Brooks, Jeri	-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions One World Strategy Gro			
			•				

	MONET	ARY POLITICAL CO	NS		SCHEDUI	E A1	
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/20 Rpt: 6/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/19/2024	5 Full name of contributorBurnet Co. Republican Wome6 Contributor address; City; State;)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Marble Falls, TX 78654 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date		out-of-state PAC (ID#:	2 Employer (See instructions		Amount of Contribution (\$)	
	09/09/2024	Cammack & Strong PC Contributor address; City; State;				, who dank of Continuous (c)	\$300.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions)		
	Timolpai occa	patient, cos tille (coe metracione)		Employer (GGC moradulene			
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:) 4 Colyandro, John Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Colyandro Public Affairs			
	Date 09/19/2024	Congress Ave. Partners	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor Cornerstone Government Affa Contributor address; City; State; Washington, DC 20024				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/20 Rpt: 7/56	
2	FILER NAME Harris Davila	ı, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/09/2024	5 Full name of contributorEli Lilly and Co. PAC6 Contributor address; City; S	x out-of-state PAC (ID#: C	000082792)	7	Amount of Contribution (\$)	\$1,000.00
_	Deignaignal	Indianapolis, IN 46285		O Franks var (Can kastrustiana			
8	Principal occu	pation / Job title (See Instruction	S)	9 Employer (See Instructions	5)		
	Date 09/09/2024	Full name of contributor Erben & Yarbrough Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701	,		<u></u>		
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		
	Date 09/26/2024	Full name of contributor Fell, Douglas Contributor address; City; S	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$1,000.00
		Round Rock, TX 78681					
	Principal occu Rancher	pation / Job title (See Instruction	s)	Employer (See Instructions Self	5)		
	Date 09/26/2024	Full name of contributor GARW PAC Contributor address; City; S Georgetown, TX 78633)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
	Date 09/26/2024	Full name of contributor GARW PAC Contributor address; City; S Georgetown, TX 78633	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/20 Rpt: 8/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)		3	Filer ID (Ethics Commission 00085754	n Filers)
4	Date 09/19/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Rosenberg, TX 77471 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Garza-Brown, Maria Contributor address; City; State; Zip Code Round Rock, TX 78665)		Amount of Contribution (\$)	\$300.00
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_ Germania Farm Mutual PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$500.00	
	Principal occu	Brenham, TX 77834 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:_ Glos, John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.05
	Principal occu Retired	Georgetown, TX 78633 pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Grace & McEwan Consulting Political Fund Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		·				

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	5	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm	i.	1	Total pages Schedule A1: Sch: 6/20 Rpt: 9/56		
2	FILER NAME Harris Davila	a, Caroline (The Honorable)				3	Filer ID (Ethics Commission 00085754	on Filers)	
4	Date 09/09/2024	5 Full name of contributor Greenberg Traurig PAC6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$1,000.00	
		Albany, NY 12207		1					
8	Principal occu	pation / Job title (See Instructions	;) 	9 6	Employer (See Instructions	i)			
	Date 09/09/2024	Full name of contributor HILLCO PAC Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78701	. 1	_					
	Principal occu	pation / Job title (See Instructions	;) 	E	Employer (See Instructions	5)			
	Date 09/19/2024	Full name of contributor HILLCO PAC Contributor address; City; St	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$2,500.00	
		Austin, TX 78701							
	Principal occu	pation / Job title (See Instructions	5)	E	Employer (See Instructions	i)			
	Date 09/09/2024	Full name of contributor Hagler, Keith Contributor address; City; St Taylor, TX 76574	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$250.00	
	Principal occu President	pation / Job title (See Instructions	5)		Employer (See Instructions Hagler Investments	i)			
	Date 09/25/2024	Full name of contributor Harrison, Brian Contributor address; City; St Georgetown, TX 78628	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,041.02	
	Principal occu Spvr Crim. Ir	pation / Job title (See Instructions	s)		Employer (See Instructions JS Government)			
	,	5		<u> </u>					

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/20 Rpt: 10/56	
2	FILER NAME Harris Davila	ı, Caroline (The Honorable)		3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/09/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Holt, Janis Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$104.10
	Dringing agg	Silsbee, TX 77656 pation / Job title (See Instructions)	Employer (See Instructions	_		
	Manager	Employer (See Instructions Self	')			
	Date 09/09/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77007				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#:_ Hunter, Todd Contributor address; City; State; Zip Code Corpus Christi, TX 78412			Amount of Contribution (\$)	\$1,041.02
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Todd Hunter Law	5)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Independent Insurance Agents of TX PAC Contributor address; City; State; Zip Code Austin, TX 78768			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL C	ONTRIBUTION	NS	;		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rm.		1	Total pages Schedule A1: Sch: 8/20 Rpt: 11/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)				3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/25/2024	Full name of contributor Jacobs, Kelsey Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$104.10
	Dringing Loon	Leander, TX 78641	lo lo	<u> </u>	mplayer (Caa Instructions			
8	Realtor	pation / Job title (See Instructions)	9		mployer (See Instructions rand Endeavor Homes			
	Date 09/19/2024	Full name of contributor James B. Frank Campaign Contributor address; City; Sta)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Wichita Falls, TX 76308 upation / Job title (See Instructions)		Eı	mployer (See Instructions)		
		,						
	Date 08/09/2024	Full name of contributor Kres, Mark Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78758	1					
	Retired	pation / Job title (See Instructions)			mployer (See Instructions etired)		
	Date 09/09/2024	Full name of contributor Law Offices of A. Craig Eile Contributor address; City; Sta Austin, TX 78701)		Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)		E	mployer (See Instructions)		
	Date 09/09/2024	Full name of contributor Lawson, Richard Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
	Principal occu Consultant	pation / Job title (See Instructions)			mployer (See Instructions erizon)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/20 Rpt: 12/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/03/2024	Full name of contributor Leander Area Republican V Contributor address; City; Star			7	Amount of Contribution (\$)	\$1,000.00
		Leander, TX 78641	1				
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	i)		
	Date 09/09/2024	Full name of contributor Liberty Hill Chamber of Cor Contributor address; City; Sta)		Amount of Contribution (\$)	\$65.00
	Principal occu	Liberty Hill, TX 78642 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 09/20/2024	Full name of contributor [Luther, Shelley Contributor address; City; States Sherman, TX 75090	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 09/10/2024	Full name of contributor Marquez, Brandy Contributor address; City; Star Austin, TX 78739)		Amount of Contribution (\$)	\$520.51
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Marquez Public Affairs	()		
	Date 09/26/2024	Full name of contributor McDaniel, Linda Contributor address; City; Star	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	()		

