### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00069477	ssion Filers)	2 Total pages t	filed: 69
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE	USE ONLY
OFFICEHOLDER	The Honorable	William T.				
NAME					Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	10/07/2024	
	Will	Metcalf				
					Data Hand delburged	Dete Destructural
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/SUITE#; CII	IY;	ZIP CODE	Date Hand-delivered	or Date Postmarked
MAILING	195 Lake View Circle				Dessist //	1
ADDRESS					Receipt #	Amount
Change of Address	Montgomery, TX 77356					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER				IVII		
NAME	Mrs.	Jill S.				
	NICKNAME	LAST		SUFFIX		
		Vaughan				
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP	r / SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	12575 Pearson Rd.					
ADDRESS						
(Residence or Business)	N					
	Montgomery, TX 77356					
7 CAMPAIGN	AREA CODE PHOI	NE NUMBER	EXTENSION			
TREASURER			EXTENSION			
PHONE	(713) 899-9657					
8 REPORT TYPE	January 15	X 30th day before		Runoff	<b>1</b> 15th day after e	ampaign treasurer
		X 30th day before		Kunon	appointment (of	
	July 15	8th day before	election	Exceeded modified	Final Report (At	tach C/OH-FR)
				reporting limit	-	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TI	HROUGH	09/26/202		
					-	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	11/05/2024					
	11/00/2021	X	General	Special		
11 OFFICE	OFFICE HELD (if any)	·		12 OFFICE SOUGHT	(if known)	
	State Representative Dist	rict 16		State Representa	ative District 16	
		GO <sup>-</sup>	TO PAGE 2			
Forms provided by Te	xas Ethics Commission	www.et	thics.state.tx.u	S	Vers	sion V4.1.0.48da51f7

#### **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

#### FORM C/OH **COVER SHEET PG 2** 2 of 69

13 C / OH NAME	Metcalf, William T. (T	he Honorable)		14 Filer ID 00069477	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures ma	cepted or political expenditu y have been made without t red to report this information	he candidate's or offic	eholder's kr	nowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Texas Alliance for Li	ife PAC			
		COMMITTEE ADDRES	SS			
	SPECIFIC	8000 Centre Park D	rive			
		Suite 380				
		Austin, TX 78754				
		COMMITTEE CAMPAI	GN TREASURER NAME			
		Shaw, James				
		COMMITTEE CAMPAI	GN TREASURER ADDRES	S		
		4505 Corazon Cv				
		Round Rock, TX 786	681			
16 CONTRIBUTION TOTALS			RIBUTIONS (OTHER THAN NTRIBUTIONS MADE ELEC		\$	0.00
	2.TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)\$86,450				86,450.66	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00	
	4. TOTAL POLITICAL EXPENDITURES				\$	21,127.59
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE		AINTAINED AS OF THE LA	AST DAY OF THE	\$	378,965.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		true	rear, or affirm, under penalty and correct and includes al er Title 15, Election Code.			
				able William T. Mete		
			Signature of	Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL ABO	DVE				
Sworn to and subs	cribed before me, by the sa	aid		, this the		day
	, 20, to ce					
C C	cer administering		fficer administering	Title of office	er administe	ring oath
Forme provided by To	vas Ethics Commission	MANANA othi	es stato ty us		Vorcion V	// 1 0 //8da51f7

#### **CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS**

#### FORM C/OH ADDENDUM

				Page 3 of 69
C / OH NAME	Metcalf, William T. (T	he Honorable)	Filer ID 00069477	(Ethics Commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to s been made without the candidate's or officeholder's d to report this information only if they receive notice	s knowledge or co	onsent. Candidates and
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME TREPAC COMMITTEE ADDRESS 1115 San Jacinto Blvd Ste. 200 Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Cantu, Leslie COMMITTEE CAMPAIGN TREASURER ADDRE		
		P.O. Box 2246 Austin , TX 78768		

#### FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 4 of 69 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Metcalf, William T. (The Honorable) 00069477 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 86,450.66 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 21,127.59 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 6,156.62 TO FILER

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/28 Rpt: 5/69	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Metcalf, Willi	iam T. (The Honorable)			00069477	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/25/2024	Anderson, John				\$250.00
		6 Contributor address; City; State; Zip Code				
		Montgomery, TX 77356	i			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Gas Trader		Repsol			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/06/2024	Anderson, Steve				\$500.00
		Contributor address; City; State; Zip Code				
		Coproc. TX 77201				
⊢	Dringingloggy	Conroe, TX 77301	Employer (Cool Instructions			
	President	pation / Job title (See Instructions)	Employer (See Instructions Showcase Auto, Inc	5)		
╞				<u> </u>		
	Date 07/22/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢500.00
	0772272024	Arthur, Shana				\$500.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77304				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b></b> 5)		
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	08/12/2024	Associated General Contractors of Texas - PAC	2			\$2,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78768				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/28/2024	Barry, Roger				\$1,250.00
		Contributor address; City; State; Zip Code				
	<u> </u>	Montgomery, TX 77356		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions		、 、	
	Owner		Southern Self Storage L	LC	,	

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/28 Rpt: 6/69	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Metcalf, Willi	iam T. (The Honorable)			00069477	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	09/24/2024	Bartholet, Kim				\$500.00
		6 Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Owner		Bartholet Home Furnish	ing	S	
F	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/11/2024	Bartlett, Cody				\$250.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77316				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b></b> 5)		
	Financial Ad		Bartlett Financial			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/08/2024	Bateman, Patty			,	\$1,000.00
		Contributor address; City; State; Zip Code				<b>-</b> ,
		Conroe, TX 77304				
┢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/05/2024	Beer Alliance of Texas PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/04/2024	Berger, Michael				\$1,000.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ة)		
	Realtor		Keller Williams Advanta	ge		
⊢						
1						

SCHEDULE	A1
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F					—		
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/28 Rpt: 7/69	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		liam T. (The Honorable)				00069477	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/27/2024	Billings, David					\$80.00
		6 Contributor address; City; Si	State; Zip Code				
		Willis, TX 77318					
8	Principal occu	upation / Job title (See Instructions	s)	9 Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/08/2024	Billingsley, Leigh		,		,	\$100.00
	00,00,	Contributor address; City; Si			1		+=•
			iale, zip coue				
		Montgomery, TX 77356					
<u> </u>	Principal occu	upation / Job title (See Instructions	<i>c)</i>	Employer (See Instructions	L ເ)		
	Retired		<i>)</i>	Retired	9		
-					—	1	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<u>*<u></u><u></u><u></u><u></u><u></u><u></u><u></u></u>
	09/19/2024	Bleyl, John					\$500.00
		Contributor address; City; Si	tate; Zip Code				
		Copros TV 77394					
	Dringing oog	Conroe, TX 77384			Ĺ		
	Principal occu CEO	upation / Job title (See Instructions	5)	Employer (See Instructions	<i>i</i> )		
L				Bleyl Engineering	—		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/21/2024	Bott, Janet					\$100.00
		Contributor address; City; Si	tate; Zip Code	ļ			
L		Conroe, TX 77304					
	Principal occu	upation / Job title (See Instructions	ŝ)	Employer (See Instructions	;)		
L							
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	09/11/2024	Bowers, Mary					\$50.00
		Contributor address; City; Si	tate; Zip Code	1			
		Conroe, TX 77304					
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
				<u>I</u>			
1							

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/28 Rpt: 8/69	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	am T. (The Honorable)			00069477	,
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7	Amount of Contribution (\$)	
08/09/2024	Brennan, Pat				\$100.00
	6 Contributor address; City; State; Zip Code				
	Willis, TX 77318	-			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Date	Full name of contributor Out-of-state PAC (ID#	: )	Γ	Amount of Contribution (\$)	
07/24/2024	Buckalew Jr., Don				\$1,000.00
	Contributor address; City; State; Zip Code		•		, ,
	Conroe, TX 77305				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
General Man	ager	Buckalew Chevrolet Inc			
Date	Full name of contributor Out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
08/01/2024	Burns & McDonell Texas PAC			.,	\$500.00
	Contributor address; City; State; Zip Code		•		
	Houston, TX 77024				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor 🛛 out-of-state PAC (ID#	ti)		Amount of Contribution (\$)	
08/14/2024	Burns, Jared				\$500.00
	Contributor address; City; State; Zip Code		1		
	Willis, TX 77318	1			
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
President		Astro Fence Company			
Date	Full name of contributor 🛛 out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
09/13/2024	Cable, Sam				\$100.00
	Contributor address; City; State; Zip Code		1		
	Conroe, TX 77301	i			
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Retired		Retired			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 5/28 Rpt: 9/69	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Metcalf, Will	am T. (The Honorable)			00069477	,
4	Date	5 Full name of contributor out-of-state PAC (	ID#:)	7	Amount of Contribution (\$)	
	08/20/2024	Calderon, Ana				\$100.00
		6 Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor 🔲 out-of-state PAC (	ID#:)		Amount of Contribution (\$)	
	08/21/2024	Campbell, Clint				\$100.00
		Contributor address; City; State; Zip Code		1		
	Conroe, TX 77305					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (	ID#:)		Amount of Contribution (\$)	
	07/25/2024	Carlson, Larry				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Magnolia, TX 77354				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	President		US Land Corporation			
	Date	Full name of contributor 🛛 out-of-state PAC (	ID#:)		Amount of Contribution (\$)	
	08/31/2024	Carr, Mark				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77316		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	President		Color Interiors			
	Date	Full name of contributor 🛛 out-of-state PAC (	ID#:)		Amount of Contribution (\$)	
	08/08/2024	Carter, D.H.				\$1,250.00
		Contributor address; City; State; Zip Code		]		
		Montgomery, TX 77356		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/28 Rpt: 10/69	
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	
		am T. (The Honorable)		00069477	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
	09/06/2024	Carwile, Sally		\$500	.00
		6 Contributor address; City; State; Zip Code			
		Montgomery, TX 77356			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	08/07/2024	Cashner, Jane		\$250	.00
		Montgomery, TX 77316			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Retired		Retired		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	09/23/2024	Chambers, Kent	/	\$100	.00
	00/20/2021				.00
	Contributor address; City; State; Zip Code				
		Willis, TX 77378			
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	•	· · · · ·		,	
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	_
	08/01/2024	Cobb Fendley PAC	,	\$500	.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77040			
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	07/27/2024	Conroe Professional Firefighters PAC	/	\$2,500	00
	0172172021	Contributor address; City; State; Zip Code			.00
		Contributor address, City, State, Zip Code			
		Conroe, TX 77305			
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	l s)	
				-,	
⊢					

