CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complet	te this form.	1 Filer ID (Ethics Commi 00062790		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	The Honorable	Christopher G.			Date Received ELECTRONICA	IIV EII ED
						ALLI FILLD
		LAST		SUFFIX	10/07/2024	
	Chris	Turner				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P. O. Box 182093				Receipt #	Amount
Change of Address	Arlington TV 76006					
Change of Address	Arlington, TX 76096				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>. </u>	
TREASURER NAME	Mr.	William D.				
	NICKNAME	 LAST		SUFFIX		
		Dipert		SUFFIX		
	Dan	ыреп				
6 CAMPAIGN	STREET ADDRESS (NO PO E	BOX PLEASE);	AP ⁻	Γ / SUITE #; CITY	; STA	TE; ZIP CODE
TREASURER ADDRESS	7301 W. Pioneer Pkwy.					
(Residence or Business)	Arlington, TX 76013					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	EXTENSION			
TREASURER PHONE	(817) 543-3700					
THONE						
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after cam	
		Landa da la fara da			appointment (office	
	July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	ROUGH	09/26/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	T (if known)	
	State Representative Distric	ct 101		State Represen	tative District 101	
				ı		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Turner, Christopher C	6. (The Honorable)		14 Filer ID 00062790	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted These expenditures may have I officeholders are required to	e been made without t	he candidate's or offi	iceholder's ki	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
ш°	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TF	REASURER NAME			
		COMMITTEE CAMPAIGN TF	REASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUT ES OF LOANS, OR CONTRIB			s, \$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUAR	s)	\$	203,303.88	
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	3,801.07			
	4. TOTAL POLITIC	AL EXPENDITURES			\$	135,252.21
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTA RIOD	AINED AS OF THE LA	AST DAY OF THE	\$	573,351.43
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTST TING PERIOD	ANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		true and c	r affirm, under penalty orrect and includes al e 15, Election Code.			
				ole Christopher G.		
			Signature of	Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
		aid		, this the		day
		ertify which, witness my hand a				
Signature of office	cer administering	Printed name of officer a	dministering	Title of offic	cer administe	ring oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 79

				3 of 79			
18 FILER NAME Turner, Christ	topher G. (The Honorable)	19 Filer ID 00062790	(Ethics Comm	ission Filers)			
20 SCHEDULE SUNAME OF SCH			SUBTOT	AL AMOUNT			
1. X SC	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	202,838.88			
2. X SC	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	465.00			
3. SC	CHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4. SC	CHEDULE E: LOANS		\$				
5. X SO	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS						
6. SC	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7. SC	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8. X SC	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	37,511.18			
9. X SC	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,055.75			
10. SC	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11. SC	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR STREET	RETURNED	\$	5,352.28			
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/31 Rpt: 4/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 08/22/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
Ω	Principal occu	Austin, TX 78767-1489 pation / Job title (See Instructions)	9 Employer (See Instructions	·,		
	r illicipai occu	pation 7 300 title (See Instructions)	3 Employer (See Instructions	•)		
	Date 07/25/2024	Full name of contributor out-of-state PAC (ID#:_ Abrams, Dick Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Employer (See Instructions	<u> </u> ;)			
	Not Employe		Not Employed	,		
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:) Adams, Victoria Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Fort Worth, TX 76109-1131				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 09/09/2024	Full name of contributor			Amount of Contribution (\$)	\$6,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i 5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/31 Rpt: 5/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 07/22/2024	5 Full name of contributorApex Clean Energy Inc. F6 Contributor address; City; S			7	Amount of Contribution (\$)	\$2,000.00
		Charlottesville, VA 22902					
8	Principal occu	pation / Job title (See Instructions	s)	9 Employer (See Instructions	s)		
	Date 07/26/2024	Full name of contributor Arlington Area Texas Der Contributor address; City; S				Amount of Contribution (\$)	\$300.00
	Principal occu	Arlington, TX 76012-5637 pation / Job title (See Instructions		Employer (See Instructions	·)		
	r illicipai occu	pation / Job title (See Instructions	9)	Employer (See mstructions	·)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:) Arlington Firefighters PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$5,000.00
	Principal occu	Keller, TX 76248-5379 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
	Date 09/12/2024	Full name of contributor Associated General Contributor address; City; Si Austin, TX 78768-2185			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 07/06/2024	Full name of contributor Avey, Melinda Contributor address; City; Si Round Rock, TX 78664-9)		Amount of Contribution (\$)	\$52.00
	Principal occu Retired	pation / Job title (See Instructions	s)	Employer (See Instructions Retired	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	IS		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 3/31 Rpt: 6/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/06/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
_		Coppell, TX 75019-6039	_		Ĺ		
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date 09/25/2024	Full name of contributor)		Amount of Contribution (\$)	\$50.00
	Principal occu	Arlington, TX 76006-4003 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
	Business ow	·		RE:site Studio	,		
	Date Full name of contributor O9/26/2024 Ben E. Keith Company Texas PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00	
		Fort Worth, TX 76102-5501					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/31/2024	Full name of contributor out-of-state PAC (ID#:_Blue, Therisa Contributor address; City; State; Zip Code Arlington, TX 76018-1529				Amount of Contribution (\$)	\$26.13
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>(</u>		
				Amount of Contribution (\$)	\$5,000.00		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
		·					

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/31 Rpt: 7/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/25/2024	5 Full name of contributor	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8	Dringing Loon	Fort Worth, TX 76102-3400		Employer (See Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructions) ed	9	Not Employed	>)		
	Date 07/18/2024	Full name of contributor Brinkley, Susan Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$25.00
	Dringing! goog	Fort Worth, TX 76244-7969)	Employer (See Instructions	<u>,,</u>		
	Principal occupation / Job title (See Instructions) Licensed professional counselor			Employer (See Instructions Private practice	5)		
	Date 08/22/2024					Amount of Contribution (\$)	\$2,500.00
		Richland Hills, TX 76118-6	372				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)		
	Date 08/29/2024	Full name of contributor E Brown, William R. Contributor address; City; Star Arlington, TX 76017-1252	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Attorney at L	pation / Job title (See Instructions) .aw		Employer (See Instructions Bob Brown Law P.C.	s)		
	Date 08/22/2024	Full name of contributor Butler, Daniel Contributor address; City; Star Dallas, TX 75229-5248	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUI	_E A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 5/31 Rpt: 8/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)				3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/25/2024	5 Full name of contributor Campbell, Michael6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			7	Amount of Contribution (\$)	\$200.00
		Fort Worth, TX 76112-280						
8	Principal occu Constable P	pation / Job title (See Instructions ct#8	s)		Employer (See Instructions Tarrant County	5)		
	Date 09/25/2024	Full name of contributor Canada, Richard O. Contributor address; City; St	·				Amount of Contribution (\$)	\$100.00
	Principal occu Retired	Grand Prairie, TX 75052-4 pation / Job title (See Instructions			Employer (See Instructions Retired	<u> </u> 5)		
	Date 07/22/2024	Full name of contributor Charter Communications Contributor address; City; St)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701-5007 pation / Job title (See Instructions)		Employer (See Instructions	 - s)		
	Date 09/18/2024	Full name of contributor Chase, Scott Contributor address; City; St Dallas, TX 75208-2503	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Scott Chase	<u>(</u> 5)		
	Date 09/12/2024	Full name of contributor Clifton, William Contributor address; City; St Waco, TX 76710-1814	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions The Clifton Group	;)		
			'					

	MONEI	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/31 Rpt: 9/79	
2	FILER NAME			3	Filer ID (Ethics Commission	r Filers)
		stopher G. (The Honorable)			00062790	
4	Date 09/12/2024	5 Full name of contributor out-of-state PAC (ID#: Cochran, Stacy)	7	Amount of Contribution (\$)	\$50.00
		6 Contributor address; City; State; Zip Code Keller, TX 76262-9048				
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Service	e Officer	90 Degree Benefits			
	Date Full name of contributor out-of-state PAC (ID#:) 09/16/2024 Coleman, Robert W Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Dallas, TX 75214-3545				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 5)		
	Attorney		Wilson Elser Dallas TX			
	Date	Full name of contributor X out-of-state PAC (ID#: CI	00002089)		Amount of Contribution (\$)	
	08/02/2024	Communications Workers of America (CWA COPE PAC)				\$250.00
	Contributor address; City; State; Zip Code Washington, DC 20001-2760					
	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	Cunningham, Jessica				\$100.00
		Contributor address; City; State; Zip Code				
		Grand Prairie, TX 75052-8572				
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instructions Self employed	5)		
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/09/2024	Daniel, Alecia				\$5.36
	Contributor address; City; State; Zip Code					
	Principal occu	Arlington, TX 76014-1132 Principal occupation / Job title (See Instructions) Employer (See Instructions)				
	Analyst	padotti oob aac (occ itisarucaotts)	Ag Workers	·)		

	MONET	ARY POLITICAL (NS		SCHEDU	LE A1	
	The Instruc	ction Guide explains hov	v to complete this for	rm.	1	Total pages Schedule A1: Sch: 7/31 Rpt: 10/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/26/2024	5 Full name of contributor Davis, Jeffrey6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
_	District	Fort Worth, TX 76110-11		Fundament (On a landousting			
8	Attorney	pation / Job title (See Instructions	5) 9	Employer (See Instructions Republic Title of Texas	5)		
	Date 09/12/2024	Full name of contributor Dewar, Claire Contributor address; City; S			•	Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75209-5615 pation / Job title (See Instructions	2)	Employer (See Instructions	z)		
	Not Employed			Not Employed	۰)		
	Date 09/12/2024					Amount of Contribution (\$)	\$1,000.00
		Waco, TX 76710-1277					
	Principal occu Attorney	pation / Job title (See Instructions	(5)	Employer (See Instructions Beard Kultgen	5)		
	Date Full name of contributor out-of-state PAC (ID#:_ 09/12/2024 Dipert, Dan W.					Amount of Contribution (\$)	\$1,500.00
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) Dipert, Linda Contributor address; City; State; Zip Code Arlington, TX 76013-1760		•	Amount of Contribution (\$)	\$1,500.00		
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	S)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N :	S 	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rn	1.	1	Total pages Schedule A1: Sch: 8/31 Rpt: 11/79		
2	FILER NAME Turner, Chris	stopher G. (The Honorable)				3	Filer ID (Ethics Commission 00062790	n Filers)	
4	Date 07/02/2024	5 Full name of contributorDunn, Louise6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$15.69	
		Arlington, TX 76002-2869							
8	Principal occu Retired Teac	pation / Job title (See Instructions Cher)		Employer (See Instructions AISD	5)			
	Date 08/02/2024	Full name of contributor Dunn, Louise Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$15.69	
	Arlington, TX 76002-2869 Principal occupation / Job title (See Instructions) Employer (See Instructions)				Employer (See Instructions	<u> </u> 5)			
				AISD					
	Date 09/02/2024				Amount of Contribution (\$)	\$15.69			
		Arlington, TX 76002-2869							
	Principal occu Retired Teac	pation / Job title (See Instructions cher)		Employer (See Instructions AISD	5)			
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00		
	Principal occu Pharmacist	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)			
	Date Full name of contributor			Amount of Contribution (\$)	\$750.00				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
			L						