	MONET	ARY POLITICAL COI	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 10/20 Rpt: 13/56	
2	FILER NAME Harris Davila	ı, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	n Filers)
4	Date 09/03/2024	 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$104.10
8	Principal occu Corporate Af	Round Rock, TX 78664 pation / Job title (See Instructions) fairs		Employer (See Instructions Dell Technologies)		
	Date 09/04/2024	Miller, Robert Contributor address; City; State; 2	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	Dallas, TX 75201 pation / Job title (See Instructions)		Employer (See Instructions Locke Lord LLP)		
	Date 09/09/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/03/2024	Full name of contributor	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu NA	NA, TX pation / Job title (See Instructions)		Employer (See Instructions NA)		
	Date 09/03/2024	Full name of contributor Contributor Contributor address; City; State; Zond Round Rock, TX 78665	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Entrepreneu	pation / Job title (See Instructions)		Employer (See Instructions Self)		
			•				

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 11/20 Rpt: 14/56	
2	FILER NAME Harris Davila	ı, Caroline (The Honorable)				3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/10/2024	5 Full name of contributor ONeill, Angela6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$500.00
0	Dringing aggr	Argyle, TX 76226	2)	_	Employer (See Instructions	<u></u>		
8	Homemaker	pation / Job title (See Instructions	5)	9	Employer (See Instructions Self	5)		
	Date 09/26/2024	Full name of contributor Pat Curry Campaign Contributor address; City; S)		Amount of Contribution (\$)	\$500.00
		Waco, TX 76712				L		
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	S)		
	Date 09/09/2024	Full name of contributor Pediatric Dentists PAC Contributor address; City; S	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$1,000.00
		McKinney, TX 76069						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	S)		
	Date 09/07/2024	Full name of contributor Pennell, Marla Contributor address; City; S Georgetown, TX 78633	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Retired	5)		
	Date 09/03/2024	Full name of contributor Phillips 66 PAC Contributor address; City; S Washington, DC 20004	x out-of-state PAC (ID#: Control of the control of	000	513549)		Amount of Contribution (\$)	\$1,000.66
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 12/20 Rpt: 15/56		
2	FILER NAME Harris Davila	a, Caroline (The Honorable)		3	Filer ID (Ethics Commission 00085754	on Filers)	
4	Date 09/19/2024	 Full name of contributor	#:)	7	Amount of Contribution (\$)	\$500.00	
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 08/29/2024	Full name of contributor out-of-state PAC (ID Pool, Trent Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$500.00	
	Principal occu Consultant	Dripping Springs, TX 78620 pation / Job title (See Instructions)	Employer (See Instructions Public Appeal	<u> </u> s)			
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID Precast PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
	Principal occu	Austin, TX 78716 pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID Public Blueprint LLC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)			
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID Rabaey, Greg Contributor address; City; State; Zip Code Round Rock, TX 78681	#:)		Amount of Contribution (\$)	\$500.00	
	Principal occu Executive	pation / Job title (See Instructions)	Employer (See Instructions Santanna Energy Servio				
			•				

	MONET	ARY POLITICAL C	NS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/20 Rpt: 16/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/09/2024	5 Full name of contributorRandy C. Cain Attorney at6 Contributor address; City; Sta)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Austin, TX 78763 pation / Job title (See Instructions)	1	Employer (See Instructions			
	-			5 Employer (See instructions			
	Date 09/03/2024	Full name of contributor Republican Women of Woo Contributor address; City; Sta)		Amount of Contribution (\$)	\$500.00
	Principal occu	Quitman, TX 75783 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/05/2024	Full name of contributor Rodriguez, Oscar Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code)		Amount of Contribution (\$)	\$104.10
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Texas Assn. of Broadca		rs	
	Date 09/09/2024	Full name of contributor Ron Lewis and Assoc. Contributor address; City; Sta Austin, TX 78701	out-of-state PAC (ID#:_ te; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/09/2024	Full name of contributor Rural Friends of Electric Contributor address; City; States Austin, TX 78701)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	ΓΙΟΙ	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete th	nis foi	m.	1	Total pages Schedule A1: Sch: 14/20 Rpt: 17/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/09/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$2,000.00
_		Georgetown, TX 75627	1-		Ĺ		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (Scott, Lori Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu	Pation / Job title (See Instructions)		Employer (See Instructions	;) 		
		Round Rock Area Servi		Center			
	Date 09/18/2024	Full name of contributor out-of-state PAC (Sepehri, John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$208.20
		Austin, TX 78731					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Foley Lardner LLP	5)		
	Date 09/07/2024	Full name of contributor out-of-state PAC (Spears, Scott Contributor address; City; State; Zip Code Austin , TX 78746)		Amount of Contribution (\$)	\$100.00
	Principal occu attorney	pation / Job title (See Instructions)		Employer (See Instructions Arenson & Spears	5)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (Stromberg Contributor address; City; State; Zip Code Taylor, TX 76574				Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			ı				