	The Instru	ction Guide explains how to co	omplete this for	m.	1	Total pages Schedule A1: Sch: 7/28 Rpt: 11/69	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		am T. (The Honorable)				00069477	,
4	Date	5 Full name of contributor	t-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/01/2024	Cook, Douglas					\$100.00
		6 Contributor address; City; State; Zi	p Code				
		Conroe, TX 77302					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	t-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/24/2024	Cook, Emily					\$250.00
		Contributor address; City; State; Zi					
		Montgomery, TX 77316					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Homemaker			Self			
	Date	Full name of contributor	t-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/17/2024	Coon, Duke					\$1,000.00
		Contributor address; City; State; Zi	p Code				
		Conroe, TX 77305					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	CEO			Hadco International			
	Date	Full name of contributor	t-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/01/2024	Corley, Duane					\$2,500.00
		Contributor address; City; State; Zi					
		0 7/77001					
		Conroe, TX 77301					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date		t-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/05/2024	D'Agostino, Dorothy					\$2,500.00
		Contributor address; City; State; Zi	p Code				
		Copros TV 77204					
⊢	Duineir - L	Conroe, TX 77304	i				
		pation / Job title (See Instructions)		Employer (See Instructions	)		
⊢	Retired			Retired			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/28 Rpt: 12/69	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		am T. (The Honorable)			00069477	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/02/2024	Darcy Pawlak, Karen				\$40.00
		6 Contributor address; City; State; Zip Code				
		Montgomery, TX 77356-8423				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	5)		
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/28/2024	Dauzat, Rosalind				\$1,000.00
		Conroe, TX 77304				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ز)		
	Retired		Retired	,		
⊨	Data			<u> </u>	Amount of Contribution (f)	
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢100.00
	08/26/2024	Dawson, David				\$100.00
		Contributor address; City; State; Zip Code				
		Mantromon XX 770FC				
	<u> </u>	Montgomery, TX 77356		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
╞	Dete			<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢100.00
	08/19/2024	Dinklage, Theodore				\$100.00
		Contributor address; City; State; Zip Code				
		M				
		Montgomery, TX 77356		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
╘				<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/14/2024	Divilbiss, Mary				\$100.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
í i						

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The Instru	ction Guide explains how to c	complete this for	rm.	1	Total pages Schedule A1: Sch: 9/28 Rpt: 13/69	
2 FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	iam T. (The Honorable)				00069477	,
4 Date	5 Full name of contributor o	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
08/08/2024	Dyck, Michael					\$2,500.00
	6 Contributor address; City; State; Z					
	Conroe, TX 77304					
	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
Retired			Retired			
Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
09/24/2024	Eckstrum, Alice					\$100.00
	Contributor address; City; State; Z					
	Montgomery, TX 77356					
	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Homemaker			Self			
Date		out-of-state PAC (ID#: <u>C0</u>			Amount of Contribution (\$)	
09/18/2024	Employees of Raytheon Techn					\$750.00
	Contributor address; City; State; Z					
	Arlington, VA 22209					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
07/23/2024	Gentz, Deborah					\$100.00
	Contributor address; City; State; Z					
	Montromony TV 77216					
Dringing loogu	Montgomery, TX 77316		Employer (Coo Instructions			
	ipation / Job title (See Instructions) ervice Representative		Employer (See Instructions United Airlines	9		
Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
08/10/2024	Giles, Mark					\$250.00
	Contributor address; City; State; Z	'ip Code				
	0 TV 77004					
	Conroe, TX 77304		(2	Ļ		
	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Retired			Retired			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 10/28 Rpt: 14/69	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
Metcalf, Willi	am T. (The Honorable)		00069477	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
09/09/2024	Graham, Deborah			\$80.00
	6 Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)	
Date	Full name of contributor 🛛 out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
08/19/2024	Gurley, Christine			\$40.00
	Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
08/01/2024	Halff Associates - State PAC			\$500.00
	Contributor address; City; State; Zip Code			
	Dishardoon TV 75001			
Dringinglassy	Richardson, TX 75081	Frankryer (Cas Instructions	\ \	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	<b>#</b> 050.00
08/06/2024	Hanover, William			\$250.00
	Contributor address; City; State; Zip Code			
	Montgomery, TX 77316			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
i inicipai coca			)	
Date	Full name of contributor X out-of-state PAC (ID#:	\	Amount of Contribution (\$)	
08/17/2024	Full name of contributor X out-of-state PAC (ID#:_ Heath, David	)	Amount of Contribution (\$)	\$500.00
00/11/2024				ψ300.00
	Contributor address; City; State; Zip Code			
	Conroe, TX 77304			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
President	· · · · · /	Strategy116		

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	The Instru	ction Guide explains hov	<i>w</i> to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/28 Rpt: 15/69	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		iam T. (The Honorable)				00069477	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	09/25/2024	Hivnor, Marilou		ļ			\$40.00
	ł	6 Contributor address; City; S	State; Zip Code				
	ļ			ļ			
	1			ļ			
_		Willis, TX 77378					
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instructions)	;)		
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/19/2024	Hostetler, Joann					\$100.00
	00,10,211				1		<b>*</b> ±••••••
	Contributor address; City; State; Zip Code						
	ļ	Montgomery, TX 77356		ļ			
	Principal occu	pation / Job title (See Instruction	ıs)	Employer (See Instructions)	L;)		
	Retired			Retired	,		
=	Date	Full name of contributor	out-of-state PAC (ID#:_	·	Γ	Amount of Contribution (\$)	
	08/18/2024	House, Susan		,		Allount of Contribution (+)	\$100.00
	001101202	Contributor address; City; S					Ψ100.0-
	ļ		late, zip coue	ļ			
	ļ			ļ			
	ļ	Montgomery, TX 77356		ļ			
	Principal occu	pation / Job title (See Instruction	ls)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
			-,		,		
_	Date	Full name of contributor	out-of-state PAC (ID#:_	) <u> </u>	Γ	Amount of Contribution (\$)	
	08/07/2024	House, W. R. (Mr.)		ļ			\$40.00
	1	Contributor address; City; S	State; Zip Code				
	1		· •	ļ			
l	ł			ļ			
	1	Montgomery, TX 77356		ļ			
	Principal occu	pation / Job title (See Instruction	ıS)	Employer (See Instructions)	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
l	09/06/2024	Humane Society Legislat					\$500.00
	1	Contributor address; City; S	State; Zip Code				
	ļ	-		ļ			
	ļ			ļ			
	1	Washington, DC 20037		ļ			
	Principal occu	pation / Job title (See Instruction	IS)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
				<u> </u>			

The Instruction Guide explains how to complete this form.       Sch:         2 FILER NAME       3 Filer         Metcalf, William T. (The Honorable)       0006	I pages Schedule A1: : 12/28 Rpt: 16/69 ID (Ethics Commission Filers) 69477 unt of Contribution (\$) \$500.00
2       FILER NAME       3       Filer         Metcalf, William T. (The Honorable)       3       Filer       0006         4       Date       5       Full name of contributor       out-of-state PAC (ID#:)       7       Amore         07/22/2024       Husbands, John       1       1       1       1       1       1	ID (Ethics Commission Filers) 69477 unt of Contribution (\$)
Metcalf, William T. (The Honorable)       0000         4 Date       5 Full name of contributor       out-of-state PAC (ID#:)       7 Amount         07/22/2024       Husbands, John       7 Amount	69477 unt of Contribution (\$)
07/22/2024 Husbands, John	
	\$500.00
	ψ300.00
Conroe, TX 77304	
8         Principal occupation / Job title (See Instructions)         9         Employer (See Instructions)	
Insurance Soules Insurance Agency LP	
Date Full name of contributor out-of-state PAC (ID#:) Amou	unt of Contribution (\$)
08/18/2024 Hutson, Echo	\$40.00
Contributor address; City; State; Zip Code	
Conroe, TX 77301	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:) Amou	unt of Contribution (\$)
09/22/2024 Hyman, Joel	\$100.00
Contributor address; City; State; Zip Code	
The Woodlands, TX 77380	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Physician The Woodlands Dermatology As	ssociates
Date         Full name of contributor         out-of-state PAC (ID#:)         Amount	unt of Contribution (\$)
08/15/2024 JR's Custom BBQ & Catering	\$100.00
Contributor address; City; State; Zip Code	
Dobbin, TX 77333	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount	unt of Contribution (\$)
	unt of Contribution (\$) \$500.00
Date     Full name of contributor     out-of-state PAC (ID#:)     Amound       08/14/2024     Jackson, Kathy     Amound	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount       08/14/2024     Jackson, Kathy	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amou         08/14/2024       Jackson, Kathy       Contributor address; City; State; Zip Code	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount         08/14/2024       Jackson, Kathy       Contributor address; City; State; Zip Code       Amount         Livingston, TX 77399       Livingston, TX 77399       Amount	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of contributor address; City; State; Zip Code         08/14/2024       Jackson, Kathy       Contributor address; City; State; Zip Code       Amount of contributor address; City; State; Zip Code         Livingston, TX 77399       Employer (See Instructions)       Employer (See Instructions)	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount         08/14/2024       Jackson, Kathy       Contributor address; City; State; Zip Code       Amount         Livingston, TX 77399       Livingston, TX 77399       Amount	

The Instruc	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 13/28 Rpt: 17/69	
2 FILER NAME				2	Filer ID (Ethics Commissio	on Filers)
	am T. (The Honorable)			5	00069477	
4 Date	5 Full name of contributor out-of-state PA	PAC (ID#:	)	7	Amount of Contribution (\$)	
08/30/2024	Janjan, Nora					\$1,000.00
	6 Contributor address; City; State; Zip Code					
	Conroe, TX 77304					
8 Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
Retired			Retired			
Date	Full name of contributor out-of-state PA	PAC (ID#:	)		Amount of Contribution (\$)	
07/30/2024	Jones, Carolyn					\$100.00
	Contributor address; City; State; Zip Code					
	l					
	Montgomery, TX 77356					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
				,		
Date	Full name of contributor out-of-state P/	PAC (ID#:	)		Amount of Contribution (\$)	
09/18/2024	Kadlubar, Rhonda	AG (.2	,			\$100.00
	Contributor address; City; State; Zip Code					¥=00000
	Contributor address, City, State, Zip Code					
	l					
	Montgomery, TX 77356					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
Co-owner			Texas Home Rescuers/I	nv	estor	
Date	Full name of contributor out-of-state PA	PAC (ID#:	)		Amount of Contribution (\$)	
08/26/2024	Kasprzak, Lindsey	`			-	\$500.00
						·
	l					
	The Woodlands, TX 77382					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
Owner			Lone Star Local Guide			
Date	Full name of contributor out-of-state PA	PAC (ID#:	)		Amount of Contribution (\$)	
08/21/2024	Kate, Ann					\$40.00
	Contributor address; City; State; Zip Code					Ŧ
	Contributor address, City, State, Zip Code					
	l					
	Montgomery, TX 77356					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
Retired	,		Retired	,		
		I_				