	MONEI	ARY POLITICAL CONTRIBUTION	15		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 9/31 Rpt: 12/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062790	
4	Date 08/14/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$1,000.	00
8	Principal occu Insurance Br	Grand Prairie, TX 75052-6715 pation / Job title (See Instructions) roker	9	Employer (See Instructions Self Employed/State Fa		Agency	
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_Englander, Marty Contributor address; City; State; Zip Code Fort Worth, TX 76110-2620				Amount of Contribution (\$) \$5,000.	00
	Principal occupation / Job title (See Instructions) Not Employed			Employer (See Instructions Not Employed	5)		
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#:_Fickling, Karl Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$25.	00
	Principal occu	Grand Prairie, TX 75052-8341 pation / Job title (See Instructions)		Employer (See Instructions Baptist General Conven		n of Texas	
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#:_Fikes, Amy Contributor address; City; State; Zip Code Dallas, TX 75205-3103				Amount of Contribution (\$) \$5,000.	00
		pation / Job title (See Instructions)		Employer (See Instructions Not Employed	()		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$) \$1,000.	00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	i)		
				P 2222			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/31 Rpt: 13/79
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00062790
4	Date 09/26/2024	 Full name of contributor out-of-state PAC (ID#: Fort Worth Firefighters Committee for Respons Contributor address; City; State; Zip Code 	ible Government	7	Amount of Contribution (\$) \$10,000.00
_	Dringing agg	Fort Worth, TX 76107-3345	0 Employer (See Instructions	<u></u>	
ð	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 08/31/2024	Full name of contributor out-of-state PAC (ID#: Gachman, Arnold Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
		Fort Worth, TX 76107-3557	1	<u> </u>	
	Principal occu Metals Exec	pation / Job title (See Instructions) utive	Employer (See Instructions Gamtex Industies	5)	
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#: Gandy, Shirlee Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
		Fort Worth, TX 76109-4746	1		
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions RPM Commercial	5)	
	Date 07/30/2024	Full name of contributor out-of-state PAC (ID#: Garnett, Richard Contributor address; City; State; Zip Code Fort Worth, TX 76109-5233)		Amount of Contribution (\$) \$250.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	;)	
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#: Garnett, Richard Contributor address; City; State; Zip Code Fort Worth, TX 76109-5233			Amount of Contribution (\$) \$517.75
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	;)	

	MONET	ARY POLITICAL CONTRIBUTION	IS		SCHEDULE	■ A1	
	The Instru	ction Guide explains how to complete this fo	or	m.	1	Total pages Schedule A1: Sch: 11/31 Rpt: 14/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	ı Filers)
4	Date 09/25/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_		Arlington, TX 76001-4856	_				
8	Principal occu Staff	pation / Job title (See Instructions)	9	Employer (See Instructions University of Texas at A		gton	
	Date 07/18/2024	Full name of contributor				Amount of Contribution (\$)	\$10.00
	Principal occu	Arlington, TX 76015-3838 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired			Retired			
	Date 09/23/2024	Full name of contributor)		Amount of Contribution (\$)	\$50.00
		Arlington, TX 76013-2425					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/10/2024	Full name of contributor out-of-state PAC (ID#:_ Greenhill, William Contributor address; City; State; Zip Code Fort Worth, TX 76107-3808				Amount of Contribution (\$)	\$2,500.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Haynes and Boone LLP			
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Grimble, Tonja Contributor address; City; State; Zip Code Mansfield, TX 76063-6226)		Amount of Contribution (\$)	\$250.00
	Principal occu Educator	pation / Job title (See Instructions)		Employer (See Instructions STEM It Up Sports	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 12/31 Rpt: 15/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/18/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
•	Dringing oggu	Houston, TX 77077-2026	D. Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_ Hall, Tom Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
	Dringing agg	Colleyville, TX 76034-6392 pation / Job title (See Instructions)	Employer (See Instructions	_		
	Attorney	pation / Job title (See instructions)	Hall & Heygood LLP	')		
	Date 09/06/2024	Full name of contributor			Amount of Contribution (\$)	\$25.00
		Austin, TX 78723-2216				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#:_Harwood, Dorothy Contributor address; City; State; Zip Code Fort Worth, TX 76110-1802)		Amount of Contribution (\$)	\$52.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	i)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Henry, Matthew Contributor address; City; State; Zip Code Dallas, TX 75218-4340			Amount of Contribution (\$)	\$1,500.00
	Principal occu General Cou	pation / Job title (See Instructions) nsel	Employer (See Instructions Oncor Electric Delivery	5)		
			,			

	MONET	ARY POLITICAL CO	S		SCHEDU	LE A1	
	The Instru	ction Guide explains how to	complete this form	1.	1	Total pages Schedule A1: Sch: 13/31 Rpt: 16/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/24/2024	 5 Full name of contributor Holloway, Ryan 6 Contributor address; City; State; 			7	Amount of Contribution (\$)	\$50.00
		Dallas, TX 75226-1161					
8	Principal occu Insurance Br	pation / Job title (See Instructions) roker		Employer (See Instructions Ryan Holloway)		
	Date 09/26/2024	Full name of contributor	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Arlington, TX 76017-1113 pation / Job title (See Instructions)		Employer (See Instructions)		
	Supply Chair			Textron	,		
	Date 09/12/2024	Full name of contributor Hoyt, John M Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5,000.00
		Waco, TX 76712-7555					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 09/05/2024	Full name of contributor X International Brotherhood of E Contributor address; City; State; X Washington, DC 20001-4089				Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/12/2024	Full name of contributor Ironworkers State COPE Fund Contributor address; City; State; Grapevine, TX 76051-3395)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			I				

	MONET	ARY POLITICAL CONTRIBUTIO	IS		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 14/31 Rpt: 17/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	n Filers)
4	Date 09/20/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$	10,000.00
_		Mc Gregor, TX 76657-4166	_				
8	Principal occu CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Fashion Glass & Mirror	5)		
	Date 09/20/2024	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
		Arlington, TX 76006-3616 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Attorney			Self Employed			
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#:_ Johnson, Lynn Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76110-1462					
	Principal occu QA Tech	pation / Job title (See Instructions)		Employer (See Instructions L3 Communications	5)		
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#:_ Jones-Johnson, Ivy Contributor address; City; State; Zip Code Arlington, TX 76018-3052				Amount of Contribution (\$)	\$5.43
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#:_ Joyner, Henry C Contributor address; City; State; Zip Code Austin, TX 78704-1823)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	IS		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 15/31 Rpt: 18/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	n Filers)
4	Date 09/16/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Eastland, TX 76448-3450 pation / Job title (See Instructions)	9	Employer (See Instructions	(;)		
_	Consultant	pation / 300 title (See Instructions)		Keffer Consulting LLC	·)		
	Date 09/13/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,035.25
	Principal occu	Arlington, TX 76005-4529 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Owner/Partn			The Nehemiah Compan			
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Kickapoo Traditional Tribe of Texas Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Eagle Pass, TX 78852-2503					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/29/2024	Full name of contributor out-of-state PAC (ID#:_ Krampitz, Tom Contributor address; City; State; Zip Code Dallas, TX 75208-3122)		Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_Langston, Anthony Contributor address; City; State; Zip Code Grand Prairie, TX 75052-4334				Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	CONTRIBUTION	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 16/31 Rpt: 19/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)				3	Filer ID (Ethics Commission 00062790	n Filers)
4	Date 08/02/2024	5 Full name of contributor Ledford, Grace6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
	Daine in all a second	Arlington, TX 76014-1552			Faradaya (Ozadayatiya			
8	Not Employe	pation / Job title (See Instructions ed	9		Employer (See Instructions Not Employed	5)		
	Date 09/24/2024	Full name of contributor Legacy 44 PAC Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78756-3522 pation / Job title (See Instructions			Employer (See Instructions	 s)		
	Date 09/22/2024	Full name of contributor Leslie, William Contributor address; City; St)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions			Employer (See Instructions Jumbo Property Manag	′	ent LTC	
	Date 09/25/2024	Full name of contributor Leslie, William Contributor address; City; St	, ,)		Amount of Contribution (\$)	\$50.00
	Principal occu Property ma	pation / Job title (See Instructions nagement			Employer (See Instructions Jumbo Property Manag		ent LLC	
	Date 09/20/2024	Full name of contributor Leuschel, Jeffrey Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions			Employer (See Instructions McCall Parkhurst & Hor		L.L.P.	
			I.					

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/31 Rpt: 20/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission 00062790	n Filers)
4	Date 09/24/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu Not Employe	Arlington, TX 76013-1624 pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 08/08/2024	Full name of contributor X out-of-state PAC (ID#: CM Machinists Non-Partisan Political League Contributor address; City; State; Zip Code Upper Marlboro, MD 20772-2675			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID#:_ Mahrouq, Sam Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Arlington, TX 76006-6803 pation / Job title (See Instructions)	Employer (See Instructions	 - s)		
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#:_ Majkut, Beverly Contributor address; City; State; Zip Code Arlington, TX 76014-3127	MEI inc.		Amount of Contribution (\$)	\$26.13
	Principal occu Nurse	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_ Massingill, Berna Contributor address; City; State; Zip Code Fort Worth, TX 76109-2758)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/31 Rpt: 21/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 08/17/2024	5 Full name of contributor Maxwell, Stephen C.6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$1,000.00
		Fort Worth, TX 76107-72					
8	Principal occu Attorney	pation / Job title (See Instruction:	5)	Employer (See Instructions Bailey & Galyen	s)		
	Date 07/22/2024	Full name of contributor McGuireWoods Federal F Contributor address; City; S	tate; Zip Code	C00225342)		Amount of Contribution (\$)	\$500.00
	Principal occu	Richmond, VA 23219-395 pation / Job title (See Instructions		Employer (See Instructions	<u> </u> s)		
	Date 07/19/2024	Full name of contributor Meeks, Raymond Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	Principal occu	Venus, TX 76084-3252 pation / Job title (See Instruction:	5)	Employer (See Instructions	s)		
	Attorney	,	,	Raymond M Meeks			
	Date 08/19/2024	Full name of contributor Meeks, Raymond Contributor address; City; S Venus, TX 76084-3252				Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions Raymond M Meeks	s)		
	Date 09/19/2024	Full name of contributor Meeks, Raymond Contributor address; City; S Venus, TX 76084-3252	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instruction:	5)	Employer (See Instructions Raymond M Meeks	s)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/31 Rpt: 22/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/12/2024	5 Full name of contributorMerck Employees Politica6 Contributor address; City; St			7	Amount of Contribution (\$)	\$1,000.00
		Washington, DC 20004-2					
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	s)		
	Date 09/25/2024	Full name of contributor Miles, Roderick Contributor address; City; Si	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Deire die al. a a co	Fort Worth, TX 76123-25		Faralassa (Ossalastassissa	<u></u>		
	Administrato	pation / Job title (See Instructions r	5)	Employer (See Instructions Tarrant County	5)		
	Date 07/31/2024	Full name of contributor Miller, Camille D. Contributor address; City; Si	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$10.00
		Austin, TX 78704-4636					
	Principal occu President/CE	pation / Job title (See Instructions EO	s)	Employer (See Instructions Texas Health Institute	5)		
	Date 09/18/2024	Full name of contributor Moeller, Becky Contributor address; City; Si Corpus Christi, TX 78412	tate; Zip Code		•	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions	;)	Employer (See Instructions Retired	5)		
	Date 09/18/2024	Full name of contributor Moncrief, Mike Contributor address; City; Si Fort Worth, TX 76102-492	. ,)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Investor	pation / Job title (See Instructions	s)	Employer (See Instructions Self employed	5)		

	MONET	ARY POLITICAL CON	S		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to c	omplete this forn	n.	1	Total pages Schedule A1: Sch: 20/31 Rpt: 23/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/23/2024	Monroe, Mary Catherine 6 Contributor address; City; State; Zi	ut-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00
8		Arlington, TX 76013-1336 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 07/25/2024		ut-of-state PAC (ID#:	Not Employed		Amount of Contribution (\$)	\$2,500.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Fort Worth Chamber of		mmerce	
	Date 09/23/2024	Nolan, John Contributor address; City; State; Zi	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Arlington, TX 76015-3824 pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 08/22/2024	Full name of contributor on Nye Jr., Erle Allen Contributor address; City; State; Zin Dallas, TX 75225-7117	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Oncor)		
	Date 09/26/2024	Full name of contributor of Odom-Wesley, Barbara Contributor address; City; State; Ziver Arlington, TX 76012-5360	ut-of-state PAC (ID#:ip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
			1				