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 15/20 Rpt: 18/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	n Filers)
4	Date 09/19/2024	 Full name of contributor out-of-state PAC (ID#:_Stromberg, Larry Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Taylor, TX 76574 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Retired			Retired			
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Conservative Leadership PAC Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$5,000.00
		Ft. Worth, TX 76126					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Aggregates and Concrete PAC Contributor address; City; State; Zip Code Round Rock, TX 75681				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Agricultural Aviation Assoc. PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL (ONS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/20 Rpt: 19/56	
	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
	Date 09/09/2024	5 Full name of contributorTexas Alliance for Life PA6 Contributor address; City; St	-		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Austin, TX 78754 pation / Job title (See Instructions	1	9 Employer (See Instructions			
	Fillicipal occu			3 Employer (See instructions	')		
	Date 09/19/2024	Full name of contributor Texas Assoc. of Crane O Contributor address; City; St Austin, TX 78716)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/09/2024	Full name of contributor Texas Automobile Dealers Contributor address; City; St				Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/09/2024	Full name of contributor Texas Energy PAC Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/26/2024	Full name of contributor Texas Farm Bureau AGF Contributor address; City; St Waco, TX 76702)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRI	S	SCHEDULE A1			
	The Instru	ction Guide explains how to comple	ete this forr	n.	1	Total pages Schedule A1: Sch: 17/20 Rpt: 20/56	
2	FILER NAME Harris Davila	, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/09/2024	Texas Food and Fuel Assoc. PAC	Texas Food and Fuel Assoc. PAC Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 09/09/2024	Texas Lobby Partners)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions			
	i illicipai occu	oduon 7 300 uuc (300 mardonona)		Employer (See manuchons	')		
	Date 09/09/2024	Full name of contributor out-of-state Texas Medical Assoc. PAC Contributor address; City; State; Zip Code	e PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 09/19/2024	Texas Optometric PAC)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/03/2024	Full name of contributor out-of-state Texas Realtors PAC Contributor address; City; State; Zip Code Austin, TX 78703	e PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			1				

	MONET	ARY POLITICAL C	NS		SCHEDUI	E A1	
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/20 Rpt: 21/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/19/2024	Full name of contributor Texas Realtors PAC Contributor address; City; Star	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Austin, TX 78768 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/26/2024	Full name of contributor Triggs, Cynthia Contributor address; City; Star Georgetown, TX 78688	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 09/09/2024				Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 08/15/2024	Full name of contributor Vasut, Cody Contributor address; City; Star Angleton, TX 77516	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$520.51
	Principal occu State Repres	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		
	Date 09/26/2024	Full name of contributor Vasut, Cody Contributor address; City; Star Angleton, TX 77516				Amount of Contribution (\$)	\$250.00
	Principal occu Representat	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		

	MONET	ARY POLITICAL C		SCHEDUI	LE A1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/20 Rpt: 22/56	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 09/19/2024	Veterinarian PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00	
		Austin, TX 78754					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 08/29/2024	Full name of contributor White, James Contributor address; City; St)		Amount of Contribution (\$)	\$26.03
	Dringinal occu	Woodville, TX 75959 pation / Job title (See Instructions	<u>, </u>	Employer (See Instructions	<u></u>		
	State Representative State of Texas			>)			
	Date 07/03/2024	Full name of contributor Wilkie, Kevin Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$50.00
		Georgetown, TX 78633					
	Principal occu Law Enforce	pation / Job title (See Instructions ment Officer)	, , ,	Employer (See Instructions) Williamson Co. Constable PCT 3		
	Date 09/26/2024	Full name of contributor Will Metcalf Campaign Contributor address; City; St Conroe, TX 77306			•	Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/09/2024	Full name of contributor Williams, Thomas Contributor address; City; St Navasota, TX 77868	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)		
			•				

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 20/20 Rpt: 23/56
2	FILER NAME Harris Davila, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085754
4	Date 09/03/2024 5 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribution (\$) \$52
_	Georgetown, TX 78633	victions)
8	Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired	ructions)
	Date Full name of contributor O9/09/2024 Zhou, Helen Contributor address; City; State; Zip Code) Amount of Contribution (\$) \$500
	Houston, TX 77036 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Sandy Lane Realtor	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/3 Rpt: 24/56					
2 FILER NAME Harris Davil	a, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085754					
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5 Date 09/22/2024	 Full name of contributor out-of-state PAC (ID#:		8 Amount of contribution (\$) description \$9,733.00 Campaign polling					
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
12 Continutors	principal occupation (i OK SODICIAL)	13 Contributor 3 Job title	(I ON JUDICIAL) (See institutions)					
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	l						
Date 09/10/2024 Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code			Amount of In-kind contribution contribution (\$) description \$9,734.00 Polling					
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•						
Date 09/25/2024	Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$4,772.73 Data					
Principal occi	Austin, TX 78767 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.					
Filliplation occupation / Job title (FOR NON-JODICIAL) (See instituctions)								
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	The Instruction Guide explains how to complete this form.			lule A2: 5/56
2 FILER NAME			3 Filer ID (Ethics C	Commission Filers)
Harris Davil	a, Caroline (The Honorable)		00085754	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9	In-kind contribution
09/25/2024	Greg Abbott Campaign		contribution (\$)	description
	7 Contributor address; City; State; Zip Code		\$37,482.901DI	gital advertising
			<u> </u>	
	Austin, TX 78767		Check if travel outside	de of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instru	uctions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (Se	e instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOI	R JUDICIAL)
			, , , , , ,	,
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>		
D-4-	Full manual of a partition to a		A	In the december of the
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description
09/05/2024	TREPAC			dvertising for fundraising
	Contributor address; City; State; Zip Code			vent
			į	
	Austin, TX 78768		;	
Driveineless	Great have ducide of results of the confidence o			
Principal occi	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)			
Contributorio	principal accumption (FOR HIDICIAL)	Contributorio iob titlo	(FOR TUDICIAL) (So	e instructions)
Contributors	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (Se	e iristructions)
O - maturille contactule	and a self-ord (EOD JUDICIAL)	Lauren et a autolia et	- d (f) (FOI	D JUDIOLAL)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOI	R JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor ut-of-state PAC (ID#:		Amount of	In-kind contribution
09/05/2024	Texans for Lawsuit Reform PAC		contribution (\$)	description ampaign Polling
	Contributor address; City; State; Zip Code		ψ9,733.0010	ampaign Folling
			!	
	Austin, TX 78701		Check if travel outside	de of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instru	uctions)
Contributor's	Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions)			
Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	L		SCHEDULE A2
The Instruction Guide explains how to complete this f	form.		Total pages Schedule A2: Sch: 3/3 Rpt: 26/56
2 FILER NAME			Filer ID (Ethics Commission Filers)
Harris Davila, Caroline (The Honorable)			00085754
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$	
5 Date 09/26/2024 6 Full name of contributor ☐ out-of-state PAC (ID#:)		Amount of 9 In-kind contribution description \$5,000.00 Knocking doors
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-	-JUE	•
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title ((FOF	R JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's s	pouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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: 1/18 Rpt: 27/56	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	09/09/2024	Advantage Direct
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$900.00	1421 Prince Street
		Suite 220
		Alexandria, VA 22314
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Phone banking and blockwalking software
		Fholie balking and blockwalking soltware
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	08/01/2024	Bank of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	100 North Tryon Street
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Charlotte, NC 28255
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wire Transfer Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	08/19/2024	Bank of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	100 North Tryon Street
		Charlotte, NC 28255
	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.
		Check if Austin, TX, officeholder living expense Transfer Fee
		Transier i ee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	<u> </u>	_
	Sch: 2/18 Rpt: 28/56	Harris Davila, Caroline (The Honorable) 00085754	
4	Date	5 Payee name	_
	09/09/2024	Campaign Advocacy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$3,388.29	401 NE 46t	
		Oklahoma City, OK 73105	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Advertising Expense	
		Check if Austin, TX, officeholder living expense	
		Campaign mailer	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/OI		
_			_
	Date	Payee name	
	09/04/2024	Capitol Gift Shop	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$73.61	1400 N. Congress Avenue	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Gifts for constituents	
		Sitts for constituents	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
_	Date	Davisa nama	_
	08/20/2024	Payee name Capitol Grill	
		·	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.22	1400 N. Congress Avenue	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Meal during political meeting	
	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