	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 14/28 Rpt: 18/69	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		am T. (The Honorable)			00069477	
4	Date	5 Full name of contributor out-of-state PAC (IE	#:)	7	Amount of Contribution (\$)	
	08/15/2024	Kelton, Kerry				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
		College Station, TX 77845				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	CEO		MidSouth Electric Coop	era	tive	
	Date	Full name of contributor out-of-state PAC (IE		Γ	Amount of Contribution (\$)	
	08/01/2024				/	\$500.00
	00/01/2021			•		4000.00
	Contributor address; City; State; Zip Code					
		Houston, TX 77042				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> د)		
	i incipal occu			5)		
	Data			<u> </u>		
	Date		)#:)		Amount of Contribution (\$)	¢1 000 00
	08/15/2024					\$1,000.00
		Contributor address; City; State; Zip Code				
	Deine in all a servi	Willis, TX 77318				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Oil and Gas	Consultant	Self Employed	_		
	Date	Full name of contributor 🛛 out-of-state PAC (IE	#:)		Amount of Contribution (\$)	
	09/05/2024	Lake Conroe Area Republican Women PAC				\$1,000.00
		Contributor address; City; State; Zip Code		]		
		Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor 🔲 out-of-state PAC (IE	)#:)	Γ	Amount of Contribution (\$)	
	09/20/2024	Landes, Vinita				\$100.00
		Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 15/28 Rpt: 19/69	
2 FILER NAME			3 Filer ID (Ethics Commission	n Filers)
	iam T. (The Honorable)		00069477	
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)	
08/01/2024	Lennard, Lee			\$500.00
	6 Contributor address; City; State; Zip Code			
	Katy, TX 77450			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)	
08/08/2024	Linzer, Jo			\$100.00
	Contributor address; City; State; Zip Code			
	Conroe, TX 77301			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Attorney		Linzer & Gaines		
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
09/24/2024				\$40.00
	Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
-	pation / Job title (See Instructions)	Employer (See Instructions	š)	
Retired		Retired		
Date	Full name of contributor Out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
08/12/2024	Lynch, Craig			\$100.00
	Contributor address; City; State; Zip Code			
	Conroe, TX 77304			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>	
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
09/09/2024	Madeley, Albert			\$250.00
	Contributor address; City; State; Zip Code			
	Conroe, TX 77304			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Retired		Retired		
		•		

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	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/28 Rpt: 20/69	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
Ĺ		am T. (The Honorable)			5	00069477	51111013)
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/04/2024	Madeley, Margaret					\$2,500.00
		6 Contributor address; City; State; Zip Code					
		Conroe, TX 77301					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/23/2024	Mann, Reagan					\$500.00
		Contributor address; City; State					
		Montgomery, TX 77356					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Optometrist			Eyeland			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/26/2024	Manners, Michael					\$2,500.00
		Contributor address; City; State	; Zip Code				
		Conroe, TX 77303					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Realtor			Anglia Homes			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/11/2024	McGuire, David					\$2,500.00
		Contributor address; City; State					
		Houston, TX 77007					
	-	pation / Job title (See Instructions)		Employer (See Instructions			
	President/Cl	50		Pilot Financial Group LL	С		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/22/2024	McKinnon, Gail					\$100.00
		Contributor address; City; State	; Zip Code				
L		Montgomery, TX 77356					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Consultant			Creative Memories			

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 17/28 Rpt: 21/69
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	iam T. (The Honorable)		00069477
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
08/06/2024	McNabb, Connie		\$100.00
	6 Contributor address; City; State; Zip Code		1
	Montgomery, TX 77356		
Princinal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
Retired		Retired	)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/18/2024	Melder, Webb		\$500.00
00/10/202	Contributor address; City; State; Zip Code		
	Culturbulor dudress, City, State, Zip Code		
	Conroe, TX 77305		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired	· ·	Retired	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/06/2024	Metcalf, Mary Ann	,	\$2,500.00
•••••	Contributor address; City; State; Zip Code		• ,
	Conroe, TX 77305		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/06/2024	Metcalf III, Leo Thomas		\$2,140.00
	Contributor address; City; State; Zip Code		1
	Conroe, TX 77305		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/12/2024	Miller, Harold		\$250.00
	Contributor address; City; State; Zip Code		1
	Montgomery, TX 77356		
-	pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	

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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 18/28 Rpt: 22/69	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Metcalf, Will	iam T. (The Honorable)			00069477	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	07/29/2024	Milleson, Janet				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77316				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/06/2024	Mueller, Virginia				\$80.00
		Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/06/2024	Natale, Anita				\$100.00
		Contributor address; City; State; Zip Code		1		
		Conroe, TX 77304-3310				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	08/08/2024	O'Neil, Sharon				\$40.00
	I	Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356	1	<u> </u>		
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/16/2024	Olszowy, Sylvia				\$100.00
		Contributor address; City; State; Zip Code		]		
		Willis, TX 77318		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	Retired		Retired			

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The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/28 Rpt: 23/69	
2 FILER NAME				3	Filer ID (Ethics Commissio	n Filers)
	iam T. (The Honorable)				00069477	///////////////////////////////////////
4 Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
09/18/2024	Oughton, Nancy					\$100.00
	6 Contributor address; City; State	e; Zip Code				
	Willis, TX 77318					
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)	;)		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
08/05/2024	Page, Becky					\$1,000.00
	Contributor address; City; State					
Dringing oppu	Conroe, TX 77304		Employer (Cool Instructions			
Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions) Retired	;)		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
08/27/2024	Parsons, Carole	-				\$100.00
	Contributor address; City; State	e; Zip Code				
	Montgomery, TX 77356					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	;)		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
08/15/2024	Phelps, Alan					\$500.00
	Contributor address; City; State	e; Zip Code				
D incircl coord	Conroe, TX 77304					
Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions) Retired	;)		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
08/13/2024	Phillips 66 PAC					\$1,000.66
	Contributor address; City; State	; Zip Code				
	Washington, DC 20004					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	<b>;</b> )		
		I				

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/28 Rpt: 24/69	
2	FILER NAME			3	Filer ID (Ethics Commission	) Filers)
[		am T. (The Honorable)			00069477	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/16/2024	Porten, Linda				\$80.00
		6 Contributor address; City; State; Zip Code		"		
		Montgomery, TX 77356				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/08/2024	Price, Downey				\$100.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77304				
	•	pation / Job title (See Instructions)	Employer (See Instructions			
	Doctor		Houston Eye Associates	S		
	Date	Full name of contributor 🛛 out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/16/2024	Ramsey, Heather				\$40.00
		Contributor address; City; State; Zip Code		"		
		Houston, TX 77064				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/16/2024	Rathbun, Christina				\$250.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Retired		Retired	5)		
╞				<del></del>	A maximum of Constribution (ft)	
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢40.00
	07/22/2024	Richardson, Fred				\$40.00
		Contributor address; City; State; Zip Code				
		Willis, TX 77318				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Retired		Retired	-1		
⊢						

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 21/28 Rpt: 25/69
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	iam T. (The Honorable)		00069477
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
08/21/2024	Richardson, Fred		\$40.00
	6 Contributor address; City; State; Zip Code		
	Willis, TX 77318		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	2)
Retired		Retired	>)
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/06/2024	Roberds, Sandra		\$100.00
	Contributor address; City; State; Zip Code		
	Montgomery, TX 77316		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/14/2024	Roberson, Evan		\$500.00
	Contributor address; City; State; Zip Code		
	Conroe, TX 77304		
	ipation / Job title (See Instructions)	Employer (See Instructions	
Executive D	irector	Tri-County Behavioral H	lealthcare
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/20/2024	Ronsman, Ann		\$100.00
	Contributor address; City; State; Zip Code		
	Conroe, TX 77301		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
1 1110.ptd 0000			~,
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
07/26/2024	Rowland, Chris		\$2,500.00
	Contributor address; City; State; Zip Code		
	Midlothian, TX 76065		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	
Director of S	Sales and Marketing	AmeriTex Pipe and Proc	ducts

	The Instru	ction Guide explains how to co	mplete this fo	rm.	1	Total pages Schedule A1: Sch: 22/28 Rpt: 26/69	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		am T. (The Honorable)				00069477	,
4	Date	5 Full name of contributor 🗌 out-	of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/08/2024	Rural Friends of Electric Coopera	atives				\$2,500.00
		6 Contributor address; City; State; Zip	Code				
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	2	9 Employer (See Instructions	)		
	Date	Full name of contributor 🛛 out-	of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/17/2024	 Ryan, Jason					\$1,000.00
		Contributor address; City; State; Zip	Code				
		Houston, TX 77021					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Attorney			CenterPoint Energy			
	Date	Full name of contributor	of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/25/2024	Secrest, Sandra					\$100.00
		Contributor address; City; State; Zip	Code				
		Willis, TX 77378-4899					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
╞	Date	Full name of contributor	of-state PAC (ID#:	<b>`</b>		Amount of Contribution (\$)	
	08/14/2024	Seder, Michael					\$1,000.00
	00/1 //2021	Contributor address; City; State; Zip	Code				¢1,000100
		Contributor address, City, State, Zip	Code				
		The Woodlands, TX 77380					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Owner/Realt	or		Mike Seder Group, RE/M	٨N	X The Woodlands and Sp	ring
	Date	Full name of contributor out-	of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/23/2024	 Sequeira, Simon					\$2,500.00
		Contributor address; City; State; Zip	Code				
		Magnolia, TX 77354					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	President/CE	Đ		Quadvest Utility			

SCHEDULE	A1
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The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1:
2 FILER NAME	-		Sch: 23/28 Rpt: 27/69 3 Filer ID (Ethics Commission Filers)
	liam T. (The Honorable)		00069477
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
08/08/2024	Sheridan, Norman		\$100.0
	6 Contributor address; City; State; Zip Code		
	Montgomery, TX 77356		
8 Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions Retired	IS)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/12/2024	Signorelli, Daniel		\$1,500.0
	Contributor address; City; State; Zip Code		
Dringing and	The Woodlands, TX 77300		<u> </u>
Principal occu Principal	upation / Job title (See Instructions)	Employer (See Instructions The Signorelli Company	
	Full name of contributor Out-of-state PAC (ID#:		-
Date 07/22/2024	Full name of contributor out-of-state PAC (ID#: Stephenson, Mark	/	Amount of Contribution (\$) \$1,000.0
UIILLILUL .	Contributor address; City; State; Zip Code		
		ļ	
		ļ	
	Conroe, TX 77304		
	upation / Job title (See Instructions)	Employer (See Instructions	
Hospital Der		Dr Mark Stephenson DE	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/10/2024	Stokeley, Robin		\$250.0
	Contributor address; City; State; Zip Code	ļ	
	Conroe, TX 77301	ļ	
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	,
Owner		Champion Title Services	<u>کې</u>
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/15/2024	Swindler, Laura		\$100.0
	Contributor address; City; State; Zip Code		
		,	
	Conroe TX 77303-4117		
Principal occu	Conroe, TX 77303-4117	Emplover (See Instructions	[ <u>]</u>
Principal occu	Conroe, TX 77303-4117 upation / Job title (See Instructions)	Employer (See Instructions	ls)
Principal occu		Employer (See Instructions	ls)

