#### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC COVER SHEET PG 1

L						
Th	The MPAC Instruction Guide explains how to complete this form.       1       Filer ID (Ethics Commission Filers) 00069233       2       Total pages filed: 13					
3	COMMITTEE NAME		•	OFFICE USE ONLY		
	Hochheim Prairie F	olitical Action Committee				
F	COMMITTEE			09/26/2024		
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP			
		500 U.S. Hwy. 77A S.				
	Change of Address	Yoakum, TX 77995-1399				
Ŀ				Date Hand-delivered or Date Postmarked		
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Descipt # Amount		
	NAME	Mr. David T		Receipt # Amount		
				Date Processed		
		NICKNAME LAST	SUFFI			
		Weber		Date Imaged		
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE	;); APT / SUITE #; CITY; S	TATE; ZIP CODE		
	TREASURER	500 U.S. Hwy 77A S.				
	STREET ADDRESS	-				
	(Residence or Business)	Yoakum, TX 77995-1399				
Ļ	CAMPAIGN					
Ľ	TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; S	TATE; ZIP CODE		
	MAILING ADDRESS	500 U.S. Hwy 77A South				
		Yoakum, TX 77995-1399				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
	TREASURER PHONE	(361) 293-1021				
	THOME	(301) 233-1021				
9	REPORT TYPE	Monthly	10th day after campaign			
		X Monthly	L treasurer termination	Dissolution (Attach PAC-DR)		
10	MONTHLY					
	REPORT FILING DEADLINE	January 5 Ap	ril 5 📃 July 5	X October 5		
		February 5 Ma	ay 5 August 5	November 5		
		March 5 Ju	ne 5 September 5	December 5		
11	. PERIOD	Month Day Year	THROUGH Month	Day Year		
	COVERED	08/26/2024	09/25	/2024		
		GO	TO PAGE 2			
Fo	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f7					

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

		Ι		
12 COMMITTEE NAME Hochheim Prairie Politic	al Action Committee		13 Filer ID	(Ethics Commission Filers)
	ai Action Committee		00069233	
14 COMMITTEE ACTIVITY	<ol> <li>Candidates         (Identify by name or, if applicable, classify by party.)     </li> </ol>	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	<ol> <li>Officeholders Assisted</li> </ol>			
	(Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	·	\$	
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)	Ψ	820.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	18,613.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			I	
		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.	rjury, that the a mation require	accompanying report is d to be reported by me
		Mr. David	l T. Weber	
		Signature of Car	mpaign Treası	Irer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tł	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of offic	cer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7

#### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3 3 of 13

17 COMMITT	17 COMMITTEE NAME 18 Filer ID (			
	n Prairie Political Action Committee	00069233		
	E SUBTOTALS SCHEDULE		SU	BTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	820.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9. X	SCHEDULE E: LOANS		\$	0.00
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	2,000.00
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