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to co	omplete this forn	າ.	l	l pages Schedule A1: : 21/31 Rpt: 24/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			l	ID (Ethics Commission 62790	on Filers)
4	Date 09/26/2024	 Full name of contributor out Oldums, Barbara Contributor address; City; State; Zip)	7 Amo	ount of Contribution (\$)	\$250.00
		Arlington, TX 76012-1719					
8	Principal occu President an	pation / Job title (See Instructions) d CEO		Employer (See Instructions Industrial Solutions Com			
	Date 09/22/2024	Olson, Lyndon Contributor address; City; State; Zip	c-of-state PAC (ID#:		Amo	ount of Contribution (\$)	\$2,500.00
	Principal occu	Waco, TX 76710-1416 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Not employe	d		Not employed			
	Date 09/19/2024	Full name of contributor out Oncor Texas Political Action Con Contributor address; City; State; Zip			Amo	ount of Contribution (\$)	\$2,500.00
		Dallas, TX 75202-1234			<u> </u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/24/2024	Pham, Tony	o-of-state PAC (ID#:		Amo	ount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 08/22/2024	Full name of contributor out Pipefitters Local 211 COPE Acco Contributor address; City; State; Zip Deer Park, TX 77536-2527)	Amo	ount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
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	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1
	The Instru	ction Guide explains how to co	mplete this forr	n.	1 Total pages Schedule A1: Sch: 22/31 Rpt: 25/79	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3 Filer ID (Ethics Commission 00062790	on Filers)
4	Date 08/06/2024			7 Amount of Contribution (\$)	\$2,500.00	
8	Principal occu Executive Di	Fort Worth, TX 76107-2077 pation / Job title (See Instructions) rector	9	Employer (See Instructions United Educators Assoc		
	Date Full name of contributor out-of-state PAC (ID#:) Powell, Beverly Contributor address; City; State; Zip Code Fort Worth, TX 76101-0866 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Amount of Contribution (\$)	\$500.00		
	Assistant to the President for External Affairs Texas Wesleyan University					
	Date 09/12/2024	Full name of contributor out- Roemer, Claire Contributor address; City; State; Zip Arlington, TX 76013-1908	of-state PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired))	
	Date 09/26/2024	Full name of contributor out- Ryan Texas PAC Contributor address; City; State; Zip Dallas, TX 75240-5050	of-state PAC (ID#:)	Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)	
	Date 09/22/2024	Full name of contributor out- Shelton, Jason Contributor address; City; State; Zip Arlington, TX 76017-2730	of-state PAC (ID#:		Amount of Contribution (\$)	\$200.00
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions UT Arlington))	
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	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 23/31 Rpt: 26/79				
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)		
4	Date 07/31/2024			7	Amount of Contribution (\$)	\$250.00			
_	Daine in a la casa	Cuero, TX 77954-0327	۱.	Fundament (Construction					
8	Attorney	incipal occupation / Job title (See Instructions) torney 9 Employer (See Instructions) Crain & Sheppard							
	Date Full name of contributor out-of-state PAC (ID#:) 09/18/2024 Sheppard, Joseph Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00				
	Cuero, TX 77954-0327				<u></u>				
	Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Crain & Sheppard		5)						
	Date Full name of contributor out-of-state PAC (ID#:) 08/22/2024 Smart TD PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00				
		Independence, OH 44131-2378							
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)				
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_Smith, Cameron Contributor address; City; State; Zip Code Mansfield, TX 76063-2331)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>				
	Date 07/20/2024	Full name of contributor out-of-state PAC (ID#:_Smith, Cheryl Ann Contributor address; City; State; Zip Code Grand Prairie, TX 75052-4581)		Amount of Contribution (\$)	\$50.00		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)				
			•						

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 24/31 Rpt: 27/79		
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	n Filers)
4	Date 08/20/2024			7	Amount of Contribution (\$)	\$50.00	
8	Principal occu	Grand Prairie, TX 75052-4581 pation / Job title (See Instructions)	9	Employer (See Instructions	 		
	Retired			,			
	Date Full name of contributor out-of-state PAC (ID#:) 09/20/2024 Smith, Cheryl Ann Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	Grand Prairie, TX 75052-4581 Principal occupation / Job title (See Instructions) Employer (See Instructions)				·/		
Retired Retired		·)					
	Date Full name of contributor out-of-state PAC (ID#:) 07/26/2024 Smith, Jason Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
		Fort Worth, TX 76110-1950					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Law Offices of Jason Sr		1	
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_Smith, Regina C. Contributor address; City; State; Zip Code Grand Prairie, TX 75052-8345)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> 5)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_Spaniolo, James D. Contributor address; City; State; Zip Code Arlington, TX 76005-1126)		Amount of Contribution (\$)	\$250.00
	Principal occu Leadership (pation / Job title (See Instructions)		Employer (See Instructions James D. Spaniolo	5)		
	Leadership C	onsulait.		одпоз д. Зрашою			

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	_E A1	
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 25/31 Rpt: 28/79		
2	FILER NAME Turner, Chris	FILER NAME Turner, Christopher G. (The Honorable)				3	Filer ID (Ethics Commission 00062790	on Filers)	
4	Date 07/25/2024			7	Amount of Contribution (\$)	\$2,500.00			
		Fort Worth, TX 76109-110							
8	Principal occu Not employe	pation / Job title (See Instructions d	(5)		Employer (See Instructions Not employed	5) 			
	Date Full name of contributor out-of-state PAC (ID#:) 07/26/2024 Stewart, Thomas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00				
	Austin, TX 78749-3030 Principal occupation / Job title (See Instructions) Employer (See Instructions)			-, 					
	Consultant	pation 7 300 title (See Instructions	5)		Self Employed	•)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/23/2024 Suhm, Mary Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00			
	Deignainal annu	Austin, TX 78737-9299			Frankrian (Cookarationa	<u></u>			
	Not employe	pation / Job title (See Instructions d	5)		Employer (See Instructions Not employed	•)			
	Date 09/12/2024	Full name of contributor Sullivan, Audra Contributor address; City; S Arlington, TX 76018-1869)		Amount of Contribution (\$)	\$50.00	
	Principal occu Insurance Aç	pation / Job title (See Instructions gent	5)		Employer (See Instructions Vogue Insurance Agenc				
	Date 09/23/2024	Full name of contributor Sullivan, Audra Contributor address; City; S Arlington, TX 76018-1869					Amount of Contribution (\$)	\$50.00	
	Principal occu Insurance Aç	pation / Job title (See Instructions gent	5)		Employer (See Instructions Vogue Insurance Agence				
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	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 26/31 Rpt: 29/79		
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	n Filers)
4	Date 09/12/2024			7	Amount of Contribution (\$)	\$2,500.00	
		North Richland Hills, TX 76180-8844					
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions))				
	Date Full name of contributor out-of-state PAC (ID#:) 09/10/2024 Taylor, Marissa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.13		
	Arlington, TX 76002-3860						
Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions Texas Department of Pu			c Safety				
	Date Full name of contributor out-of-state PAC (ID#:) 08/22/2024 Teamsters Local #745 Drive Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00		
		Dallas, TX 75217-5044	į				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/21/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 09/19/2024	Full name of contributor Contributor Contributor address; City; State; Dallas, TX 75202-1231	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
		pation / Job title (See Instructions)		Employer (See Instructions			
	Advocacy & Community Benefit Texas Health Resource						

	MONET	ARY POLITICAL CONTRIBUTIO		E A1		
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 27/31 Rpt: 30/79	
2	FILER NAME Turner, Chris	FILER NAME Turner, Christopher G. (The Honorable)			Filer ID (Ethics Commission 00062790	on Filers)
4	Date 09/26/2024	5 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Deinainal agai	Austin, TX 78701-2171				
8	Рппсіраї осси		9 Employer (See Instructions)		
	Date 09/16/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
Austin, TX 78701-1672 Principal occupation / Job title (See Instructions) Employer (See Instruction)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Carpenters Regional Council Texas Work Contributor address; City; State; Zip Code	ing Families PAC		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Metairie, LA 70003-5232 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#:_ Texas REALTORS Political Action Committee Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78768-2246 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Teachers Association PAC Contributor address; City; State; Zip Code Austin, TX 78759-8327			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 28/31 Rpt: 31/79			
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	n Filers)	
4	Date 07/17/2024			7	Amount of Contribution (\$)	\$100.00		
8	Principal occu	Grand Prairie, TX 75054-0: pation / Job title (See Instructions)		Employer (See Instructions	(;			
•	Director			,				
	Date 07/01/2024				Amount of Contribution (\$)	\$100.00		
	Denton, TX 76201-1709							
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions Retired		i)						
	Date Full name of contributor out-of-state PAC (ID#:) 08/01/2024 Turner, Gary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$103.75			
		Dallas, TX 75218-8294						
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	i)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/10/2024 Turner, Gary Contributor address; City; State; Zip Code Dallas, TX 75218-8294			Amount of Contribution (\$)	\$103.75			
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	()			
	Date 07/17/2024	Full name of contributor Tuthill, David Contributor address; City; Sta Dallas, TX 75230	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
			1					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDU	LE A1
	The Instru	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 29/31 Rpt: 32/79	
2	FILER NAME Turner, Chris	FILER NAME Turner, Christopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	ion Filers)
4	Date 09/12/2024	5 Full name of contributor out-of-state PAC (ID#:) 2/2024 UA Plumbers & Pipefitters Local 286 PAC Fund 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10,000.00	
		Austin, TX 78702-4106					
8	Principal occu	pation / Job title (See Instructions	;)	9 Employer (See Instructions	5)		
	Date Full name of contributor O7/26/2024 UA Plumbers & Steamfitters Local Union No. 100 PAC Contributor address; City; State; Zip Code Garland, TX 75041-6015			Amount of Contribution (\$)	\$10,000.00		
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> 5)		
	Date 08/22/2024	Full name of contributor UA Plumbers Local Unior Contributor address; City; Si)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Houston, TX 77249-8746 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
	Date 09/11/2024	Full name of contributor Valenzuela, Terry Contributor address; City; Si Arlington, TX 76011-7957	ate; Zip Code			Amount of Contribution (\$)	\$52.00
	Principal occu Toolmaker	pation / Job title (See Instructions	s)	Employer (See Instructions General Motors	5)		
	Date 09/24/2024	Full name of contributor Valenzuela, Terry Contributor address; City; Si Arlington, TX 76011-7957	•		•	Amount of Contribution (\$)	\$75.00
	Principal occu Toolmaker	pation / Job title (See Instructions	5)	Employer (See Instructions General Motors	s)		
			'				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A	1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 30/31 Rpt: 33/79		
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission File 00062790	rs)
4	Date 08/14/2024	_ `		7	Amount of Contribution (\$) \$1,0	00.00	
8	Principal occu	Fort Worth, TX 76107-2795	٥	Employer (See Instructions			
•	Developer	rincipal occupation / Job title (See Instructions) 9		·)			
	Date Full name of contributor out-of-state PAC (ID#:) 07/18/2024 Wick, Audrey Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$	50.00		
	Arlington, TX 76012-2733 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired		<u> </u> 5)				
	Date Full name of contributor out-of-state PAC (ID#:) 09/13/2024 Wilhelm, Franya Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1	00.00		
	Principal occu Not Employe	Arlington, TX 76012-2052 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		
	Date 09/24/2024	Full name of contributor out-of-state PAC (ID#:_ Williams, Jamal Contributor address; City; State; Zip Code Fort Worth, TX 76140-2092)		Amount of Contribution (\$)	50.00
	Principal occu Education	pation / Job title (See Instructions)		Employer (See Instructions Dallas College	<u>(</u>		
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#:_ Williams, Thomas J. Contributor address; City; State; Zip Code Fort Worth, TX 76109-3441)		Amount of Contribution (\$) \$5	00.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Haynes & Boone LLP	5)		

ETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
struction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 31/31 Rpt: 34/79
	3 Filer ID (Ethics Commission Filers) 00062790
5 Full name of contributor out-of-state PAC (ID#:) Yarbough, Irvin 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$26.3
	ons)
Retired	
1: N.	Yarbough, Irvin 6 Contributor address; City; State; Zip Code Grand Prairie, TX 75052-8343 al occupation / Job title (See Instructions) 9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 35/79 3 Filer ID (Ethics Commission Filers) FILER NAME Turner, Christopher G. (The Honorable) 00062790 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 07/29/2024 Texas REALTORS Political Action Committee \$250.00 | Fundraising event 7 Contributor address; City; State; Zip Code advertising Austin, TX 78768-2246 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 07/29/2024 Texas REALTORS Political Action Committee \$215.00 | Fundraising event Contributor address; City; State; Zip Code food/beverage Austin, TX 78768-2246 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's employer/law firm (FOR JUDICIAL)

(See instructions)

(See instructions)

Employer (FOR NON-JUDICIAL)

Contributor's job title (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 1/15 Rpt: 36/79	2 FILER NAME Turner, Christopher G. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062790
4	Date 07/21/2024	5 Payee name ActBlue	00002190
6	Amount (\$) \$1,878.32	7 Payee address; City; State; Zip Code 366 Summer St	
L		Somerville, MA 02144-3132	
8	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Processing fees: 7/21/24-9/26/24
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/06/2024	Payee name American Express	
	Amount (\$) \$3,987.89	Payee address; City; State; Zip Code 200 Vesey St	
		New York, NY 10281-5525	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense payment
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 09/05/2024	Payee name American Express	
	Amount (\$) \$9,411.78	Payee address; City; State; Zip Code 200 Vesey St	
		New York, NY 10281-5525	
	PURPOSE OF EXPENDITURE	Credit Cara r dyment	outside of Texas. Complete Schedule T. n, TX, officeholder living expense payment
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						OTHER (enter a category not listed above)		
_	T . 1	la ======		Apidinio noti to co			_	E1 15	(Editor Commission 5	-1>	
1	Total pages Schedule F1:	1					3	Filer ID	(Ethics Commission F	-liers)	
	Sch: 2/15 Rpt: 37/79	Turner, Ch	ristopher G. (The Hor	norable)				00062790			
4	Date	5 Payee name	9								
	09/20/2024	American I									
_	Λ ο (Φ)		-	Ctata: 7ia Ca	مام						
o	Amount (\$)	7 Payee addre	-	State; Zip Co	ue						
	\$14,679.03	200 Vesey	St								
		New York,	NY 10281-5525								
8	PURPOSE	(a) Catagony			(h)	Description					
٠	OF		See Categories listed at the top	of this schedule)	(5)		outs	ide of Texas, Com	iplete Schedule T.		
	EXPENDITURE	Credit Car	и Раушеш					, officeholder living			
						Credit card p			•		
							•				
_	Compulate ONII V if direct	Canadidate (Of	finale alder manne	O#:				Office le	- l d		
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	gni			Office he	eiu		
	'										
	Date	Payee name	9								
	09/20/2024	Converger	ice Targeted Commu	nications							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de						
	\$2,000.00	l í	ecticut Ave NW								
	Ψ2,000.00		icelical Ave IVV								
		Ste 300									
		Washingto	n, DC 20036-2687								
	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description					
	OF	Consulting				_	outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE		P			Check if Austin	, TX	, officeholder living	g expense		
						Photoshoot for	ee				
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ght			Office he	eld		
	expenditure to benefit C/OI	H									
_	5 .										
	Date	Payee name									
	09/26/2024	Converger	ice Targeted Commu	nications							
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	de						
	\$1,850.00	1221 Conr	ecticut Ave NW								
		Ste 300									
			n, DC 20036-2687								
		_									
	PURPOSE OF		See Categories listed at the top	of this schedule)	(b)	Description					
	EXPENDITURE	Advertising	j Expense			ш			plete Schedule T.		
								, officeholder living			
						Campaign III	zıd	iare product	ion and design		
	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld		
	expenditure to benefit C/O	Н									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)							
		The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 3/15 Rpt: 38/79	Turner, Christopher G. (The Honorable)	00062790							
4	Date	5 Payee name								
	07/03/2024	First Data Merchant Services								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$28.83	5565 Glenridge Connector NE								
		Ste 2000								
		Atlanta, GA 30342-1651								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF		utside of Texas. Complete Schedule T.							
	EXPENDITURE		TX, officeholder living expense							
		Credit card pr	ocessing fee							
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	experientare to benefit G/O	'								
	Date	Payee name								
	07/03/2024	First Data Merchant Services								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$93.40	5565 Glenridge Connector NE								
		Ste 2000								
		Atlanta, GA 30342-1651								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE		utside of Texas. Complete Schedule T.							
	EXPENDITORE	l —	TX, officeholder living expense							
		Credit card pr	ocessing fee							
	0 1: 01:14 7 7 7		000							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/03/2024	First Data Merchant Services								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$215.54	5565 Glenridge Connector NE								
		Ste 2000								
		Atlanta, GA 30342-1651								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Accounting/Banking	utside of Texas. Complete Schedule T.							
	LXI LINDITORL		TX, officeholder living expense							
		Credit card pr	ocessing fee							
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	Complete ONLY if direct expenditure to benefit C/Ol		Office field							
_										
	rme provided by Tayas E	thice Commission www.athice state ty us	Version V/4.1.0.49da51f7							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	,
1 Total pages Schedule F1: Sch: 4/15 Rpt: 39/79	Turner, Christopher G. (The Honorable) 00062790
4 Date	5 Payee name
08/05/2024	First Data Merchant Services
6 Amount (\$) \$28.22	7 Payee address; City; State; Zip Code 5565 Glenridge Connector NE
	Ste 2000 Atlanta, GA 30342-1651
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Cradit cord processing for
	Credit card processing fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/05/2024	First Data Merchant Services
Amount (\$)	Payee address; City; State; Zip Code
\$123.23	5565 Glenridge Connector NE
	Ste 2000
	Atlanta, GA 30342-1651
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit card processing fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/05/2024	First Data Merchant Services
Amount (\$)	Payee address; City; State; Zip Code
\$151.49	5565 Glenridge Connector NE
	Ste 2000
	Atlanta, GA 30342-1651
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit card processing fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		
L	Sch: 5/15 Rpt: 40/79	Turner, Christopher G. (The Honorable) 00062790	
4	Date	5 Payee name	
L	09/03/2024	First Data Merchant Services	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$57.19	5565 Glenridge Connector NE	
		Ste 2000	
		Atlanta, GA 30342-1651	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Credit card processing fee	
		Croan data processing to	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
	Date	Payee name	
	09/03/2024	First Data Merchant Services	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$26.33	5565 Glenridge Connector NE	
		Ste 2000	
		Atlanta, GA 30342-1651	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
_	Date	Payeo namo	_
	09/03/2024	Payee name First Data Merchant Services	
		Payee address; City; State; Zip Code	
	Amount (\$) \$74.70	5565 Glenridge Connector NE	
	φ14.10	Ste 2000	
		Atlanta, GA 30342-1651	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit card processing fee	
1			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/Oh		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/15 Rpt: 41/79	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	08/08/2024	Grand Peninsula Owners Association Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$900.00	2603 N Grand Peninsula Dr
		Grand Prairie, TX 75054-7209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Town Hall event room rental
L		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/11/2024	Gutierrez, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
		Buda, TX 78610-2765
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign operations consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	08/13/2024	Gutierrez, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
		Buda, TX 78610-2765
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign operations consulting
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	·		Vages	s/Contract Labor		OTHER (enter	a category not liste	ed above)
				The Instruction (Guide explair	ns how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Com	mission Filers)
	Sch: 7/15 Rpt: 42/79		Turner, Chri	stopher G. (Th	ne Honoral	ole)				00062790)	
4	Date	5	Payee name									
	09/13/2024		Gutierrez, S	arah								
6	Amount (\$)	7	Payee addres	s; City;	Sta	te; Zip Co	ode					
	\$2,000.00		401 Middle	Crk								
			Buda, TX 78	8610-2765								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this s	schedule)	(b)	Description				
	OF EXPENDITURE		Consulting E					Check if travel	outsi	de of Texas. Co	mplete Schedule T	
	LXI LINDITORL							\Box		officeholder livi		
								Campaign op	era	ations cons	ulting	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name		Office sou	ıght			Office	held	
	experionality to benefit C/O											
	Date		Payee name									
	09/04/2024		House Dem	ocratic Campa	ign Comm	ittee						
	Amount (\$)		Payee addres	ss; City;	Sta	te; Zip Co	ode					
	\$5,000.00		PO Box 1925									
			Austin, TX 7	8767-1925								
	PURPOSE	(a)		e Categories listed at			(b)	Description				
	OF	``'		e Categories listed at S/Donations M		scneaule)	(~)		outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITURE			Officeholder/Po	,	mittee		Check if Austin	, TX,	officeholder livi	ng expense	
								Contribution				
	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	ıght			Office	held	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	07/31/2024		Internal Rev	enue Service								
	Amount (\$)		Payee addres	ss; City;	Sta	te; Zip Co	ode					
	\$165.00		PO Box 970	030								
			Saint Louis,	MO 63197-00	30							
	PURPOSE	(a)		e Categories listed at		schedulo)	(b)	Description				
	OF	``		ges/Contract I		scriedule)	()		outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITURE		Calalioo, IVa	goor contract .	_0001			Check if Austin	, TX,	officeholder livi	ng expense	
								Payroll taxes				
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	ight			Office	held	
	expenditure to benefit C/OI	Н										
l												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 8/15 Rpt: 43/79	2 FILER NAME Turner, Christopher G. (The Honorable)	Filer ID (Ethics Commission Filers) 00062790
4	Date 08/30/2024	5 Payee name Internal Revenue Service	
6	Amount (\$) \$181.69	7 Payee address; City; State; Zip Code PO Box 970030	
		Saint Louis, MO 63197-0030	
8	PURPOSE OF EXPENDITURE	Galaries/ Wages/ Contract Eabor	tside of Texas. Complete Schedule T. X, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/28/2024	Lone Star Project Non-Federal Account	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25,000.00	6 E St SE	
		Washington, DC 20003-2611	
	PURPOSE OF EXPENDITURE	Contributions/Donations wade by	tside of Texas. Complete Schedule T. X, officeholder living expense Dution
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	07/03/2024	NGP Van	
	Amount (\$) \$469.04	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
	PURPOSE OF EXPENDITURE	Office Overfiedd/Nertial Expense	tside of Texas. Complete Schedule T. X, officeholder living expense abase service
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
1	Sch: 9/15 Rpt: 44/79	2 FILER NAME Turner, Christopher G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062790
4	Date	5 Payee name
	08/07/2024	NGP Van
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$469.04	655 15th St NW
		Ste 650
		Washington, DC 20005-5738
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign database service
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/18/2024	NGP Van
	Amount (\$)	Payee address; City; State; Zip Code
	\$469.04	655 15th St NW
		Ste 650
		Washington, DC 20005-5738
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign database subscription
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/31/2024	Ngo, Vanna
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 540592
	Ψ1,000.00	1 O BOX 340002
		Grand Prairie, TX 75054-0592
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign salary
		Campaign Salary
_	Compulate ONU V if allow :	Condidate/Officeholder some
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	parameter solient of of	