······································		1 Total pages Schedule A1:	
tion Guide explains how to complete this fo	orm.	Sch: 24/28 Rpt: 28/69	
			on Filers)
· ·		00069477	
	)	7 Amount of Contribution (\$)	
Texas Forestry Association Forestry PAC			\$500.00
S Contributor address; City; State; Zip Code			
Lufkin, TX 75902-1488			
	9 Employer (See Instructions)	)	
Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
Texas Optometric PAC			\$1,000.00
Contributor address; City; State; Zip Code			
Austin TV 70705			
	Employer (See Instructions)		
ation / Job title (See Instructions)	Employer (See Instructions)		
Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
The American Electric Power Company Texas C	committee for		\$1,500.00
Contributor address; City; State; Zip Code			
Columbus, OH 43215			
ation / Job title (See Instructions)	Employer (See Instructions)		
Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
Full name of contributor out-of-state PAC (ID#: Underdown, Marie	)	Amount of Contribution (\$)	\$80.00
	)	Amount of Contribution (\$)	\$80.00
Underdown, Marie Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$80.00
Underdown, Marie Contributor address; City; State; Zip Code Conroe, TX 77304			\$80.00
Underdown, Marie Contributor address; City; State; Zip Code	) Employer (See Instructions) Retired		\$80.00
Underdown, Marie Contributor address; City; State; Zip Code Conroe, TX 77304 ation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:			
Underdown, Marie Contributor address; City; State; Zip Code Conroe, TX 77304 ation / Job title (See Instructions)		)	\$80.00
Underdown, Marie Contributor address; City; State; Zip Code Conroe, TX 77304 ation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:		)	
Underdown, Marie Contributor address; City; State; Zip Code Conroe, TX 77304 ation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:		)	
Underdown, Marie Contributor address; City; State; Zip Code Conroe, TX 77304 ation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Underwood, Marilyn Contributor address; City; State; Zip Code		Amount of Contribution (\$)	
	am T. (The Honorable) 5 Full name of contributor	am T. (The Honorable) 5 Full name of contributor	Sch: 24/28 Rpt: 28/69         am T. (The Honorable)         5 Full name of contributorout-of-state PAC (ID#:)         7 Amount of Contribution (\$)         7 Exas Forestry Association Forestry PAC         6 Contributor address; City; State; Zip Code         Lufkin, TX 75902-1488         pation / Job title (See Instructions)         9 Employer (See Instructions)         Full name of contributorout-of-state PAC (ID#:)         Amount of Contribution (\$)         Full name of contributorout-of-state PAC (ID#:)         Amount of Contribution (\$)         9 Employer (See Instructions)         Patter and the See Instructions)         9 Employer (See Instructions)         Full name of contributorout-of-state PAC (ID#:)         Amount of Contribution (\$)         Texas Optometric PAC         Contributor address; City; State; Zip Code         Austin, TX 78705         Patter an Electric Power Company Texas Committee for         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Columbus, OH 43215

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/28 Rpt: 29/69	
Ļ				Ļ	-	
Ĺ	FILER NAME Metcalf, Willi	am T. (The Honorable)		3	Filer ID (Ethics Commission 00069477	on Fliers)
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/06/2024	Union Pacific Corporation Fund for Effective Go				\$2,000.00
		6 Contributor address; City; State; Zip Code				
		Washington, DC 20005				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor X out-of-state PAC (ID#:	C00101766 )		Amount of Contribution (\$)	
	07/15/2024	United Airlines Inc PAC				\$750.00
		Contributor address; City; State; Zip Code				
		Chicago, IL 60606				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/09/2024	Urban, Mary Ann				\$500.00
		Contributor address; City; State; Zip Code Conroe, TX 77304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/03/2024	Vaught, Linda				\$1,000.00
		Contributor address; City; State; Zip Code Conroe, TX 77304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Retired		Retired			
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/20/2024	Walker, Kyle				\$500.00
		Contributor address; City; State; Zip Code				
L		Conroe, TX 77301				
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Wright Asphalt Products			

	The Instru	ction Guide explains how	1	Total pages Schedule A1: Sch: 26/28 Rpt: 30/69			
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)	
	Metcalf, Will	iam T. (The Honorable)		00069477			
4	Date	5 Full name of contributor	)	7	Amount of Contribution (\$)		
	07/23/2024	Walker Campaign, Robert					\$500.00
		6 Contributor address; City; St	tate; Zip Code				
		Pinehurst, TX 77362					
8		pation / Job title (See Instructions	<i>;</i> )	9 Employer (See Instructions	;)		
	Commission	er		Montgomery County			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	08/01/2024	Wantman, Kelly					\$500.00
		Contributor address; City; St					
		Wellington, FL 33414					
	Principal occu	pation / Job title (See Instructions	<i>i</i> )	Employer (See Instructions	;)		
L					_		
	Date	Full name of contributor	)	Γ	Amount of Contribution (\$)		
	09/23/2024	9/23/2024 Watson, Cherrie					\$100.00
		Contributor address; City; St					
			-				
	<u> </u>	The Woodlands, TX 7738		Ļ			
		pation / Job title (See Instructions	·)	Employer (See Instructions	;)		
	Retired	<del>.</del>		Retired	—		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	_
	08/29/2024	Weaver, Darla					\$250.00
		Contributor address; City; St					
$\vdash$	D i vizel essi	Montgomery, TX 77356		ŕ			
	Principal occupation / Job title (See Instructions) Employer (See Instruction						
		<del>.</del>			—		
	Date					Amount of Contribution (\$)	
	09/17/2024	Wells, Jason				\$1,000.00	
		Contributor address; City; St	ate; Zip Code				
		Lieuctor TV 77005					
	<u></u>	Houston, TX 77005		Ĺ			
	Principal occupation / Job title (See Instructions) Employer (See Instruction President						
L	President			CenterPoint Energy			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 27/28 Rpt: 31/69	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	iam T. (The Honorable)		00069477	
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)	
09/12/2024	Westlake, Janet			\$100.00
1	6 Contributor address; City; State; Zip Code			
	Willis, TX 77318-4493			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
08/19/2024	Whitney, Matt			\$250.00
	Contributor address; City; State; Zip Code			
	Conroe, TX 77304			
	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
Real Estate		Whitney & Associates		
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)	
08/27/2024	Wiesner, Cynthia			\$250.00
	Contributor address; City; State; Zip Code			
	Conroe, TX 77304			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)	
09/14/2024	Williamson, Jane			\$40.00
	Contributor address; City; State; Zip Code			
1				
'				
	Conroe, TX 77304		<u> </u>	
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<i>i</i> )	
Date	Full name of contributor Out-of-state PAC (ID#	 ŀ)	Amount of Contribution (\$)	
09/17/2024	Williamson, Joe			\$40.00
	Contributor address; City; State; Zip Code		1	
	Conroe, TX 77304			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
1				