1			
The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/13
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Hochheim F	Prairie Political Action Committee		00069233
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/05/2024			\$90
	6 Contributor address; City; State; Zip Code		
	Yoakum, TX 77995		
	upation / Job title (See Instructions)	9 Employer (See Instructions	
Vice Presid		Hochheim Prairie Insura	ance
Date	—	)	Amount of Contribution (\$)
09/19/2024			
	Contributor address; City; State; Zip Code		
	Yoakum, TX 77995		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Vice Presid		Hochheim Prairie Insura	,
Date 09/05/2024		)	Amount of Contribution (\$) \$25
0310312027			, 
	Continuation address, City, State, Zip Code		
	Lubbock, TX 79424		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
Marketing F	Representative	Hochheim Prairie Insura	ance
Date	Full name of contributor out-of-state PAC (ID#:	· :)	Amount of Contribution (\$)
09/19/2024	5		\$25
	Contributor address; City; State; Zip Code		
Duin singly as	Lubbock, TX 79424		<u> </u>
	upation / Job title (See Instructions) Representative	Employer (See Instructions Hochheim Prairie Insura	,
_			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/05/2024			\$5 
	Contributor address; City; State; Zip Code		
	Chriesman, TX 77838		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
Claims Rep		Hochheim Prairie Insura	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/13	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission	Filers)
	Prairie Political Action Committee		00069233	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
09/19/2024	Caldwell, Matthew (Mr.)			\$5.00
	6 Contributor address; City; State; Zip Code		·	
	Chriesman, TX 77838			
	upation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Claims Repr	esentative	Hochheim Prairie Insura	ance	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/05/2024	Gearson, Tracey			\$10.00
	Contributor address; City; State; Zip Code			
	Yoakum, TX 77995			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Underwriter		Hochheim Prairie Insura	ance	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/19/2024	Gearson, Tracey			\$10.00
	Contributor address; City; State; Zip Code			
	Yoakum, TX 77995			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Underwriter		Hochheim Prairie Insura	ance	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/05/2024	Geiger, Marsha			\$10.00
	Contributor address; City; State; Zip Code			
	Lytle, TX 78052			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Claims Repr	resentative II	Hochheim Prairie Insura	ance	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/19/2024	Geiger, Marsha			\$10.00
	Contributor address; City; State; Zip Code			
	Lytle, TX 78052			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
-	resentative II	Hochheim Prairie Insura		
		1		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/13	
2 FILER NAME			3 Filer ID (Ethics Commission I	Filers)
Hochheim P	rairie Political Action Committee		00069233	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
09/05/2024	Gloor, Carol			\$20.00
	6 Contributor address; City; State; Zip Code		1	
2 Drinsing oppu	Shiner, TX 77984		Į	
	ipation / Job title (See Instructions) eting Coordinator	9 Employer (See Instructions Hochheim Prairie Insura		
			1	
Date		)	Amount of Contribution (\$)	÷22.00
09/19/2024				\$20.00
	Contributor address; City; State; Zip Code			
	Shiner, TX 77984			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	eting Coordinator	Hochheim Prairie Insura	,	
Date		)	Amount of Contribution (\$)	
09/05/2024	Jank, Mitchell	/	Amount of Contribution (4)	\$5.00
00,00,	Contributor address; City; State; Zip Code			¥ <b>2</b>
	Meyersville, TX 77974			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	,	
Underwriter		Hochheim Prairie Insura	ance	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/19/2024	Jank, Mitchell			\$5.00
	Contributor address; City; State; Zip Code		1	
Drincinal occu	Meyersville, TX 77974 upation / Job title (See Instructions)	Employer (See Instructions		
Underwriter	pation / Job title (See instructions)	Hochheim Prairie Insura		
Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	\$10.00
09/05/2024	Knezek, Kathy			Φ10.00
	Contributor address; City; State; Zip Code			
	Yoakum, TX 77995			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u>Ι</u> s)	
Financial Ac		Hochheim Prairie Insura		
l				

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	örm.	1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/13
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	rairie Political Action Committee		00069233
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/19/2024	Knezek, Kathy	I	\$10.00
	6 Contributor address; City; State; Zip Code		1
	Yoakum, TX 77995		
Principal OCCU	pation / Job title (See Instructions)	9 Employer (See Instructions	~
Financial Act		Hochheim Prairie Insura	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/05/2024	Miculka, Eric (Mr.)		\$10.00
	Contributor address; City; State; Zip Code	I	
1		I	
	Yoakum, TX 77995	I	
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	]s)
Insurance Da		Hochheim Prairie Insura	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
09/19/2024	Miculka, Eric (Mr.)	/	\$10.00
	Contributor address; City; State; Zip Code		
		I	
	Yoakum, TX 77995		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Insurance Da	ata Analyst	Hochheim Prairie Insura	ance
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/05/2024	Ressler, Shelley		\$5.00
	Contributor address; City; State; Zip Code		•
		l	
	Yoakum, TX 77995		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Marketing Co	oordinator	Hochheim Prairie Insura	ance
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/19/2024	Ressler, Shelley	I	\$5.00
	Contributor address; City; State; Zip Code		1
		I	
		I	
	Yoakum, TX 77995		
	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Marketing Co	oordinator	Hochheim Prairie Insura	ance