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 10/15 Rpt: 45/79	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	08/30/2024	Ngo, Vanna
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,375.00	PO Box 540592
		Grand Prairie, TX 75054-0592
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	_/	Check if Austin, TX, officeholder living expense
		Campaign salary
_	Complete ONLY if direct	Candidata/Officeholder name Office country Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/30/2024	Ngo, Vanna
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.24	PO Box 540592
		Grand Prairie, TX 75054-0592
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	LA LABITORE	Expense Check if Austin, TX, officeholder living expense
		Mileage reimbursement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	· 	
	Date	Payee name
	07/31/2024	Peterson, Kelly
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1000 San Marcos St
		Unit 176
		Austin, TX 78702-2660
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign salary
	Operation Of the Control of the Cont	Openhalte Office health and a second of the
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission F	-ilers)						
	Sch: 11/15 Rpt: 46/79		•						
4	Date	5 Payee name							
	07/31/2024	Peterson, Kelly							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$260.50	1000 San Marcos St							
		Unit 176							
		Austin, TX 78702-2660							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.							
		Expense Check if Austin, TX, officeholder living expense Mileage reimbursement							
		Willeage TellributSettlefit	i						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	Date	Payee name	i						
	08/30/2024	Peterson, Kelly							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,000.00	1000 San Marcos St							
		Unit 176							
		Austin, TX 78702-2660							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense Campaign salary							
		Campaign saidly							
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
	experientare to benefit 6/01								
	Date	Payee name							
	08/30/2024	Peterson, Kelly							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$260.50	1000 San Marcos St							
		Unit 176							
		Austin, TX 78702-2660							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.							
		Expense Check if Austin, TX, officeholder living expense Mileage reimbursement							
		ivilleage reinibursement							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O	U							
l									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 12/15 Rpt: 47/79	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	09/26/2024	Peterson, Kelly
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$705.82	1000 San Marcos St
		Unit 176
		Austin, TX 78702-2660
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Expense Check if Austin, TX, officeholder living expense
		Mileage reimbursement
_	Occupation ONLY if allocat	Out district Office held a group of the second of the seco
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	<u> </u>	
	Date	Payee name
	07/02/2024	Rodman, Megan
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	5503 Mercedes Ave
		Dallas, TX 75206-5821
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fundraising consulting services
		r unutaising consulting services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/06/2024	Rodman, Megan
	Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave
	\$4,000.00	5505 Mercedes Ave
		Dellag TV 75200 5021
		Dallas, TX 75206-5821
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expanse. Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraising consulting services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Office helder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment			al Committee Legal Services Salaries/Wages/Contract Labor						OTHER (enter a category not listed above)			
	Credit Card Payment			The Instruction Gui	ide explains how to	comp	olete this form.					
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commiss	sion Filers)	
	Sch: 13/15 Rpt: 48/79		Turner, Chris	stopher G. (The	Honorable)				00062790			
4	Date	5	Payee name					•				
	09/05/2024		Rodman, Me	egan								
6	Amount (\$)	7	Payee addres	s; City;	State; Zip	Code	<u>,</u>					
	\$4,000.00		5503 Merced	•								
	+ 1,											
			Dallac TV 7	5206 5021								
_		<u> </u>	Dallas, TX 7			1						
8	PURPOSE OF	(a)		e Categories listed at the	e top of this schedule)	(b	Description	outo	ide of Toyon Co	mulata Cabadula T		
	EXPENDITURE		Consulting E	xpense					, officeholder livir	mplete Schedule T. na expense		
							Campaign fu					
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office	sough	nt		Office h	neld		
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	09/10/2024		Sheraton Arl	inaton Hotel								
	Amount (\$)	┢	Payee addres		State; Zip	Code	<u> </u>					
	\$254.10		•	ntion Center Dr	Otato, 2.p	Oodo	•					
	Ψ204.10		1000 0011101	ntion Center Di								
			Arlington TV	(76011-5116								
	DUDDOOF	⊢				10	· · · · ·					
	PURPOSE OF	(a)		e Categories listed at the	e top of this schedule)	a)	Description Check if travel	oute	ide of Tevas Co	mplete Schedule T.		
	EXPENDITURE		Travel In Dis	trict			<u> </u>		, officeholder livir			
							Lodging for c	am	paign phot	ographer		
	Complete ONLY if direct		Candidate/Offic	eholder name	Office	sough	ıt		Office h	neld		
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	09/10/2024		Sheraton Arl	ington Hotel								
	Amount (\$)		Payee addres	s; City;	State; Zip	Code)					
	\$254.10		1500 Conve	ntion Center Dr								
			Arlington, TX	(76011-5116								
	PURPOSE	(a)	Category (so	e Categories listed at the	o top of this schodulo)	(b) Description					
	OF	ľ` <i>í</i>	Travel In Dis		e top of this scriedule)	`		outs	ide of Texas. Co	mplete Schedule T.		
	EXPENDITURE								, officeholder livir			
							Lodging for c	am	ipaign cons	ultant		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Office	sough	t		Office h	neld		
	experience to beliefft C/OI	' '										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/15 Rpt: 49/79	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	09/09/2024	Southwest Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$672.71	2702 Love Field Dr
L		Dallas, TX 75235-1908
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Photographer air travel
		Campaign inologiaphor an davor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	08/01/2024	Stewart, Thomas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	7710 Islander Dr
		Austin, TX 78749-3030
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contribution refund
		Softwind and Teland
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/11/2024	Thrifty Car Rental
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.84	2424 E 38th St
		Dallas, TX 75261
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related
	EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense
		Campaign photographer car rental
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	\dashv
	Sch: 15/15 Rpt: 50/79	Turner, Christopher G. (The Honorable) 00062790	
4	Date	5 Payee name	
	09/26/2024	Turner, Chris	
6	Amount (\$)	7 Payee address; City; State; Zip Code	\neg
	\$1,729.25	3060 Nadar	
		Grand Prairie, TX 75054-6792	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Mileage reimbursement	
		whicage rembursement	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	4
9	expenditure to benefit C/O		
_			_
	Date	Payee name	
	09/26/2024	Turner, Chris	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,055.80	3060 Nadar	
		Grand Prairie, TX 75054-6792	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Schedule G reimbursement	
		Schedule G reimbursement	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	4
	expenditure to benefit C/O		
			_
			ſ
			- 1