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 28/28 Rpt: 32/69 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Metcalf, William T. (The Honorable) 00069477 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 08/06/2024 \$40.00 Woodall, Dorothy 6 Contributor address; City; State; Zip Code Montgomery, TX 77356 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) ) 09/06/2024 \$100.00 Wright, Jay Contributor address; City; State; Zip Code Conroe, TX 77301 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees     Office Overh       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense	ense Travel Out of District es/Contract Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	•	3 Filer ID (Ethics Commission Filers)					
1	Sch: 1/36 Rpt: 33/69	Metcalf, William T. (The Honorable)						
4	Date 07/25/2024	Payee name Amazon						
6	Amount (\$) \$161.20	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	2					
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Gift/Awards/Memorials Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Certificate folders for junior high Capitol field trip participants</li> </ul> </li> </ul>						
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date	Payee name						
	07/22/2024	Anedot						
	Amount (\$) \$1.86	Payee address; City; State; Zip Code PO Box 84314						
		Baton Rouge, LA 70884	-					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	<ul> <li>Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Campaign processing fees</li> </ul>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	07/22/2024	Anedot						
	Amount (\$) \$4.20	Payee address; City; State; Zip Code PO Box 84314	2					
		Baton Rouge, LA 70884						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (IFees	<ul> <li>Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Campaign processing fees</li> </ul>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sough	t Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 2/36 Rpt: 34/69		Metcalf, William T. (The Honorable) 00069477								
4	Date 07/22/2024	5	5 Payee name Anedot								
6	Amount (\$)	-									
0		ľ	7 Payee address; City; State; Zip Code								
	\$19.80		PO Box 84314								
			Baton Rouge, LA 70884								
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Campaign pr	OCE	essing tees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held			
	Date		Payee name								
	07/22/2024		Anedot								
	Amount (\$)			ille, Zip C	oue						
	\$19.80		PO Box 84314								
			Baton Rouge, LA 70884								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Fees	schedule)	(b)			ide of Texas. Complete Schedule T. , officeholder living expense			
						Campaign pr					
Complete <u>ONLY</u> if direct expenditure to benefit C/C			andidate/Officeholder name	Office so	ught			Office held			
	Date		Payee name								
	07/22/2024		Anedot								
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode						
	\$39.30		PO Box 84314	,							
	+00.00										
		Baton Rouge, LA 70884									
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Campaign pr	OCE	essing tees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           -         Gift/Awards/Memorials Expense         Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission Filers)	
-	Sch: 3/36 Rpt: 35/69	-	Metcalf, William T. (The Honorable) 00069477						
4	Date	5	Payee name						
	07/23/2024		Anedot						
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode				
	\$4.20		PO Box 84314						
			Baton Rouge, LA 70884						
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chodulo)	(b) De	escription			
	OF	ľ	Fees	chedule)			outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE							officeholder living expense	
					C	ampaign pro	oce	essing fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held	
	Date		Payee name						
	07/23/2024		Anedot						
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode				
	\$19.80		PO Box 84314						
			Baton Rouge, LA 70884						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Fees	chedule)	(b) De	4		de of Texas. Complete Schedule T.	
	-					ampaign pro		officeholder living expense	
						ampaign pro	JUE		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht			Office held	
expenditure to benefit C/O				Office Sol	igin				
-	Date	<u> </u>							
	07/25/2024		Payee name Anedot						
					-				
	Amount (\$)			e; Zip Co	bae				
	\$0.34		PO Box 84314						
Baton Rouge, LA 70884									
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	<b>(b)</b> De	escription			
	OF EXPENDITURE		Fees			_		de of Texas. Complete Schedule T.	
	EXPENDITORE							officeholder living expense	
						ampaign pro	oce	essing tees	
				- <i>11</i>	<u> </u>				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held	
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 4/36 Rpt: 36/69		Metcalf, William T. (The Honorable) 00069477								
4	Date	5	Payee name								
	07/25/2024		Anedot								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$97.80		PO Box 84314								
			Baton Rouge, LA 70884								
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	OF		Fees	icileudic)			outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE							, officeholder living expense			
						Campaign pr	oce	essing fees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held			
	Date		Payee name								
	07/26/2024		Anedot								
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode						
	\$97.80		PO Box 84314								
			Baton Rouge, LA 70884								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description	outoi	ide of Texas. Complete Schedule T.			
	EXPENDITURE	Fees						, officeholder living expense			
						Campaign pr	oce	essing fees			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held			
	expenditure to benefit C/OI	H									
	Date		Payee name								
	07/29/2024		Anedot								
-	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode						
	\$10.05		PO Box 84314	, <b>1</b>							
Baton Rouge, LA 70884											
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Campaign pr	UCE	essing lees			
	Osmalata Obli Milli "	L		0.41							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held			
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	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salaries/V	xpense Vages/Contract I	xpense Labor		Travel in District Travel Out of District	uipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 5/36 Rpt: 37/69		Metcalf, William T. (The Honorable)					00069477	, , , , , , , , , , , , , , , , , , ,	
4	Date	5	Payee name							
	08/05/2024		Anedot							
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode					
	\$39.30		PO Box 84314							
			Baton Rouge, LA 70884							
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	shodulo)	(b) Descrip	otion				
	OF		Fees	chedule)			utsic	de of Texas. Comp	lete Schedule T.	
	EXPENDITURE							officeholder living	expense	
					Campa	aign pro	ce	ssing fees		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office hel	d	
	Date		Payee name							
	08/06/2024		Anedot							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$4.20		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this set Fees	chedule)	(b) Descrip		utsic	de of Texas. Comp	lete Schedule T.	
	EXPENDITORE							officeholder living	expense	
					Campa	aign pro	ce	ssing fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office hel	d	
		1								
	Date		Payee name							
	08/08/2024		Anedot							
	Amount (\$)			e; Zip Co	ode					
	\$4.20		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE	(a)	Category (See Categories listed at the top of this set	chedule)	(b) Descrip	otion				
	OF EXPENDITURE		Fees					de of Texas. Comp		
	-							officeholder living essing fees	expense	
					Campo	ացուրւս		Soling IEES		
_	Complete ONLY if direct	Ľ	Candidata/Officabalder name	Office ce:	l			Office hel	d	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sou	ignit			Unice nel	u	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain:	Office Ov Polling Ex Printing E Salaries/V	Expense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · ·	Filer ID (Ethics Commission Filers)					
-	Sch: 6/36 Rpt: 38/69	2	Metcalf, William T. (The Honorable)	00069477					
4	Date	5	5 Payee name						
	08/08/2024		Anedot						
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode				
	\$4.20		PO Box 84314						
			Baton Rouge, LA 70884						
8	PURPOSE	(a)	-		(b) Description				
ľ	OF	("	Category (See Categories listed at the top of this set Fees	chedule)		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin,	, тх,	officeholder living expense		
					Campaign pro	oce	essing fees		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught		Office held		
	Date		Payee name						
	08/08/2024		Anedot						
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode				
	\$4.20		PO Box 84314	-,					
	+=0								
			Baton Rouge, LA 70884						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this se Fees	chedule)	Check if Austin,	, тх,	de of Texas. Complete Schedule T. officeholder living expense		
					Campaign pro	oce	essing fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught		Office held		
	Date		Payee name						
	08/08/2024		Anedot						
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode				
	\$97.80		PO Box 84314	o, <u>Lip</u> ot					
	¢01100								
			Baton Rouge, LA 70884						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this set	chedule)	(b) Description				
	EXPENDITURE		Fees				de of Texas. Complete Schedule T.		
							officeholder living expense		
					Campaign pro	JUE	Sound Ices		
				0.0	<u> </u>				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollir Gift/Awards/Memorials Expense Printi	Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense es/Wages/Contract Labor complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	-ER NAME	3	Filer ID (Ethics Commission Filers)						
	Sch: 7/36 Rpt: 39/69	etcalf, William T. (The Honorable)		00069477						
4	Date 08/09/2024	iyee name nedot								
6	5 Amount (\$)       7 Payee address; City; State; Zip Code         \$19.80       PO Box 84314         Baton Rouge, LA 70884									
8	<ul> <li>8 PURPOSE OF EXPENDITURE</li> <li>(a) Category (See Categories listed at the top of this schedule) Fees</li> <li>(b) Description         Check if travel outside of Texas. Complete Schedule T.     </li> <li>Check if Austin, TX, officeholder living expense Campaign processing fees</li> </ul>									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	didate/Officeholder name Office	sought	Office held						
	Date	yee name								
	08/13/2024	nedot								
	Amount (\$) \$97.80	iyee address; City; State; Zip D Box 84314 aton Rouge, LA 70884	Code							
	PURPOSE OF EXPENDITURE	tegory (See Categories listed at the top of this schedule)		tside of Texas. Complete Schedule T. X, officeholder living expense Cessing fees						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	didate/Officeholder name Office	sought	Office held						
	Date	yee name								
	08/14/2024	nedot								
	Amount (\$) \$19.80	yee address; City; State; Zip D Box 84314	Code							
		aton Rouge, LA 70884								
	PURPOSE OF EXPENDITURE	ttegory (See Categories listed at the top of this schedule)		tside of Texas. Complete Schedule T. X, officeholder living expense Cessing fees						
	Complete ONLY if direct expenditure to benefit C/OF	didate/Officeholder name Office	sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explain	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 8/36 Rpt: 40/69		Metcalf, William T. (The Honorable)					00069477			
4	Date	5	5 Payee name								
	08/15/2024		Anedot								
6	Amount (\$)	7	Payee address; City; Sta	te; Zip C	ode						
	\$97.80		PO Box 84314								
			Baton Rouge, LA 70884								
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description					
	OF EXPENDITURE		Fees	····,		Check if travel		ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Campaign pr	oce	essing tees			
_				o."	<u> </u>						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held			
	Date		Payee name								
	08/17/2024		Anedot								
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode						
	\$19.80		PO Box 84314								
			Baton Rouge, LA 70884								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description					
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T. , officeholder living expense			
						Campaign pr					
								3			
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held			
	expenditure to benefit C/OI	H									
	Date		Payee name								
	08/18/2024		Anedot								
-	Amount (\$)		Payee address; City; Sta	te; Zip C	ode						
	\$1.86		PO Box 84314	· ·							
			Baton Rouge, LA 70884								
	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description					
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Campaign pr	UCE	essing lees			
		Ļ		0#:							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 9/36 Rpt: 41/69	Metcalf, William T. (The Honorable)	00069477							
4	Date 08/19/2024	Payee name     Anedot								
6 Amount (\$)       7 Payee address;       City;       State;       Zip Code         \$4.20       PO Box 84314       Baton Rouge, LA 70884										
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Fees       (b) Description 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/19/2024	Anedot								
	Amount (\$) \$10.05	Payee address;City;State;Zip CodePO Box 84314								
		Baton Rouge, LA 70884								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DCESSING fEES							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/20/2024	Anedot								
	Amount (\$) \$4.20	Payee address; City; State; Zip Code PO Box 84314								
		Baton Rouge, LA 70884								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DCESSING feeS							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explair	Office Ov Polling Ex Printing E Salaries/	Expense Wages/Contract Labor	se	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)			
-	Sch: 10/36 Rpt: 42/69	-	Metcalf, William T. (The Honorable) 00069477							
4	Date 08/20/2024		5 Payee name Anedot							
_										
6	Amount (\$) \$4.20	ľ	Payee address; City; Sta PO Box 84314	te; Zip Co	ode					
	ψ4.20									
			Deter Dourse, LA 70004							
			Baton Rouge, LA 70884		1					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b) Description		ide of Tourse, Conservator, Cohendula, T			
	EXPENDITURE		Fees				ide of Texas. Complete Schedule T. X, officeholder living expense			
							essing fees			
						•	5			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	l ught		Office held			
	Date		Payee name							
	08/21/2024		Anedot							
_	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode					
	\$1.86		PO Box 84314							
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			Baton Rouge, LA 70884							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Fees	chedule)	Check if A	avel outs .ustin, TX	ide of Texas. Complete Schedule T. , officeholder living expense essing fees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought					Office held			
_	Date		Payee name							
	08/21/2024		Anedot							
	Amount (\$)			te; Zip Co	ode					
	\$1.86		PO Box 84314		oue					
	\$1.00									
			Baton Rouge, LA 70884							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b) Description					
	EXPENDITURE		Fees				side of Texas. Complete Schedule T.			
							x, officeholder living expense essing fees			
					Campaigi					
		Ļ	Condidate/Officeholder rame	Office	ucht .		Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	uyIII		Office held			
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	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Offic Pollii Print Sala	e Over ng Expe ting Exp ries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 11/36 Rpt: 43/69		Metcalf, William T. (The Honorable)	1				00069477		
4	Date	5	Payee name							
	08/23/2024	2024 Anedot								
6	Amount (\$)	7	Payee address; City; St	ate; Zip	Cod	e				
	\$97.80		PO Box 84314							
			Baton Rouge, LA 70884							
8	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(	b) Description				
	OF EXPENDITURE		Fees	, concurrently			outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						Campaign pi	OCE	essing fees		
						-				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	soug	ht		Office held		
	Date		Payee name							
	08/24/2024		Anedot							
	Amount (\$)		Payee address; City; St	ate; Zip	Cod	е				
	\$10.05		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	s schedule)	(	b) Description	outoi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Fees					, officeholder living expense		
						Campaign pi				
								5		
	Complete ONLY if direct		andidate/Officeholder name	Office	soug	ht		Office held		
	expenditure to benefit C/OI	H								
	Date		Payee name							
	08/26/2024		Anedot							
-	Amount (\$)		Payee address; City; St	ate; Zip	Cod	е				
	\$19.80		PO Box 84314	· ·						
			Baton Rouge, LA 70884							
	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(	b) Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Campaign pi	UCE	essing lees		
	Operation Operation	L		<i></i>		L-4				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	soug	nt		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	lains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			-	3	Filer ID (Ethics Commission Filers)		
-	Sch: 12/36 Rpt: 44/69	-	Metcalf, William T. (The Honorable) 00069477							
4	Date 08/26/2024	5	Payee name Anedot							
6		7		Stata:	Zip Co					
ľ	Amount (\$) \$97.80	ľ	Payee address; City; S PO Box 84314	siale,	Zip Cu	ie				
	φ97.00		PO B0x 04314							
			Baton Rouge, LA 70884							
8	PURPOSE	(a)	Category (See Categories listed at the top of th	his schee	dule)	<b>(b)</b> Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Campaign pr	UCE	essing lees		
_								0///		
9	Complete ONLY if direct expenditure to benefit C/OF		candidate/Officeholder name	O	ffice souç	nt		Office held		
	Date		Payee name							
	08/27/2024		Anedot							
				Stata:	Zip Co					
	Amount (\$)			state,	ZIP CO	ie				
	\$4.20		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE	(a)	Category (See Categories listed at the top of th	his sche	dule)	(b) Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Campaign pr	oce	essing fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht		Office held		
	Date		Payee name							
	08/27/2024		Anedot							
	Amount (\$)		Payee address; City; S	State;	Zip Co	le				
	\$10.05		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE	(a)	Category (See Categories listed at the top of th	his sche	dule)	(b) Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						Campaign pr	oce	essing fees		
	Complete ONLY if direct		andidate/Officeholder name	Of	ffice souç	ht		Office held		
	expenditure to benefit C/OI	1								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office O Polling E Printing Salaries	Verhea Expens Exper Wage	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 13/36 Rpt: 45/69		letcalf, William T. (The Honorable) 00069477							
4	Date	5	Payee name							
	08/28/2024		Anedot							
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip C	Code					
	\$39.30		PO Box 84314							
			Baton Rouge, LA 70884							
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Fees	,				ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Campaign pr	OCE	essing tees		
_				<u> </u>						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	bught			Office held		
	Date		Payee name							
	08/28/2024		Anedot							
	Amount (\$)		Payee address; City; Sta	ate; Zip C	Code					
	\$49.05		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description	outoi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Fees					, officeholder living expense		
						Campaign pr				
						1 0 1		5		
	Complete ONLY if direct		andidate/Officeholder name	Office so	ught			Office held		
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	08/29/2024		Anedot							
-	Amount (\$)		Payee address; City; Sta	ate; Zip C	Code					
	\$10.05		PO Box 84314	<i>·</i>						
			Baton Rouge, LA 70884							
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Campaign pr	UCE	ESSING IEES		
		Ľ	andidata/Office holder parts	Office				Office hold		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ougnt			Office held		
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	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	lains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			-	3	Filer ID (Ethics Commission Filers)		
-	Sch: 14/36 Rpt: 46/69	-	Metcalf, William T. (The Honorable							
4	Date	5	Payee name							
	08/30/2024	30/2024 Anedot								
6	Amount (\$)	7	Payee address; City; S	State;	Zip Co	le				
	\$39.30		PO Box 84314							
			Baton Rouge, LA 70884							
8	PURPOSE	(a)	Category (See Categories listed at the top of the	his sche	edule)	(b) Description				
	OF EXPENDITURE	[``	Fees		Julie)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						Campaign pr	006	essing fees		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	O	office souç	ht		Office held		
	Date		Payee name							
	09/02/2024		Anedot							
	Amount (\$)		Payee address; City; S	State;	Zip Co	le				
	\$1.86		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Fees	his sche	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Campaign pr	OCE	essing lees		
	Complete ONLV if direct		andidate/Officeholder name		office soug	bt		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		anduate/Oncenduel name	0	nice sout	in t		Onice field		
_	Date		Payee name							
	09/04/2024		Anedot							
	Amount (\$)			State:	Zip Co					
	\$39.30		PO Box 84314	State,	Zip Cot					
	439.30									
			Baton Rouge, LA 70884							
	PURPOSE	(a)	Category (See Categories listed at the top of the	his sche	edule)	(b) Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
								officeholder living expense		
						Campaign pr	UCE	ESSING IEES		
	Complete ONUV 5 diversit	Ĺ	opdidoto/Officebalder acres	~	ffier	ht		Office hold		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	office soug	m		Office held		
	-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 15/36 Rpt: 47/69		Metcalf, William T. (The Honorable)	00069477							
4	Date	5	Payee name								
	09/04/2024		Anedot								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$97.80		PO Box 84314								
			Baton Rouge, LA 70884								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b) Description						
	OF	Ľ	Fees	ieuuie)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE						officeholder living expense				
					Campaign pr	oce	essing fees				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name (	Office sou	ght		Office held				
	Date		Payee name								
	09/05/2024		Anedot								
	Amount (\$)		Payee address; City; State	; Zip Co	de						
	\$97.80		PO Box 84314	· •							
			Baton Rouge, LA 70884								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Fees	nedule)			de of Texas. Complete Schedule T. officeholder living expense				
					Campaign pr	oce	essing fees				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name 0	Office sou	ght		Office held				
	Date		Payee name								
	09/06/2024		Anedot								
	Amount (\$)		Payee address; City; State	; Zip Co	de						
	\$3.42		PO Box 84314								
			Baton Rouge, LA 70884								
	PURPOSE OF		Category (See Categories listed at the top of this sch	nedule)	(b) Description						
	EXPENDITURE		Fees				de of Texas. Complete Schedule T. officeholder living expense				
					Campaign pr						
					espaigit pi						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght		Office held				
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	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explair	Office Ov Polling E Printing E Salaries/	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 16/36 Rpt: 48/69		Metcalf, William T. (The Honorable)	00069477							
4	Date	5	5 Payee name								
	09/06/2024		Anedot								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$4.20		PO Box 84314								
			Baton Rouge, LA 70884								
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	OF	Ľ	Fees	criedule)	Ľ		outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense			
						Campaign pr	oce	essing fees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held			
	Date		Payee name								
	09/06/2024		Anedot								
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode						
	\$19.80		PO Box 84314	, <b>1</b>							
			Baton Rouge, LA 70884								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description	outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE		Fees					officeholder living expense			
						Campaign pr	oce	essing fees			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held			
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	09/09/2024		Anedot								
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode						
	\$3.42		PO Box 84314	, [							
			Baton Rouge, LA 70884								
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	OF EXPENDITURE		Fees					de of Texas. Complete Schedule T.			
								officeholder living expense			
						Campaign pr	UCE	essing ides			
	Complete ONUM Station	Ĺ		0							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held			