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	ll 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: 3/18 Rpt: 29/56	Harris Davila, Caroline (The Honorable) 00085754	
4	Date	5 Payee name	
	09/03/2024	Carter	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$6,000.00	234 Olde Oaks Drive	
		Georgetown, TX 78633	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign signs	
		Campaign digne	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	=
	09/06/2024	Chuys	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$87.40	2027 Aldrich St	
		Austin, TX 78723	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Meal during campaign meeting	
		Meal during bampaigh meeting	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
	Date	Payee name	=
	09/12/2024	Dees Flowers Lovingly	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$123.34	323 N Main St	
		Taylor, TX 76574	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Gifts for consitutents	
		Gills for considerits	
	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 -

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	al Committee Legal Services SalariesA The Instruction Guide explains how to co		S/Contract Labor OTHER (enter a category not listed above) ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/18 Rpt: 30/56	Harris Davila, Caroline (The Honorable)		00085754
4	Date	5 Payee name		
	08/05/2024	Drenner, Keaton		
6	Amount (\$) \$1,200.00	7 Payee address; City; State; Zip Co 3906 Pearce Rd Austin, TX 78730	ode	
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 Campaign work
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
_	Date	Payee name		
	09/09/2024	Drenner, Keaton		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$1,900.00	3906 Pearce Rd	,	
	Ψ1,000.00			
		Austin, TX 78730		
	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 Campaign work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıght	Office held
	Date	Payee name		
	09/13/2024	Drenner, Keaton		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$1,280.00	3906 Pearce Rd		
	, ,			
		Austin, TX 78730		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 5/18 Rpt: 31/56	Harris Davila, Caroline (The Honorable) 00085754	
4	Date	5 Payee name	
	09/13/2024	Drenner, Keaton	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$1,900.00	3906 Pearce Rd	
		Austin, TX 78730	
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.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Campaign work	
_			_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_
	Date	Payee name	
	09/23/2024	EZ Texting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$26.65	548 Market St	
		San Francisco, CA 94104	
	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	
		Software for campaign texting	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	08/01/2024	Frost Bank	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$15.00	401 Congress Ave	
		Austin, TX 78701	
	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.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Banking Fee	
	Operation ONE VIII I	Open districts (Office health are now as a first and the state of the second state of	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/18 Rpt: 32/56	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	09/11/2024	Frost Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	401 Congress Ave
		Austin, TX 78701
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 Banking Fee
		Danking 1 cc
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	08/19/2024	Goat Thread
	Amount (\$)	Payee address; City; State; Zip Code
	\$433.00	205 Mercy Way
		Liberty Hill, TX 78642
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign shirts
		Campaign simes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date 09/20/2024	Payee name Goat Thread
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,265.44	205 Mercy Way
		Liberty Hill, TX 78642
	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.
	-	Compaign shirts
		Campaign shirts
_	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 -

Fees

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials 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: 7/18 Rpt: 33/56	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	07/08/2024	Gomez, Melva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$143.50	1616 west 6th street
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursements for campaign purchases
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/03/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.94	1700 E Palm Valley Blvd
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for political office
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	09/20/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.00	1700 E Palm Valley Blvd
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for political office
		Supplies for political office
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
l		