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)				
Sch: 1/21 Rpt: 51/79	Turner, Christopher	r G. (The Honorable)		00062790						
4 CREDIT CARD ISSUER	1	ncial institution n Express	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,217.4	11				
6 PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 09/10/2024	(c) Date(s) Credit Card Issuer 09/20/2024	r Paid						
7 PAYEE	(a) Payee name Agave Democratic	Infrastructure	(b) Payee address; PO Box 51037	City,	State,	Zip Code				
	() 0 :		Austin, TX 78763							
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Political donation							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						
PAYMENT			(c) Date(s) Credit Card Issuer 08/06/2024	r Paid						
PAYEE	Aloft Hotel		(b) Payee address; 4432 S Collins St Arlington, TX 76018-1114	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Staff lodging in district							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						
PAYMENT	(a) Amount Charged \$137.71	(b) Date of Charge 08/10/2024	(c) Date(s) Credit Card Issuer 09/05/2024	r Paid						
PAYEE	(a) Payee name Aloft Hotel		(b) Payee address; 4432 S Collins St Arlington, TX 76018-1114	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Staff lodging in district							
Non-Political	<u> </u>	officeholder living exp	ense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)	
Sch: 2/21 Rpt: 52/79	Turner, Christophe	r G. (The Honorable)		00062790			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,217.41		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$19.00	08/08/2024	09/05/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	American Airlines		1 Skyview Dr				
	Fort Worth, TX 76155-180			01			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cahadula)	(b) Description				
X Political	Travel Out of District	on this schedule)	Travel wifi				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	e sought	Office held				
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$21.00	08/09/2024	09/05/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	American Airlines		1 Skyview Dr				
			Fort Worth, TX 76155-18	01			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE 	(See Categories listed at the top Travel Out of District	of this schedule)	Travel wifi				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 09/20/2024	er Paid			
	\$483.98	09/04/2024	09/20/2024				
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code	
			1 Skyview Dr				
	American Airlines						
			Fort Worth, TX 76155-1801				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description				
	Travel Out of District	of this scriedule)	Travel to attend fire fighte	er memorial cere	emony		
X Political							
Non-Political	\ \frac{1}{2} \ \qquad \qq \qu	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)				
Sch: 3/21 Rpt: 53/79	Turner, Christopher	G. (The Honorable)		00062790						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,217.4	11				
6 PAYMENT	(a) Amount Charged \$695.00	(b) Date of Charge 07/19/2024	(c) Date(s) Credit Card Issuer 08/06/2024	Paid						
7 PAYEE	(a) Payee name American Express		(b) Payee address; 200 Vesey St	City,	State,	Zip Code				
	() 5 :		New York, NY 10281-5525	5						
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Membership fee							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$600.00	(b) Date of Charge 08/06/2024	(c) Date(s) Credit Card Issuer 09/05/2024	[*] Paid						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Arlington ISD Education 1 S		1141 W Pioneer Pkwy Ste 103 Arlington, TX 76013-6368							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Event tickets							
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held						
PAYMENT	(a) Amount Charged \$46.93	(b) Date of Charge 07/24/2024	(c) Date(s) Credit Card Issuer 09/05/2024	Paid						
PAYEE	(a) Payee name		(b) Payee address; 208 S Akard St Dallas, TX 75202-4206	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Campaign phone service							
Non-Political		officeholder living exp	ense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Carididate/Officeriolder/Folitica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how	•	TILK (enter a category	y Hot listed a	Jove)	
1 Total pages Schedule F4:		·	·	3 Filer ID (Ethics Commission Filers)			
Sch: 4/21 Rpt: 54/79		G. (The Honorable)		00062790		,	
4 CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 3,217.41			
6 PAYMENT	(a) Amount Charged \$46.93	(b) Date of Charge 08/25/2024	(c) Date(s) Credit Card Issuer 09/20/2024				
7 PAYEE	(a) Payee name AT&T		(b) Payee address; City, Sta 208 S Akard St Dallas, TX 75202-4206			Zip Code	
8 PURPOSE OF EXPENDITURE X Political	l ' · · · ·	Category Categories listed at the top of this schedule) fice Overhead/Rental Expense (b) Description Campaign phone serivce					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
9 Complete ONLY if direct	e sought	Office held					
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$46.93	(b) Date of Charge 09/24/2024	(c) Date(s) Credit Card Issuer	[*] Paid			
PAYEE	(a) Payee name AT&T		(b) Payee address; 208 S Akard St Dallas, TX 75202-4206	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign phone serivce				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$378.85	(b) Date of Charge 09/18/2024	(c) Date(s) Credit Card Issuer 09/20/2024	⁻ Paid			
PAYEE	(a) Payee name Best Buy		(b) Payee address; 1730 Pleasant Pl Arlington, TX 76015-4500	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Printer and fridge for campaign office				
Non-Political	(*) —	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
I							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(,	,		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)				
	Sch: 5/21 Rpt: 55/79	Turner, Christopher	G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	3,217.4	41		
6	PAYMENT	(a) Amount Charged \$320.41	(b) Date of Charge 08/29/2024	(c) Date(s) 09/20/20) Credit Card Issuei 124	r Paid	Paid			
7	PAYEE	(a) Payee name Dell		(b) Payee 1 Dell W	ay	City,	State,	Zip Code		
Ļ	PURPOSE OF	(a) Category			tock, TX 78682-70	000				
8	EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		(b) Description Campaign computer equipment						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office so				e sought		Office held				
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid				
	. /// <u></u>	\$253.14	09/17/2024	09/20/20	•	. r cac				
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		Driskill Hotel 604 Brazos St		os St						
				Austin, T	X 78701-3212					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging in Austin for hearing						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	Chook in Auduli, 174,	Office held				
	PAYMENT	(a) Amount Charged \$5,071.25	(b) Date of Charge 09/10/2024	(c) Date(s) 09/20/20) Credit Card Issuer)24	r Paid				
	PAYEE	(a) Payee name Edwards & Patterso	on Signs	(b) Payee address; 203 S Belt Line Rd Irving, TX 75060-2158		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Printing Expense	of this schedule)	(b) Descrip Campaig	•					
1	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	sion Filers)	
Sch: 6/21 Rpt: 56/79	Turner, Christopher	G. (The Honorable)		00062790			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREI CARD	\$	\$ 3,217.41		
6 PAYMENT	(a) Amount Charged \$350.00	(b) Date of Charge 08/19/2024	(c) Date(s) Credit Card Iss 09/20/2024	uer Paid			
7 PAYEE	(a) Payee name Heart Led Digital		(b) Payee address; 134 S Cypress Ave	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	XPENDITURE (See Categories listed at the top of this schedule) Consulting Expense Digital communications compared to the communication of the communica						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Officeholder name			e sought	Office held			
PAYMENT	(a) Amount Charged \$1,766.00	(b) Date of Charge 09/21/2024	(c) Date(s) Credit Card Iss	uer Paid			
PAYEE	(a) Payee name Jumbo Property Management		(b) Payee address; 9700 Apex Dr Fort Worth, TX 76108-2	City, 2186	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Sign distribution and placement				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living e	xpense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$199.94	(b) Date of Charge 07/16/2024	(c) Date(s) Credit Card Iss 08/06/2024	uer Paid			
PAYEE	(a) Payee name JW Marriott		(b) Payee address; 110 E 2nd St Austin, TX 78701-4649	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging in Austin				
Non-Political	(*)	of Texas. Complete Schedule T.	<u> </u>				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 7/21 Rpt: 57/79	Turner, Christopher	G. (The Honorable)		00062790				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,217.4	1 1		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$317.65	07/30/2024	09/05/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	JW Marriott		110 E 2nd St					
			Austin, TX 78701-4649					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Lodging in Austin to atten	nd hoaring				
X Political	Travel Out of District	·	Loughly in Austin to atten	id Hearing				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		, officeholder living exp	iceholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH	() 4 () 4	I (1) D (1 (1)						
PAYMENT	(a) Amount Charged \$16.34	(b) Date of Charge 07/29/2024	(c) Date(s) Credit Card Issuer Paid 09/05/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	JW Marriott		110 E 2nd St					
			Austin, TX 78701-4649					
PURPOSE OF	(a) Category	of this cohodule)	(b) Description					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	•	Travel meal					
X Political								
Non-Political	· · · —	of Texas. Complete Schedule T.						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$258.66	08/17/2024	09/05/2024					
PAYEE	(a) Payee name	L	(b) Payee address;	City,	State,	Zip Code		
	JW Marriott		110 E 2nd St					
			Austin, TX 78701-4649					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Lodging in Austin to attend hearing					
X Political	Travel Out of District							
Non-Political	(1)	of Texas. Complete Schedule T.		, officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	<u> </u>							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this fo	rm.	_		
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 8/21 Rpt: 58/79	Turner, Christopher	G. (The Honorable)			00062790		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF U EXPENDITUI CHARGED T CARD	RES	\$ 3,217.		11
6 PAYMENT	(a) Amount Charged \$350.00	(b) Date of Charge 09/12/2024	(c) Date(s) Cred 09/20/2024	it Card Issuer	Paid		
7 PAYEE	(a) Payee name Legislative Solution	s	(b) Payee addre 807 Brazos St Ste 714 Austin, TX 787		City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Solicitation/Fundraisir		(b) Description Email blast for	· fundraising	event		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Ch	eck if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged \$541.25	(b) Date of Charge 09/04/2024	(c) Date(s) Cred 09/20/2024	it Card Issuer	Paid		
PAYEE	(a) Payee name Manna Juice		(b) Payee address; 3806 E Broad St Ste 128 Mansfield, TX 76063-562		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Epic Fit Fest S				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Ch	eck if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$311.04	(b) Date of Charge 07/10/2024	(c) Date(s) Cred 08/06/2024	it Card Issuer	Paid		
PAYEE	(a) Payee name Marriott		(b) Payee addre 304 E Cesar C Austin, TX 787	Chavez St	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging in Au		d hearing		
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		eck if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	. ,	,
1 Total pages Schedule F	1: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 9/21 Rpt: 59/79	Turner, Christophe	r G. (The Honorable)			00062790		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	3,217.4	41
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$216.41	09/21/2024					
7 PAYEE	(a) Payee name Marriott		(b) Payee 304 E Ce	address; esar Chavez St	City,	State,	Zip Code
				X 78701-4006			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging in Austin for meetings with Capitol staff				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	e sought		Office held				
PAYMENT	(a) Amount Charged \$399.58	(b) Date of Charge 08/10/2024	(c) Date(s) 09/05/20) Credit Card Issuer 24	r Paid		
PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code
	JW Marriott		1331 Pennsylvania Ave NW				
			Washington, DC 20004				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholde	<u> </u>	e sought	ш	Office held	•	
PAYMENT	(a) Amount Charged \$9.90	(b) Date of Charge 08/09/2024	(c) Date(s) 09/05/20) Credit Card Issuer 24	r Paid		
PAYEE	(a) Payee name Marriott	,		address; nnsylvania Ave N ton, DC 20004-1		State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descrip Travel m	otion			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/Ol		r name Offic	e sought		Office held		
	•						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethics Commission Filers)			
	Sch: 10/21 Rpt: 60/79	Turner, Christopher	G. (The Honorable)				00062790			
4	CREDIT CARD ISSUER		ncial institution revious	E	XPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	3,217.4	1	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			Credit Card Issuer	Paid			
		\$500.00	08/19/2024	09/	05/202	4				
7	PAYEE	(a) Payee name		(b) F	Payee address; City,			State,	Zip Code	
		Rhetta Bowers Can	Rowlett, TX 75088-4048							
8	PURPOSE OF	(a) Category		(b) [Descripti	on				
	EXPENDITURE X Political	(See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	Poli	tical co	ntribution				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Γ	Check if Austin, TX,	officeholder living expe	ense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e soug	ht		Office held			
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$2,500.00	(b) Date of Charge 08/14/2024		oate(s) (05/202	Credit Card Issuer 4	Paid			
	PAYEE	PAYEE (a) Payee name (b) Payee address;		ddress;	City,	State,	Zip Code			
		Robert McGinty Campaign		700 E Abram St						
				_		TX 76010-1257				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Political contribution						
	X Political	Contributions/Donatio	ns Made By	Poli	ilicai co	nunbuuon				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e soug	ht		Office held			
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$2,500.00	(b) Date of Charge 08/14/2024	` '	0ate(s) 0 05/202	Credit Card Issuer 4	· Paid			
	PAYEE	(a) Payee name		(b) F	ayee a	ddress;	City,	State,	Zip Code	
			•	110	0 E Bro	oad St				
		Sandra Lee Campa	ugn	Ste	201					
				Mansfield, TX 76063-1870						
	PURPOSE OF	(a) Category	6 11. 1.11.		Descripti					
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Poli	tical co	ntribution				
	X Political	Candidate/Officeholde								
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e soug	ht		Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	Candidate/Officeriolder/Folitica	ŭ	ruction Guide explains how	•	TTIEN (enter a categor	y not listed a	bove)	
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethic	cs Commis	sion Filers)	
	Sch: 11/21 Rpt: 61/79		G. (The Honorable)		00062790		,	
4	CREDIT CARD ISSUER	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	\$ 3,217.41		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$326.93	09/20/2024					
7	PAYEE	(a) Payee name SpringHill Suites	(b) Payee address; 402 South Tejon St Colorado Springs, CO 809			State,	Zip Code	
Ļ		(-) O-t		<u> </u>	903			
8	EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District Lodging to attend cerem			(b) Description Lodging to attend ceremo	ny			
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, o			officeholder living exp	ense			
9	9 Complete ONLY if direct Candidate/Officeholder name Office sought			Office held				
е	xpenditure to benefit C/OH		-					
	PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 07/15/2024	(c) Date(s) Credit Card Issue 08/06/2024	r Paid			
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Store More Storage)	4660 S State Highway 36	0			
L				Grand Prairie, TX 75052-	4492			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign storage				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 08/15/2024	(c) Date(s) Credit Card Issue 09/05/2024	r Paid			
Г	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Store More Storage	•	4660 S State Highway 36	0			
L				Grand Prairie, TX 75052-	4492			
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign storage						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check			Check if Austin, TX,	officeholder living exp	ense			
е	Complete ONLY if direct xpenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)			
Sch: 12/21 Rpt: 62/79	Turner, Christopher	r G. (The Honorable)			00062790					
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDIT	UNITEMIZED TURES TO A CREDIT	\$	3,217.4	11			
6 PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 09/15/2024	(c) Date(s) Cr 09/20/2024	edit Card Issuer	Paid					
7 PAYEE	(a) Payee name Store More Storage	•	(b) Payee address; City, State, Zip 4660 S State Highway 360 Grand Prairie, TX 75052-4492							
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign storage							
			officeholder living exp	ense						
9 Complete ONLY if direct expenditure to benefit C/OH (a) Assert Character (b) Date of Character (c) Assert Character (d) Date of C					Office held					
PAYMENT	(a) Amount Charged \$300.00	(b) Date of Charge 08/22/2024	(c) Date(s) Cr 09/20/2024	edit Card Issuer	[*] Paid					
PAYEE	(a) Payee name Tarrant County Der	mocratic Party	Ste 400	dress; Sias Memoria TX 76134-130	·	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Descriptio Political con							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 09/07/2024	(c) Date(s) Cr 09/20/2024	edit Card Issuer	⁻ Paid					
PAYEE	(a) Payee name Tarrant County Der	mocratic Party	(b) Payee address; City, State, Zi 685 John B Sias Memorial Pkwy Ste 400 Fort Worth, TX 76134-1304				Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ons Made By er/Political Committee	(b) Description Political contribution nmittee							
Non-Political	of Texas. Complete Schedule T.									
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	s Commiss	sion Filers)			
Sch: 13/21 Rpt: 63/79	Turner, Christophe	r G. (The Honorable)		00062790					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,217.4	11			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$500.00	08/19/2024	09/05/2024						
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
	Terry Meza Campa	iign	PO Box 155076						
			Irving, TX 75015-5076						
8 PURPOSE OF EXPENDITURE	(a) Category	of this cohodula)	(b) Description						
X Political	Contributions/Donation	Categories listed at the top of this schedule) ntributions/Donations Made By ndidate/Officeholder/Political Committee							
			, officeholder living exp	ense					
9 Complete ONLY if direct Candidate/Officeholder name Office sought			Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$8,207.52	09/23/2024							
PAYEE (a) Payee name			(b) Payee address;	City,	State,	Zip Code			
	Texas Live!		1650 E Randol Mill Rd						
			Arlington, TX 76011-6219)					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Solicitation/Fundraisir		(b) Description Fundraising event venue and catering						
X Political	Solicitation/i anaraisii	iig Experise							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.							
Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$9.90	(b) Date of Charge 07/09/2024	(c) Date(s) Credit Card Issue 08/06/2024	r Paid					
	Ψ0.00	0170072021							
PAYEE	(a) Payee name	<u>I</u>	(b) Payee address;	City,	State,	Zip Code			
			1544 Market St						
	Uber		Ste 400						
			San Francisco, CA 94102	2-6007					
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Transportation Equip	,	Ground transportation						
X Political	Expense	mont / ma restated							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	e T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Offic	Office sought Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:		3 Filer ID (Ethic	s Commiss	sion Filers)			
	Sch: 14/21 Rpt: 64/79	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	3,217.4	11
6	PAYMENT	(a) Amount Charged \$15.28	(b) Date of Charge 07/08/2024	(c) Date(s) 08/06/20	Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip C 1544 Market St Ste 400 San Francisco, CA 94102-6007				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Ground transportation				
				Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held				
	PAYMENT	(a) Amount Charged \$3.00	(b) Date of Charge 07/08/2024	(c) Date(s) 08/06/20	Credit Card Issue 24	r Paid		
PAYEE (a) Payee name Uber				(b) Payee 1544 Ma Ste 400 San Fran		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$14.81	(b) Date of Charge 07/31/2024	(c) Date(s) 09/05/20	Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee 1544 Ma Ste 400 San Fran		City, 2-6007	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Transportation Equipr Expense (c) Check if travel outside	,	(b) Descrip Ground to	ransportation	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	·	e sought		Office held		
е	xpenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeriolder/Folitica	3	ruction Guide explains how	•	TITEN (enter a categor	y not listed a	bove)
1	Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME					
	Sch: 15/21 Rpt: 65/79		G. (The Honorable)		3 Filer ID (Ethic 00062790		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,217.4	1 1
6	PAYMENT	(a) Amount Charged \$2.23	(b) Date of Charge 07/31/2024	(c) Date(s) Credit Card Issuel 09/05/2024	r Paid		
7	PAYEE	(a) Payee name Uber	Uber 1544 Market St Ste 400 San Francisco, CA 94102-6 Category (b) Description				Zip Code
8	EXPENDITURE (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Ground transportation						
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	—	officeholder living exp	ense	
9	· —	Candidate/Officeholder	name Office	e sought	Office held		
е	expenditure to benefit C/OH		T				
	PAYMENT	(a) Amount Charged \$34.15	(b) Date of Charge 07/31/2024	(c) Date(s) Credit Card Issuel 09/05/2024	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Ground transportation	-0007		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$14.82	(b) Date of Charge 07/31/2024	(c) Date(s) Credit Card Issue 09/05/2024	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102	City, :-6007	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	ment And Related	(b) Description Ground transportation			
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, office holder living expense						
е	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
l							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)			
Sch: 16/21 Rpt: 66/79	Turner, Christopher	r G. (The Honorable)		00062790					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	3,217.4	11			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$10.98	07/30/2024	09/05/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Uber		1544 Market St Ste 400 San Francisco, CA 94102	2-6007					
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense	,	Ground transportation						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin,			, officeholder living exp	ense					
9 Complete ONLY if direct Candidate/Officeholder name Office sought			e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$3.00	(b) Date of Charge 07/30/2024	(c) Date(s) Credit Card Issue 09/05/2024	r Paid					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Uber		1544 Market St Ste 400 San Francisco, CA 94102	2-6007					
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense		Ground transportation						
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$42.78	(b) Date of Charge 07/30/2024	(c) Date(s) Credit Card Issue 09/05/2024	er Paid					
PAYEE	(a) Payee name	l .	(b) Payee address;	City,	State,	Zip Code			
			1544 Market St						
	Uber		Ste 400						
			San Francisco, CA 94102	2-6007					
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top	,	Ground transportation						
X Political	Transportation Equipment And Related Expense								
Non-Political	(c) Check if travel outside	T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					
i e									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 17/21 Rpt: 67/79	Turner, Christopher	G. (The Honorable)				00062790			
4	CREDIT CARD ISSUER		ncial institution revious	E (EXPEND	F UNITEMIZED TURES D TO A CREDIT	\$	3,217.4	1	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid			
		\$7.11	08/08/2024	09	9/05/2024	1				
7	PAYEE	(a) Payee name		(b)	Payee ac	ldress;	City,	State,	Zip Code	
		Uber		Ste	44 Mark e 400 ın Franci	et St sco, CA 94102-	-6007			
8	PURPOSE OF	(a) Category		(b)	Description	on				
	EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense	· · · · · · · · · · · · · · · · · · ·	Gr	ound tra	nsportation				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense		
9	Complete ONLY if direct Candidate/Officeholder name Office sought			Office held						
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	` ′		redit Card Issuer	Paid			
		\$45.93	08/10/2024	09	9/05/2024	1				
	PAYEE	(a) Payee name	•	(b)	Payee ac	ldress;	City,	State,	Zip Code	
		Uber			44 Mark e 400	et St				
				Sa	ın Franci	sco, CA 94102-	-6007			
	PURPOSE OF	(a) Category	-f.Ab.; le le d - \	1 ` ′	Description					
	EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense		Gr	ound tra	nsportation				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Г	Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officeholder		ce sou	ıght	_	Office held			
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$37.01	(b) Date of Charge 08/09/2024	` ′	Date(s) C 9/05/2024	credit Card Issuer 1	· Paid			
	PAYEE	(a) Payee name	<u> </u>	(b)	Payee ac	ldress;	City,	State,	Zip Code	
				15	44 Mark	et St				
		Uber		Ste	e 400					
				Sa	ın Franci	sco, CA 94102-	-6007			
	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE (See Categories listed at the top of this schedule) Transportation Equipment And Related			Gr	ound tra	nsportation				
X Political Expense										
L	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin				Check if Austin, TX,	officeholder living expe	ense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sou	ıght		Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 18/21 Rpt: 68/79	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	3,217.4	41
6	PAYMENT	(a) Amount Charged \$5.48	(b) Date of Charge 08/09/2024	(c) Date(s) 09/05/20) Credit Card Issuei 124	r Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee 1544 Ma Ste 400 San Frar		City, -6007	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Ground transportation						
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, o			officeholder living exp	ense			
9 e	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held			
Ĕ	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	Aimeni	\$28.47	09/20/2024	(c) Bate(s	y Great Gara 1990er	T did		
PAYEE (a) Payee name (b) Payee address; 1544 Market St Ste 400				rket St	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Descri	ncisco, CA 94102 ption ransportation	-6007		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$19.56	(b) Date of Charge 09/20/2024	(c) Date(s) Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee 1544 Ma Ste 400 San Frar	•	City, -6007	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Ground to						
L	Non-Political	· · · —	of Texas. Complete Schedule T.	o oouebt	Check if Austin, TX,	Office hold	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
1								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total	pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)					
Sch:	19/21 Rpt: 69/79	Turner, Christopher	G. (The Honorable)			00062790					
4 CREI	DIT CARD ER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	3,217.4	41			
6 PAY	MENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	r Paid					
		\$28.79	09/20/2024								
7 PAY	EE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
		Uber		1544 Market St							
		Ober	Ste 400								
				San Franc	isco, CA 94102	-6007					
	POSE OF	(a) Category		(b) Descripti							
EXPE	ENDITURE	(See Categories listed at the top Transportation Equipr		Ground tra	ensportation						
X	Political	Expense	neni And Neialed								
	Non-Political (c) Check if travel outside of Texas. Complete Sched			<u>'</u> г	Check if Austin, TX,	officeholder living exp	ense				
9 Comp	9 Complete ONLY if direct Candidate/Officeholder name			e sought	<u> </u>	Office held					
expendi	ture to benefit C/OH										
PAY	MENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	r Paid					
		\$26.76	09/20/2024								
PAY	EE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
				1544 Market St							
		Uber		Ste 400							
				San Franc	isco, CA 94102	-6007					
PURI	POSE OF	(a) Category		(b) Description							
EXPE	ENDITURE	(See Categories listed at the top	,	Ground tra	ensportation						
X	Political	Transportation Equipr Expense	neni Anu Reialeu								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
Comp	olete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
expendi	ture to benefit C/OH										
PAYI	MENT	(a) Amount Charged	(b) Date of Charge	` ' ` '	Credit Card Issuer	r Paid					
		\$256.00	08/15/2024	09/05/202	4						
PAY	EE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
				1301 E Ba	rdin Rd						
		United States Posta	al Service								
				Arlington,	TX 76018-2130						
PURI	PURPOSE OF (a) Category			(b) Descripti	ion						
EXPE	EXPENDITURE (See Categories listed at the top of this schedule)			PO Box Re	enewal						
X	X Political Office Overhead/Rental Expense										
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					officeholder living exp	ense				
Complete ONLY if direct Candidate/Officeholder name Office sought					_	Office held					
expendi	ture to benefit C/OH										
		-									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 20/21 Rpt: 70/79	Turner, Christopher	r G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$	3,217.4	11		
6	PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 07/04/2024	(c) Date(s) 0 08/06/202	Credit Card Issuer 4	er Paid				
7	PAYEE	(a) Payee name Verizon Wireless			row Park Ln	City,	State,	Zip Code		
L					, FL 32746-561	2				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Campaign	on hotspot service					
				Check if Austin, TX,	officeholder living exp	ense				
9				e sought		Office held				
٢	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 08/04/2024	(c) Date(s) 0 09/05/202	Credit Card Issuer 4	· Paid				
	PAYEE	(a) Payee name	I .	(b) Payee a	ddress;	City,	State,	Zip Code		
		Verizon Wireless		899 Heath	row Park Ln					
L				Lake Mary, FL 32746-5612						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descripti Campaign	on hotspot service	:				
	Non-Political	(a) Chapte if traval autoida	of Texas. Complete Schedule T.	<u> </u>	Charle if Austin TV	officebolder living over				
H	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder		<u>L</u> e sought	Check if Austin, 1X,	officeholder living exp	ense			
-	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 09/04/2024	(c) Date(s) 0 09/20/202	Credit Card Issuer 4	Paid				
Verizon Wireless 899 He				ddress; row Park Ln r, FL 32746-561	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Descripti Campaign	on hotspot service	:				
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica	-		-	THER (enter a category not	listed above)
4. Tatal manage Calculula E4.		ruction Guide explains how	to complete this form.	C File ID (Fabine Co	
1 Total pages Schedule F4:		C (The Henerable)		3 Filer ID (Ethics Co	ommission Filers)
Sch: 21/21 Rpt: 71/79		G. (The Honorable)	T	00062790	
4 CREDIT CARD ISSUER	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$ 3,	217.41
ISSOLK	see pr	revious	CHARGED TO A CREDIT	1'	
			CARD		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid	
	\$495.47	09/04/2024	09/20/2024		
7 PAYEE	(a) Payee name		(b) Payee address;	City, S	tate, Zip Code
	American Airlines		1 Skyview Dr		
	American Airlines				
			Fort Worth, TX 76155-180	01	
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description		
EXPENDITURE	Travel Out of District	of this scriedule)	Travel to attend fire fighte	r memorial ceremo	ony
X Political					
Non-Political	(c) X Check if travel outside			officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid	
	\$2,516.32	08/28/2024	09/20/2024		
PAYEE	(a) Payee name		(b) Payee address;	City, S	tate, Zip Code
	Reilly Echols Printir	ng.	1710 S Harwood St		
	Reliiy Echois Philitii	ig			
			Dallas, TX 75215-1221		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	·	
l <u> </u>	Printing Expense	or trile concuain,	Fundraiser invitation printi	ing	
X Political					
Non-Political	<u> </u>	of Texas. Complete Schedule T.	_	officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held	
expenditure to benefit C/OH					
1					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committ Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Printing Expense Printing Expense					
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
_	Sch: 1/3 Rpt: 72/79	-	Turner, Christopher G. (The Honorable)	hristopher G. (The Honorable)					
4	Date	5	Payee name						
	07/29/2024		AT&T						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode				
	\$76.94		208 S Akard St						
	Reimbursement from political contributions intended		Dallas, TX 75202-4206						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description	С	heck if travel outside of Texas. Complete Schedule T.		
	OF		Office Overhead/Rental Expense			c	heck if Austin, TX, officeholder living expense		
	EXPENDITURE		·		Campaign portion	n o	f wireless bill		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		
	Date		Payee name						
	08/29/2024		AT&T						
	Amount (\$)	H	Payee address; City; State;	Zip Co	ode				
	\$76.94		208 S Akard St	,					
	,		200 07						
	X Reimbursement from political contributions intended		Dallas, TX 75202-4206						
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	С	heck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Office Overhead/Rental Expense			c	heck if Austin, TX, officeholder living expense		
	EXI ENDITORE		· ·			ion of wireless bill			
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		
	Date		Payee name						
	08/08/2024		American Airlines						
	Amount (\$)	T	Payee address; City; State;	Zip Co	ode				
	\$679.95		1 Skyview Dr						
	Reimbursement from		•						
	X political contributions intended		Fort Worth, TX 76155-1801						
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description x	=	heck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Travel Out of District		L	_	heck if Austin, TX, officeholder living expense		
					Flight to attend W	/hi	te House event		
	Complete ONLY if direct	<u>l</u> Car	ndidate/Officeholder name		Office sought		Office held		
	expenditure to benefit C/OH				-				
L									