			EXPENDITURE CATEG	ORIES F	OR B	8OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office ( Polling Printing Salarie	Dverhe Expen J Exper s/Wage	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)				
	Sch: 17/36 Rpt: 49/69		Metcalf, William T. (The Honorable)					00069477
4	Date	5	Payee name					
	09/09/2024		Anedot					
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip (	Code			
	\$10.05		PO Box 84314					
			Baton Rouge, LA 70884					
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b	) Description		
	OF EXPENDITURE		Fees	Seriedule)			outsi	de of Texas. Complete Schedule T.
	EXPENDITORE							officeholder living expense
						Campaign pr	oce	essing fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ough	t		Office held
	Date		Payee name					
	09/11/2024		Anedot					
	Amount (\$)		Payee address; City; Sta	ate; Zip (	Code			
	\$10.05		PO Box 84314					
			Baton Rouge, LA 70884					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Fees	schedule)	(b		ı, ТХ,	de of Texas. Complete Schedule T. , officeholder living expense essing fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ough	t		Office held
	Date		Payee name					
	09/11/2024		Anedot					
	Amount (\$)		Payee address; City; Sta	ate; Zip (	Code			
	\$97.80		PO Box 84314					
			Baton Rouge, LA 70884					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b	) Description		
	EXPENDITURE		Fees					de of Texas. Complete Schedule T. officeholder living expense
						Campaign pr		
						Sampaign pi	500	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ough	t		Office held
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		EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Odd/Beverage Expense Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 18/36 Rpt: 50/69	Metcalf, William T. (The Honorable)	00069477							
4	Date 09/14/2024	Payee name Anedot								
6	Amount (\$) 7 Payee address; City; State; Zip Code \$1.86 PO Box 84314 Baton Rouge, LA 70884									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule)       (b) Description         Image: Check if Check if Check if Check if Check if Check if Austin, TX, officeholder living expense Campaign processing fees       Check if Austin, TX, officeholder living expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/14/2024	Anedot								
	Amount (\$) \$4.20	Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description Check if travel Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense OCESSING fEES							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/14/2024	Anedot								
	Amount (\$) \$19.80	Payee address;     City;     State;     Zip Code       PO Box 84314								
		Baton Rouge, LA 70884								
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense OCESSING fEES							
ļ	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

		EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 19/36 Rpt: 51/69	Metcalf, William T. (The Honorable)	00069477					
4	Date	5 Payee name						
	09/16/2024	Anedot						
6 Amount (\$) 7 Payee address; City; State; Zip Code \$1.86 PO Box 84314 Baton Rouge, LA 70884								
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         Campaign processing fees								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/17/2024	Anedot						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1.86	PO Box 84314 Baton Rouge, LA 70884						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DCESSING fEES					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/17/2024	Anedot						
	Amount (\$) \$39.30	Payee address; City; State; Zip Code PO Box 84314						
		Baton Rouge, LA 70884						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DCESSING feeS					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

			EXPENDITURE CATEGO	ORIES FO	r BO	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Trar           Food/Beverage Expense         Polling Expense         Trat           / -         Gift/Awards/Memorials Expense         Printing Expense         Trat						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 20/36 Rpt: 52/69		Metcalf, William T. (The Honorable)					00069477		
4	Date	5	Payee name							
	09/17/2024		Anedot							
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode					
	\$39.30		PO Box 84314							
			Baton Rouge, LA 70884							
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Fees	,	]	Check if travel of		de of Texas. Complete Schedule T.		
					] [			officeholder living expense		
						Campaign pro	oce	essing tees		
_				o."				01111		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held		
	Date		Payee name							
	09/17/2024		Anedot							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$39.30		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description	outoi	de ef Teuros, Complete Cabadula T		
	EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
						 Campaign pro				
								-		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held		
	expenditure to benefit C/OF	H								
	Date		Payee name							
	09/18/2024		Anedot							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$4.20		PO Box 84314							
			Baton Rouge, LA 70884							
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Fees		ļ			de of Texas. Complete Schedule T.		
	-					Campaign pro		officeholder living expense		
						campaign ph		2001 IY IEE0		
_	Complete ONIL V if direct	Ľ	Candidate/Officeholder pame	Office co:	ught			Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sou	iynt			Unice neid		
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		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitt/Awards/Memorials Expense     Printing Expense       smmittee     Legal Services       Salaries/Wages/Contract Labor       The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
	Sch: 21/36 Rpt: 53/69	Metcalf, William T. (The Honorable)	00069477						
4	Date 09/22/2024	Payee name Anedot							
6 Amount (\$)       7 Payee address; City; State; Zip Code         \$4.20       PO Box 84314         Baton Rouge, LA 70884									
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DCESSING feeS						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/23/2024	Anedot							
	Amount (\$) \$4.20	Payee address; City; State; Zip Code PO Box 84314							
	DUDDOOF	Baton Rouge, LA 70884							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DCESSING fEES						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/23/2024	Anedot							
	Amount (\$) \$4.20	Payee address;     City;     State;     Zip     Code       PO Box 84314							
		Baton Rouge, LA 70884							
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Fees       (b) Description         Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign processing fees									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

			EXPENDITURE CA	TEGOR	RIES FOR I	3OX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens mittee Legal Services The Instruction Guide ex		Office Overh Polling Exper Printing Expe Salaries/Wag	ense Jes/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 22/36 Rpt: 54/69		Metcalf, William T. (The Honorab	ole)				00069477	
4	Date	5	Payee name						
	09/25/2024		Anedot						
6	Amount (\$)	7	Payee address; City;	State;	Zip Code	9			
\$1.86 PO Box 84314									
			Baton Rouge, LA 70884						
8	PURPOSE		_			) Description			
	OF		Category (See Categories listed at the top o	of this sche	edule)		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE					Check if Austin	, тх,	officeholder living expense	
						Campaign pr	oce	essing fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	ffice sough	t		Office held	
	Date		Payee name						
	09/24/2024		Anedot						
	Amount (\$)		Payee address; City;	State <sup>.</sup>	Zip Code	2			
	\$1.86		PO Box 84314	olulo,					
	ψ1.00		0 000 04314						
			Baton Rouge, LA 70884						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top o	f this sche	edule) (k		, тх,	de of Texas. Complete Schedule T. officeholder living expense essing fees	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	I Iffice sough	it		Office held	
	Date		Payee name						
	08/28/2024		Apricity Foundation						
	Amount (\$)		Payee address; City;	State <sup>.</sup>	Zip Code	<u>,                                     </u>			
	\$1,500.00		2257 N Loop 336 W	State,		, ,			
	Φ1,000.00								
		I	Suite 140						
			Conroe, TX 77304						
	PURPOSE OF		Category (See Categories listed at the top o		edule) (k	Description			
	EXPENDITURE		Contributions/Donations Made B					de of Texas. Complete Schedule T.	
			Candidate/Officeholder/Political (	Commi	ittee	Donation for		officeholder living expense	
							yali	u	
		Ĺ	andidata (Office held						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	office sough	IL		Office held	