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		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
_	Sch: 8/18 Rpt: 34/56	Harris Davila, Caroline (The Honorable)	00085754
4	Date	5 Payee name	•
	09/04/2024	Harland Clarke	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$34.40	15955 La Cantera Pkwy	
		San Antonio, TX 78256	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Cinic Overneda/Nental Expense	I outside of Texas. Complete Schedule T.
		Campaign c	n, TX, officeholder living expense
		Campaign c	necks
_	Complete ONL V if direct	Candidata/Officeholder name Office cought	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office field
	Date	Payee name	
	07/26/2024	IPhone Citizen	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$74.91	One Citizens Plaza	
	Ψ14.01	One one control index	
		Providence PL02002	
		Providence, RI 02903	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Loutside of Toyon Complete Cabadula T
	EXPENDITURE	Office Overficad/Nertical Experise	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Phone mont	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	09/04/2024	JC & KTG Consulting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	9900 Spectrum Dr	
		•	
		Austin, TX 78717	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		l outside of Texas. Complete Schedule T.
	LAFENDITORE	l	n, TX, officeholder living expense
		Campaign w	/Ork
	Operation ONE VIII II	Overskide to COTT and the latest and the course	Office held
	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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	·
_	Sch: 9/18 Rpt: 35/56	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	09/23/2024	Leander Area Republican Women
6	Amount (\$) \$225.00	7 Payee address; City; State; Zip Code PO Box 551
_	DUDDOCE	Leander, TX 78646
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation for event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/23/2024	Leander Area Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.00	PO Box 551
		Leander, TX 78646
	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
		Event registration for campaign staff
		Event registration for earnpaign stain
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/22/2024	Liberty Hill Chamber of Commerce
_	Amount (\$)	Payee address; City; State; Zip Code
	\$130.00	1000 TX-332 Loop
		Liberty Hill, TX 78642
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event Registration
_	Complete ONLY 'C. "	Condidate Office helder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

nse Travel in Districtions Travel Out of Districtions Travel Out of Districtions of Districtio

Candidate/Officeholder/Politica Credit Card Payment	Al 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: 10/18 Rpt: 36/56	Harris Davila, Caroline (The Honorable) 00085754
4 Date	5 Payee name
09/09/2024	Monument Cafe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.01	500 S Austin Ave
	Georgetown, TX 78626
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Meal during campaign travel
	Media during campaign daver
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
09/03/2024	Rotary Club of Round Rock
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	P.O. Box 544
Ψ <u>1</u> ,000.00	The Box of the
	Round Rock, TX 78680
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Donation
Operation ONLY if direct	Our distance (Office health annuary)
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/23/2024	Round Rock Donuts
Amount (\$)	Payee address; City; State; Zip Code
\$24.31	106 W Liberty Ave
	Round Rock, TX 78664
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Meal during campaign travel
Operation Children	Our distance (Office health annuary Office annual to
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/18 Rpt: 37/56	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	09/03/2024	Round Rock Donuts
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.96	106 W Liberty Ave
		Round Rock, TX 78664
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meal during political meeting
		3 pr 1 1 1 3
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/25/2024	Round Rock Donuts
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.31	106 W Liberty Ave
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Meal during political meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
	Date	Davisa sama
	07/03/2024	Payee name Self, Landon
	Amount (\$) \$2,720.00	Payee address; City; State; Zip Code 19532, Chayton Cr
	Ψ2,720.00	19352, Chayton Ci
		Pflugerville, TX 78660
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign work
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Orange to bonom O/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 12/18 Rpt: 38/56	Harris Davila, Caroline (The Honorable)		00085754
4	Date	5 Payee name		
	08/06/2024	Self, Landon		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$1,360.00	19532, Chayton Cr		
		Pflugerville, TX 78660		
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.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Campaign work
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	abt	Office held
9	expenditure to benefit C/OI		gnı	Office field
_	Data			
	Date	Payee name		
	09/19/2024	Simpletexting		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$45.84	One North Wacker, Suite 2500		
		Chicago, IL 60606		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign texting service
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	09/12/2024	Target		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$215.79	121 Louis Henna Blvd		
		Round Rock, TX 78664		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	•		Check if Austin, TX, officeholder living expense
				Supplies for political office
	0 1 0 0 0 0 0	0 51 40 5 1 1		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 13/18 Rpt: 39/56	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	09/24/2024	Texas Chili Parlor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.82	1409 Lavaca
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Meal during campaign travel
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/26/2024	Texas Young Republicans
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2604 Bright Rock Ln
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Donation
	Operation ONLY if allowed	Occasional Office health
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/09/2024	Walgreens
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.55	4501 Guadalupe ST
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for political office
	Operation ONE VIII II	Open Highest Office health are seen as the control of the control
	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) 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	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 14/18 Rpt: 40/56	Harris Davila, Caroline (The Honorable) 00085754						
4	Date	5 Payee name						
	09/10/2024	White, Summer						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$400.00	18201 Winnow Way						
		Pflugerville, TX 78660						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Salaries/Wages/Contract Labor						
		Campaign work						
		Campaigh Work						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
,	expenditure to benefit C/O							
_	Data							
	Date 09/09/2024	Payee name						
		Zazzle, Inc.						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$83.56	1800 Seaport Blvd						
		Redwood City, CA 94063						
	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.						
		Custom compaign ware						
		Custom campaign ware						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	Complete ONLY if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·						
	Date	Payee name						
	09/03/2024	Zoom.us						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$17.05	55 Almaden Boulevard						
		San Jose, CA 95113						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense						
	EXI ENDITORE	Check if Austin, TX, officeholder living expense						
		Online meeting software						
	Operation ONLY if allowed	Out distance (Office health and out of the country						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H						

SCHEDULE F1

vertising Expense Event Expense Loan Repayment/Reimbur

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	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 15/18 Rpt: 41/56	Harris Davila, Caroline (The Honorable) 00085754							
4	Date	5 Payee name							
	09/23/2024	Zoom.us							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$17.05	55 Almaden Boulevard							
		San Jose, CA 95113							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Online meeting software							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O	1							
	Date	Payee name							
	08/16/2024	Ampro Productions							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$17,563.57	7202 Smokey Hill Rd							
		Austin, TX 78736							
	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 signs							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/Ol	1							
	Date	Payee name							
	08/16/2024	Berry Communications							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$18,000.00	1014 Milton							
		Austin, TX 78704							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Consulting Fees							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/Ol	1							

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/18 Rpt: 42/56	Harris Davila, Caroline (The Honorable) 00085754
4		5 Payee name
L	07/01/2024	Best Western
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,015.50	22 South Carroll St
		Madican WI F2702
Ļ	DUDDOOF	Madison, WI 53703
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Hotel stay during political trip
Ļ	Operation ONLY if dispose	Open Halde Office halden are seen as the seen are s
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨	Date	Dayso name
	07/22/2024	Payee name Best Western
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$39.46	22 South Carroll St
		Madison, WI 53703
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Hotel parking during political trip
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/05/2024	Drenner, Keaton
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,200.00	3906 Pearce Rd
		Austin, TX 78730
L	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign work
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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
TTALE (Control of State Control of C