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ov Polling Ex Printing E Salaries/	Expense Wages/Contract Labor	Suicitation Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 2/3 Rpt: 73/79		Turner, Christopher G. (The Honorable))		00062790			
4	Date	5	Payee name						
ľ	08/21/2024	ľ	Apple						
<u>-</u>	Amount (\$)	7	• •	Zip Co	nde				
ľ	\$14.06	ľ	1 Apple Park Way	Zip Ct	ouc				
l		Ms 927-4INV							
l	X Reimbursement from political contributions								
L	intended		Cupertino, CA 95014-0642						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.			
l	EXPENDITURE		Office Overhead/Rental Expense		L L	Check if Austin, TX, officeholder living expense			
l					Apple+ news sub	oscription			
L									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held			
Г	Date		Payee name						
l	07/21/2024		Apple						
Г	Amount (\$)		Payee address; City; State;	Zip Co	ode				
l	\$14.06		1 Apple Park Way						
Reimbursement from			Ms 927-4INV						
	X political contributions intended		Cupertino, CA 95014-0642						
H	PURPOSE	H	Category (See Categories listed at the top of this sche	dule)	Description	Check if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE			Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense			
				bscription					
l									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held			
Г	Date	Г	Payee name						
l	09/21/2024		Apple						
Г	Amount (\$)	T	Payee address; City; State;	Zip Co	ode				
l	\$14.06		1 Apple Park Way						
l	Reimbursement from		Ms 927-4INV						
l	X political contributions intended		Cupertino, CA 95014-0642						
⊢	PURPOSE	┝	Category (See Categories listed at the top of this sche	dule)	Description	Check if travel outside of Texas. Complete Schedule T.			
l	OF		Office Overhead/Rental Expense	aaioj		Check if Austin, TX, officeholder living expense			
l	EXPENDITURE		Onice Overneau/Nerital Expense		Apple+ news sub	scription			
						•			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 3/3 Rpt: 74/79 Turner, Christopher G. (The Honorable) 00062790 Date Payee name 09/18/2024 Costco Wholesale Amount (\$) Payee address; State; Zip Code \$169.74 600 W Arbrook Blvd Reimbursement from political contributions Х intended Arlington, TX 76014-3702 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/13/2024 Loews Hotel Amount (\$) Payee address; City; State; Zip Code \$10.00 888 Nolan Ryan Expy Reimbursement from political contributions Χ Arlington, TX 76011-4924 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Transportation Equipment And Related **EXPENDITURE** Expense Parking Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		•	ages Schedule K: /3 Rpt: 75/79	
2	FILER NAME		3	Fi	ler ID	(Ethics Commission F	-ilers)
	Turner, Chris	stopher G. (The Honorable)		0	0062	790	
4	Date	5 Name of person from whom amount is received	T	8 Amount (\$)			
	08/08/2024	Amazon				(+)	\$79.19
							4.0.20
		6 Address of person from whom amount is received; City; State; Zip Code					
		Seattle, WA 98109					
			01 1 11 111				
			Check if polition	cal	contri	ibution returned to filer	
L		Purchase refund					
	Date	Name of person from whom amount is received				Amount (\$)	
	09/23/2024	Amazon					\$24.89
		Address of person from whom amount is received; City; State; Zip Code	•••••				
		Seattle, WA 98109					
		<u> </u>	Check if politic	cal	contri	ibution returned to filer	
		Purchase refund	Oncok ii politi	oui	0011111	ibation rotalities to mor	
H							
	Date	Name of person from whom amount is received				Amount (\$)	
	07/06/2024 American Express Address of person from whom amount is received; City; State; Zip Code						\$10.00
		New York, NY 10285					
		Purpose for which amount is received	Check if polition	cal	contri	ibution returned to filer	
		Wireless credit					
F	Date	Name of person from whom amount is received				Amount (\$)	
	08/08/2024	American Express				,	\$10.00
		Address of person from whom amount is received: City; State; Zip Code					,
		Address of person from whom amount is received, Gity, State, Zip Code					
		New York, NY 10285					
			Charle if maliti			ila, ski a sa waku wa a al ka fila w	
		Wireless credit	спеск ії роші	cai	contri	ibution returned to filer	
L		viieless cieuit					
	Date	Name of person from whom amount is received				Amount (\$)	
	09/08/2024	American Express					\$10.00
		Address of person from whom amount is received; City; State; Zip Code	•••••				
1							
		New York, NY 10285					
1		Purpose for which amount is received	Check if politi	cal	contri	ibution returned to filer	
		Wireless credit					
\vdash							