			EXPENDITURE CATEO	GORIES FO	R BC	OX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services	rage Expense Office Overhead/Rental I Polling Expense Printing Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission File	ers)
	Sch: 23/36 Rpt: 55/69		Metcalf, William T. (The Honorable)					00069477	
4	Date	5	Payee name						
	07/10/2024		Better Bookkeepers, Inc.						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode				
	\$162.50		19221 I-45 South						
			Ste 250						
			The Woodlands, TX 77385						
8	PURPOSE	(a)			(h)	Description			
Ŭ	OF	("	Category (See Categories listed at the top of this Accounting/Banking	schedule)	(5)	·	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		/ coounting/Banking					, officeholder living expense	
						Campaign ac	COL	unting service	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office held	
	Date		Payee name						
	08/02/2024		Better Bookkeepers, Inc.						
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode				
	\$487.50		19221 I-45 South						
			Ste 250						
			The Woodlands, TX 77385						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Accounting/Banking				outsi	ide of Texas. Complete Schedule T.	
	EXPENDITORE							, officeholder living expense	
						Campaign ac	COL	unting service	
			San di data (Office la alder record	0#100.001					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	igni			Office held	
	Date		Payee name						
	08/05/2024		Conroe Noon Lions Club						
-	Amount (\$)	-		ate; Zip Co	ahe				
	\$1,000.00		1106 Wilson Rd	uie, zip Cl	Jue				
	φ1,000.00								
			Conroe, TX 77301		-				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	EXPENDITURE		Contributions/Donations Made By	a valitta a				ide of Texas. Complete Schedule T. , officeholder living expense	
			Candidate/Officeholder/Political Cor	nmillee				sponsorships for year	
							J GL		
	Complete ONLY if direct	Ļ	Candidate/Officeholder name	Office sou	l Iaht			Office held	
	expenditure to benefit C/OI			Cince 300	gin				

			EXPENDITURE CATEGORIES	FOR B	OX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Offic Food/Beverage Expense Polli Gift/Awards/Memorials Expense Print	ice Overhea Iling Expens nting Expens laries/Wages	se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 24/36 Rpt: 56/69		Metcalf, William T. (The Honorable)			-	00069477			
4	Date 08/05/2024	5	Payee name Conroe Professional Firefighters Association	on						
6	Amount (\$)	7	Payee address; City; State; Zip	n Code						
	\$1,000.00 PO Box 306 Conroe, TX 77305									
•	DUDDOSE	(2)	Catagoni	(h)	Decerintien					
8       PURPOSE         OF       Contributions/Donations Made By         Candidate/Officeholder/Political Committee       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         Fire Up the Bands sponsorship							officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office	e sought			Office held			
	Date		Payee name							
	07/30/2024		Conroe Tiger Baseball Booster Club							
	Amount (\$)		Payee address; City; State; Zip	p Code						
	\$500.00 3205 W Davis St Conroe, TX 77304									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense	<sup>.)</sup> (b)	Check if Austin,	TX,	le of Texas. Complete Schedule T. officeholder living expense a advertisement			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	e sought			Office held			
-	Date		Payee name							
	07/08/2024		Constant Contact							
	Amount (\$)	-	Payee address; City; State; Zip	n Code						
	\$55.43		1601 Trapelo Road	p couc						
			Waltham, ME 02451							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<sup>.)</sup> (b)	Check if Austin,	ΤX,	le of Texas. Complete Schedule T. officeholder living expense tion for e-newsletter platform			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	e sought			Office held			

			EXPENDITURE CATEGOR	IES FOR	BOX 8(a)			Π
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	3	Filer ID (Ethics Commission Filers)	-		
	Sch: 25/36 Rpt: 57/69		Metcalf, William T. (The Honorable)				00069477	
4	Date 08/08/2024		Payee name Constant Contact					
6	Amount (\$) \$55.43		Payee address; City; State; 1601 Trapelo Road Waltham, ME 02451	Zip Coo	le			
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if Austin, TX, officeholder living expense Monthly subscription for e-newsletter platform								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	ht		Office held	
	Date		Payee name					
	09/08/2024		Constant Contact					
	Amount (\$) \$55.43		Payee address; City; State; 1601 Trapelo Road	Zip Coo	le			
	PURPOSE		Waltham, ME 02451		(b) Description			_
	OF		Category (See Categories listed at the top of this schere Office Overhead/Rental Expense	dule)	Check if travel	n, TX,	side of Texas. Complete Schedule T. K, officeholder living expense Iption for e-newsletter platform	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	ht		Office held	
	Date		Payee name					7
	09/24/2024		FedEx					
	Amount (\$) \$38.43		Payee address; City; State; 1304 W Davis St Suite I Conroe, TX 77304	Zip Coo	le			_
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schere Printing Expense	dule)		n, TX,	side of Texas. Complete Schedule T. officeholder living expense<br gn materials	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	ht		Office held	

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reinbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 26/36 Rpt: 58/69	Metcalf, William T. (The Honorable)	00069477				
4	Date 07/01/2024	Payee name Google					
6	Amount (\$) \$61.40	<ul> <li>Payee address; City; State; Zip Code</li> <li>1600 Amphitheatre Parkway</li> <li>Mountain View, CA 94043</li> </ul>					
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description         Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign cloud storage							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	08/01/2024	Google					
	Amount (\$) \$61.40	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Oud storage				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	09/01/2024	Google					
	Amount (\$) \$61.40	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway					
		Mountain View, CA 94043					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense oud storage				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

			EXPENDITURE CA	ATEGO	RIES FOR	вс	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper nmittee Legal Services The Instruction Guide 6		Office Over Polling Exp Printing Ex Salaries/W	rheac pense pens ages	e /Contract Labor		Transportation E Travel in District Travel Out of Di	
1	Total pages Schedule F1:	2 FILER NAME 3 H						Filer ID	(Ethics Commission Filers)	
-	Sch: 27/36 Rpt: 59/69		Metcalf, William T. (The Honora	ble)					00069477	
4	Date	5	Payee name							
	07/22/2024		Henry, Sarah							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de				
	\$2,000.00		510 Malone St							
			Tomball, TX 77375							
8	PURPOSE	<u> </u>				(h)	Description			
°	OF	(a)	Category (See Categories listed at the top Salaries/Wages/Contract Labor	of this sch	nedule)	(D)	Description	outsi	de of Texas. Com	nplete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor						officeholder living	
							Employee bo	nus	S	
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	(	Office sou	ght			Office h	eld
	Date		Payee name							
	08/01/2024		Houston Keys, LLC							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$1,375.00		24510 Rozzano Ct	State	, zip cot	ac				
	φ1,575.00		24510 R022a10 Ct							
			Richmond, TX 77406							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Event Expense	of this sch	nedule)	(b)		, тх,	officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(	Office sou	ght			Office h	eld
	Date		Payee name							
	08/01/2024		Legislative Solutions							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$350.00		807 Brazos St	otato	, <u>_</u> p oo					
	\$000.00		#714							
			Austin, TX 78701							
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Advertising Expense							nplete Schedule T.
									officeholder living	
							Campaign en	ııdll	านเริ่มเม่นแบบ	I
	0				o.""					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office h	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee	EXPENDITUR Event Expense Fees God/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	e Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense pense /ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)	
-	Sch: 28/36 Rpt: 60/69	I		iam T. (The Hor	norable)			ľ	00069477		
4	Date	5	Payee name								
	08/12/2024		Legislative S	Solutions							
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de				
	\$350.00		807 Brazos	St							
	#714										
				0701							
		<u> </u>	Austin, TX 7	8701							
8	PURPOSE	(a) (	Category (Se	e Categories listed at th	e top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		Advertising	Expense					ide of Texas. Com		
									, officeholder living	j expense	
							Campaign e	mai	I distribution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	C	Office sou	ght		Office he	eld	
	Date		Payee name								
	07/07/2024		Mailchimp								
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de				
	\$41.57			le Leon Ave NE		,p ee					
	φ41.07										
			Suite 5000								
		/	Atlanta, GA	30308							
	PURPOSE	(a) (	Category (Se	e Categories listed at th	e top of this sch	nedule)	(b) Description				
	OF		Advertising			,		l outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		Check if Austin, TX, officeholder living expense							j expense	
							Campaign e	mai	l platform		
	Complete ONLY if direct	C	andidate/Offic	eholder name	(	Office sou	ght		Office he	eld	
	expenditure to benefit C/OI	Н									
_	Data										
	Date		Payee name								
	08/07/2024		Mailchimp								
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de				
	\$41.57	(	675 Ponce o	le Leon Ave NE							
		:	Suite 5000								
			Atlanta, GA	30308							
	BUBBAAE						<u> </u>				
	PURPOSE OF			e Categories listed at th	e top of this sch	nedule)	(b) Description				
	EXPENDITURE	'	Advertising	Expense					ide of Texas. Com , officeholder living		
										Jexpense	
							Campaign e	mal	ιριατιστη		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	eholder name	C	Office sou	ght		Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment										quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)
	Sch: 29/36 Rpt: 61/69		Metcalf, Wi	lliam T. (T	he Honorable)					00069477	
4	Date	5	Payee name	•							
	09/07/2024		Mailchimp								
6	Amount (\$)	7	Payee addre	ess; Cit	y; Sta	ite; Zip Co	ode				
	\$41.57		675 Ponce	de Leon A	Ave NE						
			Suite 5000								
			Atlanta, GA	30308							
8	PURPOSE	(a)	Category (		listed at the top of this	cobodulo)	(b)	Description			
-	OF		Advertising			schedule)			outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		0							officeholder living	j expense
								Campaign er	nail	platform	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder n	ame	Office sou	ught			Office h	eld
	Date		Payee name								
	09/25/2024		Matt Shahe	en Camp	aign						
	Amount (\$)		Payee addre	ess; Cit	y; Sta	te; Zip Co	ode				
	\$3,000.00										
		Room E1.320									
			Austin, TX								
_	PURPOSE	(a)					(h)	Description			
	OF	(4)			listed at the top of this sons Made By	schedule)	(5)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE				ler/Political Corr	nmittee		Check if Austin	, TX,	officeholder living	g expense
								Donation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder n	ame	Office sou	ught			Office h	eld
	experiorative to benefit C/O										
	Date		Payee name	!							
	09/26/2024		Meals on V	Vheels of I	Montgomery Co	ounty					
	Amount (\$)		Payee addre	ess; Cit	y; Sta	ite; Zip Co	ode				
	\$1,000.00		111 S 2nd	St							
			Conroe, TX	77301			_				
	PURPOSE	(a)	Category (S	ee Categories	listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE				ons Made By						plete Schedule T.
			Candidate/	Officenoid	ler/Political Com	imittee		Donation	, IX,	officeholder living	j expense
								Donation			
-	Complete ONLY if direct	L,	Candidate/Off	iceholder n	ame	Office sou				Office h	ald
	expenditure to benefit C/OI		Sanuluale/Ull			Unice SUL	ayın			Unice II	Ju