l			
The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/13
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Hochheim P	Prairie Political Action Committee		00069233
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
09/05/2024			\$10.
	6 Contributor address; City; State; Zip Code		
	Lockhart, TX 78644		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	
Marketing R	Representative	Hochheim Prairie Insura	ance
Date	—	)	Amount of Contribution (\$)
09/19/2024			\$10.
	Contributor address; City; State; Zip Code		]
	Lockhart, TX 78644		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	~
·	Representative	Hochheim Prairie Insura	
_			
Date 09/05/2024	Full name of contributor out-of-state PAC (ID#: Stewart, Donna	)	Amount of Contribution (\$) \$10.
09/03/2024			ψ±0.
	Contributor address; City; State; Zip Code		
	Edna, TX 77957		
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	s)
Claim Repre	esentative	Hochheim Prairie Insura	ance
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)
09/19/2024			\$10.
	Contributor address; City; State; Zip Code		
Di dastasa	Edna, TX 77957		ļ
·	upation / Job title (See Instructions)	Employer (See Instructions Hochheim Prairie Insura	,
Claim Repre			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/05/2024			\$3.
	Contributor address; City; State; Zip Code		
	lowa Park, TX 76367		
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	s)
Claim Repre		Hochheim Prairie Insura	
-			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/13	
2 FILER NAME			3 Filer ID (Ethics Commission	i Filers)
	rairie Political Action Committee		00069233	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
09/19/2024	Tate, Barry			\$3.00
	6 Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	
	Iowa Park, TX 76367			
8 Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	1s)	
Claim Repre		Hochheim Prairie Insura		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
09/05/2024	Taylor, Kim	/		\$25.00
00,00,202.	Contributor address; City; State; Zip Code			Ψ20.00
	Culturbulur auuress, City, State, Zip Coue			
	Yoakum, TX 77995			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۵)	
Manager		Hochheim Prairie Insura		
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u> )	Amount of Contribution (\$)	
09/19/2024	Taylor, Kim	/		\$25.00
00,10,101				Ψ20.00
	Yoakum, TX 77995			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)	
Manager		Hochheim Prairie Insura	ance	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/05/2024	Weber, David			\$167.00
	Contributor address; City; State; Zip Code		•	
	Victoria, TX 77904			
-	pation / Job title (See Instructions)	Employer (See Instructions		
General Cou	Insel	Hochheim Prairie Insura	ance	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/19/2024	Weber, David			\$167.00
	Contributor address; City; State; Zip Code			
	Victoria, TX 77904			
	pation / Job title (See Instructions)	Employer (See Instructions		
General Cou	insel	Hochheim Prairie Insura	ance	

	The Instru	ction Guide explains how to complete this	form.		al pages Schedule A1: n: 7/7 Rpt: 10/13	
2	FILER NAME				r ID (Ethics Commission F	ilers)
		Prairie Political Action Committee			69233	
4	Date 09/05/2024	5 Full name of contributor Dout-of-state PAC (ID#: Wilson, Christopher		<b>7</b> Amo	ount of Contribution (\$)	\$5.00
		6 Contributor address; City; State; Zip Code				
		Yoakum, TX 77995				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction:	s)		
	Underwriter		Hochheim Prairie Insur	ance		
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Amo	ount of Contribution (\$)	
	09/19/2024	Wilson, Christopher				\$5.00
		Contributor address; City; State; Zip Code				
┝	Dringinglassy	Yoakum, TX 77995		<u> </u>		
	Underwriter	upation / Job title (See Instructions)	Employer (See Instruction Hochheim Prairie Insura			
⊢						

#### **PLEDGED CONTRIBUTIONS** SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/13 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hochheim Prairie Political Action Committee 00069233 4 \$ TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) ..... 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

0.00

LOANS		SC	HEDULE E
The Instruction Guide explains how to complete this form.		pages Schedule 1/1 Rpt: 12/13	
2 FILER NAME Hochheim Prairie Political Action Committee		ID (Ethics Com 69233	mission Filers)
<sup>4</sup> TOTAL OF UNITEMIZED LOANS	•	\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:		) <b>9</b> Loan Amo	ount (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest R	
			Jale
<b>12</b> Principal occupation / Job title (See Instructions) <b>13</b> Employer (See Instruction)	าร)		
14 Description of Collateral       15 Check if personal funds w         None	vere deposi	ited into political a (See Insti	
16 GUARANTOR     17 Name of guarantor       INFORMATION		19 Amount C	Guaranteed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instruction	าร)		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	Loan R Office Polling pense Printing Salarie	RIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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)	
<b>1</b> Total pages Schedule F1:	2 FILER NAM	ИF				3	Filer ID	(Ethics Commission Filers)
Sch: 1/1 Rpt: 13/13	Hochheim Prairie Political Action Committee     00069233						· · · · · ·	
4 Date	5 Payee name							
09/25/2024	Jared Patterson Campaign							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$500.00	4412 Sapphire Drive							
Expenditure from corporate funds	Frisco, TX	75034		_				
8 PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description			
OF EXPENDITURE	Contributions/Donations Made By							
	Candidate/Officeholder/Political Committee							g expense
Campaign contribution								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name	Office s	ought			Office he	eld
Date	Payee nam	e						
09/16/2024	Texans for Dan Patrick							
			Stata: Zin	Sada				
Amount (\$)	Payee address; City; State; Zip Code							
\$1,500.00	P.O. Box	685085						
Expenditure from corporate funds	Austin, T>	378768						
PURPOSE	(a) Category	(See Categories listed at the	ton of this schedule)	(b)	Description			
OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Contributions/Donations Made By</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> </ul>							plete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee					g expense		
					Campaign Contribution			
Complete ONLY if direct	L Candidate/O	fficeholder name	Office s	l			Office he	eld
expenditure to benefit C/O				Jugin			enice in	