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

SCHEDULE K

<u> </u>									
	The Instru	cti	on Guide explains how to complete this form.		1			ages Schedule K: 2/3 Rpt: 76/79	
2	FILER NAME				3		Filer ID	(Ethics Commission	n Filers)
	Turner, Christopher G. (The Honorable)						00062	2790	
4	Date	5	Name of person from whom amount is received					8 Amount (\$)	
	08/12/2024								\$19.00
l			Address of person from whom amount is received; City; State; Zip Code	1					
			New York, NY 10285						
		7	Purpose for which amount is received	Che	ck if polit	tica	al cont	ribution returned to file	er
			Fee refund		·				
H	Date	H	Name of person from whom amount is received					Amount (\$)	
	08/14/2024		American Express					Amount (\$)	\$21.00
	00/14/2024	ļ							Ψ21.00
			Address of person from whom amount is received; City; State; Zip Code	е					
			New York, NY 10285						
		H	Purpose for which amount is received	7 Che	ck if nolit	tic	al cont	I ribution returned to file	ar .
			Fee refund	Cite	ck ii polit	lica	ai com	indution retained to like	51
H		<u> </u>						T	
	Date		Name of person from whom amount is received					Amount (\$)	****
	09/02/2024	ļ	American Express						\$200.00
			Address of person from whom amount is received; City; State; Zip Code	е					
			Now York NV 1020E						
		⊢	New York, NY 10285		1.16 11:				
			Purpose for which amount is received Dell credit	Che	ck if polit	tica	al cont	ribution returned to file	er
L			Deli credit						
	Date		Name of person from whom amount is received					Amount (\$)	
	09/26/2024	<u> </u>	American Express						\$732.56
			Address of person from whom amount is received; City; State; Zip Code	е					
		L	New York, NY 10285						
			Purpose for which amount is received	Che	ck if polit	tica	al cont	ribution returned to file	er
L			Savings account interest						
	Date		Name of person from whom amount is received					Amount (\$)	
	08/28/2024		Bank of America						\$1,952.76
		ļ	Address of person from whom amount is received; City; State; Zip Code			••••		1	
		L	Tampa, FL 33622						
			Purpose for which amount is received	Che	ck if polit	tica	al cont	ribution returned to file	er
			CD account interest						
		•							

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 77/79 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Turner, Christopher G. (The Honorable) 00062790 5 Name of person from whom amount is received 8 Amount (\$) 09/26/2024 \$2,292.88 Bank of America 6 Address of person from whom amount is received; City; State; Zip Code Tampa, FL 33622 Purpose for which amount is received Check if political contribution returned to filer CD account interest

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

CH			

The Insti	ruction C	1 Total pages Schedule T: Sch: 1/2 Rpt: 78/79							
2 FILER NAME			3 Filer ID (Ethics Commission Filers)						
Turner, Christop	ner G. (Tr	ne Honorable)	00062790						
	4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee American Airlines								
5 Contribution / Expe	enditure rep	oorted on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1				
Schedule F2	브	Schedule F4		Schedule H	Schedule COH-UC				
Scriedule F2	. Ш	Scriedule F4	X Schedule G	Scriedule H	Schedule COH-OC				
6 Dates of Travel	Dates of Travel 7 Name of person(s) traveling Turner, Chris								
	8 Depart	ure city or name of	departure location						
08/08/2024	Dallas	Fort Worth							
	9 Destina	ation city or name o	of destination location						
08/08/2024		ington DC							
10 Means of transport	<u>I</u> tation	11 Purpose of tra	vel (including name of c	onference, seminar, or	other event)				
Commercial Airp		· ·	nd White House even		,				
Name of Contribut	or / Corpora	ation or Labor Orga	anization / Pledgor /Paye	ee					
American Airline	s.								
Contribution / Expe	enditure rep	oorted on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1				
Schedule F2		Schedule F4	X Schedule G	Schedule H	Schedule COH-UC				
Deter of Toward									
Dates of Travel Name of person(s) traveling									
		r, Chris							
			departure location						
08/09/2024	Washi	ington DC							
	Destina	ation city or name o	of destination location						
08/09/2024	Dallas	Fort Worth							
Means of transpor	Means of transportation Purpose of travel (including name of conference, seminar, or other event)								
Commercial Airp	Commercial Airplane Flight to attend White House event								
Name of Contribut	or / Corpor	ation or Lahor Orga	anization / Pledgor /Paye	20					
American Airline		ation of Labor Orge	anization / ricagor /r aye						
Contribution / Expe		oorted on:							
Schedule A2		Schedule B	Schedule B(J)	Cabadula C2	Cabadula D. Cabadula F1				
I <u>=</u>				Schedule C2	Schedule D Schedule F1				
Schedule F2	X	Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
Dates of Travel	Name	of person(s) traveli	ng						
	Turne	r, Chris							
Departure city or name of departure location									
09/20/2024 Austin									
Destination city or name of destination location									
09/20/2024	09/20/2024 Colorado Springs								
	l		vel (including name of o	onference cominar or	other event)				
Means of transport Commercial Airp		· ·	vel (including name of coend fire fighter memor		oniei eveni)				
Commercial Alfp	лане	i i avei lo alle	ine lighter memor	iai ceremony					

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS Name of Contributor / Corporation or Labor Organization / Pledgor /Payee **American Airlines** 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1 Schedule F2 X Schedule F4 Schedule G Schedule H Schedule COH-UC Name of person(s) traveling 6 Dates of Travel Turner, Chris 8 Departure city or name of departure location 09/22/2024 Colorado Springs Destination city or name of destination location 09/22/2024 Dallas Fort Worth 11 Purpose of travel (including name of conference, seminar, or other event) 10 Means of transportation Commercial Airplane Travel to attend fire fighter memorial ceremony