	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: 17/18 Rpt: 43/56	Harris Davila, Caroline (The Honorable) 00085754				
4	Date	5 Payee name				
	08/16/2024	IPhone Citizen				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$74.91	One Citizens Plaza				
		Providence, RI 02903				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Phone monthly user fee				
		Thone monthly decribe				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·				
	Date	Dougo nama				
		Payee name				
	07/09/2024	JC & KTG Consulting				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00 9900 Spectrum Dr					
		Austin, TX 78717				
	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 Campaign work				
		Campaign work				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·				
_	Data					
	Date 07/00/2024	Payee name				
	07/09/2024	JC & KTG Consulting				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	9900 Spectrum Dr				
		Austin, TX 78717				
	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 Campaign work				
		Campaign work				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					

SCHEDULE F1

Solicitation/Fundraising Expense

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
┰	Total pages Schedule F1:	la FILED NAM	<u> </u>		-		12	Filer ID	(Ethics Commission Filers)	_		
	Sch: 18/18 Rpt: 44/56		ila, Caroline (The Hono	rable)			*	00085754	,			
4	Date	5 Payee name	2				_			_		
	07/19/2024	Levy										
6	Amount (\$)	7 Payee addr	ess; City; S	State; Zip Co	ode							
	\$22.44	1111 N Ve	l Phillips									
		Milwaukee	, WI 53203									
8	PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b)	Description						
	OF EXPENDITURE	Food/Beve	erage Expense						mplete Schedule T.			
						_		, officeholder livir	ng expense			
						Meal during p	μυιι	ilicai li avei				
Ļ					<u> </u>							
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ıght			Office h	neld			
	Date	Payee name								_		
	09/16/2024	Round Ro	ck Chamber of Commer	ce								
┝	Amount (\$)	Payee addr	ess; City; S	State; Zip Co	ode					_		
	\$80.00	1 1	ge Center Cir	,p	000							
	Ψ00.00	310 Hema	ge ochter on									
		Round Ro	ck, TX 78664									
	PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b)	Description						
	OF EXPENDITURE	Event Exp	ense			=			mplete Schedule T.			
								stin, TX, officeholder living expense				
						Event Regist	Iau	OH				
┡	0 1: 0 11 1 1		·	0"	<u> </u>			0,000				
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ugnt			Office h	neia			
	Date	Payee name	9									
	07/03/2024	Winred										
Н	Amount (\$)	Payee addr	ess; City; S	State; Zip Co	ode					_		
	\$384.43	1776 Wilso		, ,								
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
		Arlington, '	VA 22209									
	PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b)	Description						
	OF EXPENDITURE	Fees							mplete Schedule T.			
	ZAI ZHOHORZ					_		, officeholder livir				
						Processing fe	ees	ior online (CONTIDULIONS			
\vdash	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ught			Office h	neld			
L	experiulture to beliefft C/OI	11										
For	ms provided by Texas E	thics Commiss	sion www.eth	ics.state.tx.ı	JS				Version V4.1.0.48da5	1 f7		

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental 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 Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 45/56 Harris Davila, Caroline (The Honorable) 00085754 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date Payee name 07/31/2024 **Berry Communications** Amount (\$) Payee address; City; State; Zip Code \$25,500.00 1014 Milton Austin, TX 78704 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Consulting fees 11 Complete ONLY if direct Candidate/Officeholder name Office 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 Insti	ruction Guide explains how	to complete	this	form.	(* ** *********************************		,
1 To	otal pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commis	sion Filers)
S	ch: 1/11 Rpt: 46/56	Harris Davila, Carol	line (The Honorable)				00085754		
	REDIT CARD SUER		ncial institution America	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$		
6 P	AYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 07/04/2024			edit Card Issuer 07/06/2024	Paid		
7 P	AYEE	(a) Payee name Dropbox		(b) Payee 1800 Ow	en:		City,	State,	Zip Code
8 P	URPOSE OF	(a) Category		(b) Descri					
E	XPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent	,	1 ` ′		campaign			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
	omplete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held		
expe	enditure to benefit C/OH								
P	AYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 08/05/2024			edit Card Issuer 09/06/2024	Paid		
P	AYEE	(a) Payee name		(b) Payee	ado	dress;	City,	State,	Zip Code
		Dropbox 1800 Owens St		s St					
				San Fran	ncis	co, CA 94158			
E.	URPOSE OF XPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Software		n campaign			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	П	Check if Austin, TX,	officeholder living expe	ense	
	omplete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
P	AYMENT	(a) Amount Charged \$19.95	(b) Date of Charge 07/22/2024			edit Card Issuer 08/06/2024	Paid		
P	AYEE	(a) Payee name Zazzle, Inc.		(b) Payee 1800 Sea Redwood	apo	•	City,	State,	Zip Code
E	URPOSE OF XPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descri	ptio				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
	omplete <u>ONLY</u> if direct enditure 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 Instr	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	ion Filers)
Sch: 2/11 Rpt: 47/56	Harris Davila, Carol	ine (The Honorable)			00085754		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$497.73	(b) Date of Charge 07/03/2024		Credit Card Issuer 4 07/06/2024	Paid		
7 PAYEE	(a) Payee name Postnet TX 166		(b) Payee at 1801 Red Round Ro		City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top- Advertising Expense	of this schedule)	(b) Descripti Postage fo	on Ir campaign mai	lers		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX, o	officeholder living expe	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	esought		Office held		
PAYMENT	(a) Amount Charged \$487.12	(b) Date of Charge 08/15/2024		Credit Card Issuer 4 09/06/2024	Paid		
PAYEE	(a) Payee name Goat Thread		(b) Payee at 205 Mercy		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense			on shirts			
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule T.		Check if Austin, TX, o	officeholder living expe	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	esought		Office held		
PAYMENT	(a) Amount Charged \$23.59	(b) Date of Charge 08/05/2024	` '	Credit Card Issuer 4 09/06/2024	Paid		
PAYEE	(a) Payee name Perky Beans Coffe	е	(b) Payee at 2080 N US Leander, T	S Hwy 183 #210	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Refreshments during campaign travel				
Non-Political	\ ' -	of Texas. Complete Schedule T.		Check if Austin, TX, o	officeholder living expe	ense	
Complete <u>ONLY</u> if direct expenditure 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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1	1 Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)			
	Sch: 3/11 Rpt: 48/56	Harris Davila, Caro	line (The Honorable)			00085754			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$6.00	(b) Date of Charge 08/05/2024) Credit Card Issue 124 09/06/2024	r Paid			
7	PAYEE	(a) Payee name UT Parking		(b) Payee 210 E Ma Austin, T	artin Luther King	City, Jr Blvd	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		travel			
	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	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			
L	expenditure to benefit C/OH		T (1) = 1 (1)	1 () = . ()					
	PAYMENT	(a) Amount Charged \$180.00	(b) Date of Charge 07/16/2024) Credit Card Issue 124 08/06/2024	r Paid			
	PAYEE	(a) Payee name Southwest Airlines		(b) Payee 2702 Lov Dallas, T	e Field Dr	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 Airfare for campaign travel					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check 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 \$9.99	(b) Date of Charge 07/18/2024	. ,) Credit Card Issue 124 08/06/2024	r Paid			
	PAYEE	(a) Payee name Door Dash		(b) Payee 303 2nd San Fran		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	*	(b) Descri Meal dur	otion ing campaign tra	vel			
L	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX	officeholder living exp	ense		
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
ı									