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 F	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 30/36 Rpt: 62/69	I	Metcalf, William T. (The Honorable)				00069477	
4	Date 07/26/2024		Payee name Aicrosoft					
6	Amount (\$) \$75.76		Payee address; City; State; Dne Microsoft Way Redmond, WA 98052	Zip Cod	e			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this scher Office Overhead/Rental Expense	dule) (	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense are subscription	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	nt		Office held	
	Date	F	Payee name					
	08/16/2024	l r	Montgomery County Republican Party					
	Amount (\$) \$1,000.00	F	PO Box 45	Zip Cod	9			
			Conroe, TX 77305					
	PURPOSE OF EXPENDITURE	(	Category (See Categories listed at the top of this schere Contributions/Donations Made By Candidate/Officeholder/Political Commit			, тх,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	nt		Office held	
	Date	F	Payee name					
	07/31/2024	l r	Montgomery ISD Education Foundation	1				
	Amount (\$) \$1,000.00	I	Payee address; City; State; 20774 Eva St	Zip Cod	e			
		r	Montgomery, TX 77356					
	PURPOSE OF EXPENDITURE	(	Category (See Categories listed at the top of this schere Contributions/Donations Made By Candidate/Officeholder/Political Commit			, TX,	de of Texas. Complete Schedule T. officeholder living expense DNSORShip	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	nt		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committ Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex nmittee Legal Services The Instruction Guid	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2				<b>P</b> • • • • • • • • • • • • • • • • • • •	3	Filer ID (Ethics Commission Filers)	
1	Sch: 31/36 Rpt: 63/69	2	Metcalf, William T. (The Hond	orable)				00069477	
4	Date	5	Payee name						
	07/24/2024		Neal, Theresa						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	de			
	\$682.50		2204 Indian Trail						
			Austin, TX 78703						
8	PURPOSE	(a)	Category (See Categories listed at the	top of this och	odulo)	(b) Description			
Ū	OF	(,	Advertising Expense	top of this sch	iedule)		outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE					Check if Austir	n, TX	a, officeholder living expense	
						Graphic desi	gn	work	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office soug	Jht		Office held	
	Date		Payee name						
	08/20/2024		Office Depot						
	Amount (\$)		Payee address; City;	State;	; Zip Coo	de			
	\$107.68		1319 W Davis St						
			Conroe, TX 77304						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Office Overhead/Rental Expe		edule)			ide of Texas. Complete Schedule T.	
						District office		, officeholder living expense Ipplies	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	C	Dffice soug	jht		Office held	
	Date		Payee name						
	09/03/2024		Office Depot						
	Amount (\$)		Payee address; City;	State:	; Zip Coo	de			
	\$173.19		1319 W Davis St	,	, 1				
			Conroe, TX 77304						
	PURPOSE OF	(a)	Category (See Categories listed at the		edule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expe	nse				ide of Texas. Complete Schedule T. X, officeholder living expense	
						District office			
						2.00.00000000	50		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	yht		Office held	
⊢									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense al Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FI		•		•	3	Filer ID (Ethics Commission Filers)	
-	Sch: 32/36 Rpt: 64/69		etcalf, William T. (The Hond	orable)			ľ	00069477	
4	Date 07/30/2024		ayee name beed Printing						
_					7. 0				
6	Amount (\$) \$168.24		ayee address; City; L05 W Dallas St	State;	; Zip Coo	e			
		с	onroe, TX 77301						
8	PURPOSE	<b>(a)</b> C	ategory (See Categories listed at the	top of this sche	edule)	b) Description			
	OF EXPENDITURE		rinting Expense					ide of Texas. Complete Schedule T.	
								, officeholder living expense	
						Campaign pr	mu	ng	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		ndidate/Officeholder name	C	Office soug	ht		Office held	
	Date	Pi	ayee name						
	07/11/2024		peed Printing						
			5	Stato:	Zin Cor	0			
	\$99.45	1.	L05 W Dallas St						
		С	onroe, TX 77301						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the rinting Expense	top of this sch	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense ng	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office held	
	Date	Pa	ayee name						
	08/01/2024	S	beed Printing						
	Amount (\$)	Pa	ayee address; City;	State;	; Zip Coo	е			
	\$65.00	1:	L05 W Dallas St						
		С	onroe, TX 77301						
	PURPOSE OF	<b>(a)</b> C	ategory (See Categories listed at the	top of this sch	edule)	b) Description			
	EXPENDITURE	Р	rinting Expense					ide of Texas. Complete Schedule T.	
								, officeholder living expense	
						Campaign pr	mu	ну	
	0								
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 33/36 Rpt: 65/69		Metcalf, William T. (The Honorable)				00069477		
4	Date	5	Payee name						
	07/17/2024		Speed Printing						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$47.50		1105 W Dallas St						
			Conroe, TX 77301						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dulo)	(b) Description				
-	OF		Printing Expense	uule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austir	, TX	, officeholder living expense		
					Campaign pr	inti	ng		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	ffice sou	lht		Office held		
	Date		Payee name						
	07/25/2024		Speed Printing						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$2.00 1105 W Dallas St								
			Conroe, TX 77301						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	EXPENDITURE		Printing Expense				ide of Texas. Complete Schedule T. , officeholder living expense		
					Campaign pr				
					Campaign pi				
_	Complete ONLY if direct		candidate/Officeholder name O	ffice sou	iht		Office held		
	expenditure to benefit C/OI			1100 300	jiit				
-	Data	1	<b>D</b>						
	Date 07/23/2024		Payee name Texas Young Republicans						
	Amount (\$)			Zip Co	le				
	\$1,000.00		PO Box 1885						
			Conroe, TX 77305						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Commi	ittee			, officeholder living expense		
					2024 CONVEN	uUſ	n sponsorship		
	Complete ONUM Station	Ļ	and data (Office helder a second	<i>4</i>	- la 4				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name O	ffice sou	Inc		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel in District Travel Out of District OTHER (enter a category not listed above)	e	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Fi	lers)	
_	Sch: 34/36 Rpt: 66/69		Metcalf, William T. (The Honorable) 00069477							
4	Date	5	Payee name							
	07/01/2024		The Roku Channel							
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	de					
	\$6.48		1173 Coleman Ave							
			San Jose, CA 95110							
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	,				de of Texas. Complete Schedule T.		
								officeholder living expense		
						Office IV stre	ean	ning subscription		
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ght			Office held		
	Date		Payee name							
	08/01/2024		The Roku Channel							
Amount (\$) Payee address; City; State; Zip Code										
	\$6.48 1173 Coleman Ave									
			San Jose, CA 95110							
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T. officeholder living expense		
								ning subscription		
							Jun			
	Complete ONLY if direct		andidate/Officeholder name	Office sou	aht			Office held		
	expenditure to benefit C/OI			0	9					
-	Date		Payee name							
	09/01/2024		The Roku Channel							
	Amount (\$)			e; Zip Co	do					
	\$6.48	I	1173 Coleman Ave	c, zip co	uc					
	φ0.40									
			San Jose, CA 95110							
	PURPOSE OF		Category (See Categories listed at the top of this so	chedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T. officeholder living expense		
								ning subscription		
						2				
-	Complete ONLY if direct	<u></u>	andidate/Officeholder name	Office sou	aht			Office held		
	expenditure to benefit C/Oł			51100 500	9					
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	2 FILER NAME 3	B Filer ID (Ethics Commission Filers)						
	Sch: 35/36 Rpt: 67/69	Metcalf, William T. (The Honorable)	00069477						
4	Date 09/03/2024	5 Payee name The Woodlands Firefighters Foundation							
6	Amount (\$) \$500.00	<ul> <li>Payee address; City; State; Zip Code</li> <li>16135 IH 45 South</li> <li>The Woodlands, TX 77385</li> </ul>							
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense Indraiser						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought H	Office held						
	Date	Payee name							
	07/23/2024	US Postal Service							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$146.00	809 W Dallas St Conroe, TX 77301-9998							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense Box rental						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/18/2024	Willis Independent School District							
	Amount (\$) \$800.00	Payee address; City; State; Zip Code 612 N. Campbell Street							
		Willis, TX 77378							
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense r						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Ever Fees Fooc Gift// mittee Lega	nt Expense	kpense	Loan Repa Office Over Polling Exp Printing Exp Salaries/Wa	ymen rhead ense pense ages/	t/Reimbursement /Rental Expense Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:									Filer ID	(Ethics Commission Filers)
	Sch: 36/36 Rpt: 68/69	<u> </u>	Metcalf, William	n T. (The Hond	orable)					00069477	
4	Date 07/29/2024		Payee name YouTube TV								
6	Amount (\$) \$79.01	-	<sup>D</sup> ayee address; 1600 Amphithe Mountain View,	-	State;	Zip Coo	de				
8	PURPOSE OF EXPENDITURE		Category <sub>(See Ca</sub> Office Overhea			edule)		Check if Austin,	, TX,	officeholder living	plete Schedule T. g expense ing subscription
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	older name	C	Office soug	ght			Office he	eld
	Date	F	Payee name								
	08/29/2024	Ì	YouTube TV								
	Amount (\$) \$79.01	-	Payee address; 1600 Amphithe Mountain View,	-	State;	Zip Coo	de				
	PURPOSE OF EXPENDITURE		Category <sub>(See Ca</sub> Office Overhea			edule)		Check if Austin,	, TX,	officeholder living	plete Schedule T. g expense ing subscription
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	older name	C	office soug	ght			Office he	eld

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.		ges Schedule K: 1 Rpt: 69/69
2	FILER NAME			(Ethics Commission Filers)
	Metcalf, Willi	iam T. (The Honorable)	000694	77
4	Date	5 Name of person from whom amount is received	8	8 Amount (\$)
	07/12/2024	Amazon		\$16.25
		6 Address of person from whom amount is received; City; State; Zip Code		
		Seattle, WA 98109		
			olitical contrib	oution returned to filer
		Campaign office supplies returned		
	Date	Name of person from whom amount is received		Amount (\$)
	07/13/2024	Vera Bank		\$6,140.37
		Address of person from whom amount is received; City; State; Zip Code		
		Conroe, TX 77304		
			olitical contrib	pution returned to filer
		Interest received		