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:	3 Filer ID (Eth	3 Filer ID (Ethics Commission Filers)				
Sch: 4/11 Rpt: 49/56	Harris Davila, Caro	00085754				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$		
6 PAYMENT	(a) Amount Charged \$25.00	(b) Date of Charge 08/15/2024	(c) Date(s) Credit Card Issu 08/16/2024 09/06/2024			
7 PAYEE	(a) Payee name Liberty Hill Chamb	er of	(b) Payee address; 1000 TX-332 Loop Liberty Hill, TX 78642	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE X Political	(See Categories listed at the top Event Expense	of this schedule)	Event Registration			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T.	X, officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$9.99	(b) Date of Charge 08/19/2024	(c) Date(s) Credit Card Issu 08/20/2024 09/06/2024	er Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Door Dash		303 2nd Street			
			San Fransisco, CA 9410	3		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Meal during campaign tr	avel		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living ex	nense	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$21.64	(b) Date of Charge 07/01/2024	(c) Date(s) Credit Card Issu 07/02/2024 07/06/2024			
PAYEE	(a) Payee name Adobe		(b) Payee address; 345 Park Ave San Jose, CA 95110	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Software for campaign			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T.	X, officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	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 Insti	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Comm	ission Filers)					
Sch: 5/11 Rpt: 50/56	Harris Davila, Caroline (The Honorable)			00085754				
4 CREDIT CARD ISSUER	Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD			 \$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$21.64	07/31/2024	08/02/2024 08/06/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code			
	Adobe							
	San Jose, CA 95110							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description					
X Political	Office Overhead/Rent	•	Software for campaign					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$21.00	(b) Date of Charge 07/16/2024	(c) Date(s) Credit Card Issue 07/19/2024 08/06/2024	r Paid				
PAYEE	(a) Barras areas		(h) Davis and discount	O't . Otata	7:- 01-			
PATEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code			
	Mailchimp		405 N Angier Ave. NE					
			Atlanta, GA 30308					
PURPOSE OF	(a) Category	of this schodula)	(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign mailing softwar	re				
X Political		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$21.00	08/16/2024	08/17/2024 09/06/2024					
PAYEE	(a) Payee name	l	(b) Payee address;	City, State	, Zip Code			
			405 N Angier Ave. NE					
	Mailchimp							
			Atlanta, GA 30308					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	*	Campaign mailing softwar	re				
X Political	Janua Overneau/Rein	iai Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
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 (Ethic	s Commiss	sion Filers)			
Sch: 6/11 Rpt: 51/56	Harris Davila, Caro	line (The Honorable)			00085754					
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid					
	\$71.41	08/01/2024	08/02/202	4 08/06/2024						
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
	Amazon.com		410 Terry							
	(a) Cataman	Seattle, WA 98109								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti							
X Political	Office Overhead/Rent		Supplies it	or political office						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living expense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$7.40	(b) Date of Charge 08/01/2024		Credit Card Issuer 4 08/06/2024	Paid					
PAYEE (a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code				
	Amazon.com		410 Terry Ave							
			Seattle, WA 98109							
PURPOSE OF	(a) Category	of Alvin and a dud a N	(b) Description							
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Supplies fo	or political office						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	K, officeholder living expense					
Complete ONLY 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 Issuer	Paid					
	\$17.05	07/23/2024		4 08/06/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
	Zoom.us		55 Almade	en Boulevard						
	200111.uS									
			San Jose,							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
l <u> </u>	Office Overhead/Rent		Offline me	eting software						
X Political										
Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	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:	F4: 2 FILER NAME				3 Filer ID (Ethio	cs Commis	sion Filers)		
	Sch: 7/11 Rpt: 52/56	Harris Davila, Caroline (The Honorable)			00085754					
4	CREDIT CARD ISSUER	Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$					
6	PAYMENT	(a) Amount Charged \$24.52	(b) Date of Charge 07/29/2024		Credit Card Issuer 4 08/06/2024	Paid				
7	PAYEE	(a) Payee name (b) Payee address; Square Space, Inc.			City,	State,	Zip Code			
New York City, NY 10										
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Online campaigning (c) Check if travel outside of Texas. Complete Schedule T.								
	Non-Political				officeholder living expense					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
_	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$50.00	(b) Date of Charge 07/03/2024	(c) Date(s) Credit Card Issuer 07/05/2024 07/06/2024		⁻ Paid				
PAYEE		(a) Payee name	I .	(b) Payee ac	ddress;	City,	State,	Zip Code		
	Round Rock Chamber of		nber of	910 Herita	ge Center Cir					
L				Round Rock, TX 78664						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		7 Check if Austin. TX.	officeholder living exp	ense			
H	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	ice sought Office held						
6	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 08/12/2024	(c) Date(s) Credit Card Issue 08/13/2024 09/06/2024		Paid				
Г	PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code		
(6) 1 3)		910 Heritage Center Cir								
L					ck, TX 78664					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct 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 (Ethic	s Commiss	sion Filers)			
Sch: 8/11 Rpt: 53/56	Harris Davila, Caro	line (The Honorable)			00085754				
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		Credit Card Issuer	Paid				
	\$44.81	07/02/2024	07/05/202	4 07/06/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Hill Country Spring								
	Austin, TX 78747								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti	on political office					
X Political	Office Overhead/Ren		water for p	Johnson Office					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX, o	c, officeholder living expense				
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) (
	\$24.82	08/02/2024	08/03/2024 08/06/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Hill Country Springs		10019 S I-	35 Frontage Rd					
			Austin, TX 78747						
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description						
EXPENDITURE X Political	Office Overhead/Ren	•	Water for political office						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> Г</u>	Check if Austin, TX, o	K, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder		ce sought Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid				
	\$25.00	07/02/2024	07/05/202	4 07/06/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
			122 East S	St					
	Hutto Area Chamb	er of							
			Hutto, TX	78634					
PURPOSE OF	(a) Category	of this cohodule)	(b) Descripti						
EXPENDITURE	(See Categories listed at the top Fees	oi una scriedule)	Event regis	stration for camp	oaign staff				
X Political									
Non-Political	(7)	of Texas. Complete Schedule T.		Check if Austin, TX, o	officeholder living expe	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	this form.	(* ** ** ******************************	,	,	
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)	
	Sch: 9/11 Rpt: 54/56	Harris Davila, Caroline (The Honorable)			00085754				
4	CREDIT CARD ISSUER	Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$				
6	PAYMENT	(a) Amount Charged \$300.00	(b) Date of Charge 07/04/2024) Credit Card Issuer 24 07/06/2024	Paid			
7	PAYEE	(a) Payee name (b) Payee address; 1460 E Whitestone Blvd			City, State, Zip Cod				
Ļ		(-) O-t			ark, TX 78613				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Event registration for camp			paign staff				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Office sought					Office held				
Ľ	expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(h) Data of Charge	(a) Data(a)	Cradit Card Issuer	Doid			
	PATMENT) Credit Card Issuer 124 08/06/2024	Palu				
PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code		
		Uber 1515 3rd St							
				San Francisco, CA 94158					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Ride duri	otion ing campaign trip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	ш	Office held			
	PAYMENT	(a) Amount Charged \$21.42	(b) Date of Charge 07/26/2024) Credit Card Issuer 124 08/06/2024	Paid			
	PAYEE	(a) Payee name Uber		(b) Payee address; 1515 3rd St San Francisco, CA 94158		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Descrip					
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
e	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

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	mmissio	n Filers)						
Sch: 10/11 Rpt: 55/56	Harris Davila, Caroline (The Honorable)			00085754						
4 CREDIT CARD ISSUER	Name of financial institution see previous See previous See previous See previous 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						
	\$26.52	07/26/2024	07/27/2024 08/06/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City, Si	tate,	Zip Code				
	Uber		1515 3rd St							
	() 0		San Francisco, CA 94158	3						
8 PURPOSE OF EXPENDITURE										
X Political	Travel In District	Nuc utility callipatur trip								
Non-Political	(c) Check if travel outside									
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 Issuer Paid 07/30/2024 08/06/2024							
	\$5.55	07/29/2024	01/30/2024 00/00/2024							
PAYEE (a) Payee name			(b) Payee address;	City, S	tate,	Zip Code				
	Uber		1515 3rd St							
			San Francisco, CA 94158							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Ride during campaign trip							
X Political	Travor in Biotriot									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense						
Complete ONLY 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 Issue	r Paid						
	\$56.94	07/29/2024	07/30/2024 08/06/2024							
PAYEE	(a) Davisa nama		(h) Davisa address:	City	toto	Zip Code				
PATEE	(a) Payee name		(b) Payee address; City, State,		iaie, .	zip Code				
	Uber		1515 3rd St							
			San Francisco, CA 94158	3						
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE 	(See Categories listed at the top Travel In District	of this schedule)	Ride during campaign trip)						
X Political	1.0.0									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		, officeholder living expense						
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 -

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

Candidate/Officeholder/Politica	-		aries/Wages/Contract Labor	OTH	IER (enter a categor	y not listed ab	oove)
4 7		ruction Guide explains how	to complete this form.	1.	• E'' ID (EIL:		·
1 Total pages Schedule F4:					3 Filer ID (Ethi	es Commiss	sion Filers)
Sch: 11/11 Rpt: 56/56		ine (The Honorable)	1		00085754		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED S				
ISSUER	see pr	see previous		CREDIT	\$		
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca		Paid		
	\$25.00	07/02/2024	07/05/2024 07/06				
7 PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
			1519 N Main St				
	Taylor Chamber of	Commerce					
			Taylor, TX 76574				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Event registration	for camp	aign staff		
X Political	Fees						
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	☐ Check if	if Austin TX of	fficeholder living exp	nense	
9 Complete ONLY if direct	Candidate/Officeholder		e sought	117 (13)	Office held		
expenditure to benefit C/OH			o coug		000 1.0.0		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	ard Issuer I	Paid		
	\$25.00	08/16/2024 09/0	6/2024				
	Ψ20.00	08/15/2024					
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
			1519 N Main St				
	Taylor Chamber of	Commerce					
			Taylor, TX 76574				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top of Fees	of this schedule)	Event registration	for camp	aign staff		
X Political	rees						
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.		if Austin, TX, o	fficeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							