CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this fo	orm. 1 Filer ID (Ethics Commission 00088008		2 Total pages filed: 25
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST		MI	OFFICE USE ONLY
NAME	Mr. Arthur	D.		Date Received ELECTRONICALLY FILED
	NICKNAME LAST		SUFFIX	10/07/2024
	Trey Wharto	on		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #	; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 1242			Receipt # Amount
Change of Address	Livertoville, TV 77242			
Change of Address	Huntsville, TX 77342			Date Processed
				Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRST		MI	
TREASURER NAME	Mr. Clinton	т.		
	NICKNAME LAST		SUFFIX	
	McLare	n		
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLE	EASE); APT /	SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	1 Grapevine Cir			
(Residence or Business)	Livertoville TV 77220			
	Huntsville, TX 77320			
7 CAMPAIGN	AREA CODE PHONE NUMB	ER EXTENSION		
TREASURER PHONE	(936) 661-3711			
8 REPORT TYPE				1
ITPE	January 15 X 30th d	ay before election R	unoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 Sth da	y before election Ex	xceeded modified	Final Report (Attach C/OH-FR)
		re re	porting limit	, , , , , , , , , , , , , , , , , , , ,
9 PERIOD	Month Day Year		Month Day	Year
COVERED	07/01/2024	THROUGH	09/26/2024	Į.
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
	11/05/2024	X General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
	, , ,			tive Place Huntsville District 12
		GO TO PAGE 2		
I				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 25

13 C / OH NAME	Wharton, Arthur D. (N	Mr.)	14 Filer ID (E 00088008	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or officel	holder's knowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
<u>Λ</u>	X GENERAL	TEXAS ALLIANCE FOR LIFE PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 CETNRE PARK DRIVE SUITE 380		
		AUSTIN, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		SHAW, JAMES		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
		4505 CORAZON CV		
		ROUND ROCK, TX 78681		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 34,592.50
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 19,271.44
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 32,893.38
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 40,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mr. A	Arthur D. Wharton	
		Signature of	Candidate or Officehold	ler
AFFIX NO	TARY STAMP / SEAL AB	OVE		
		aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of offi	por administering	Printed name of officer administering	Title of officer	administering seth
Signature of office	cer administering	Printed name of officer administering	i itle of officer	administering oath

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH ADDENDUM

Page 3 of 25

				rage 3 of 23
/ OH NAME	Wharton, Arthur D. (N	<u></u> Иг.)	Filer ID 00088008	(Ethics Commission Filers)
7 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have b	of political expenditures by political committees been made without the candidate's or officeho d to report this information only if they receive	lder's knowledge or c	onsent. Candidates and
,	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	TREPAC		
		COMMITTEE ADDRESS		
	SPECIFIC	1115 San Jacinto Blvd		
		Suite 200		
		Austin, TX 78701		
		COMMITTEE CAMPAIGN TREASURER NA	ME	
		Cantu, Leslie		
		COMMITTEE CAMPAIGN TREASURER AD	DRESS	
		PO Box 2246		
		Austin, TX 78768		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					4 of 25
	ER NAN	ME Arthur D. (Mr.)	19 Filer ID 00088008	(Eth	ics Commission Filers)
20 SC	HEDUL	E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	31,592.50
2.	Х	\$	3,000.00		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	19,271.44
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDU	_E A1
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 5/25	
2	FILER NAME Wharton, Art		3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 09/26/2024	5 Full name of contributor	7	Amount of Contribution (\$)	\$500.00
	<u> </u>	COLLEGE STATION, TX 77845			
8	Principal occu RANCHER	pation / Job title (See Instructions) 9)		
	Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:) BOWERSOX, TIM Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00
	Principal occu	HUNTSVILLE, TX 77340 pation / Job title (See Instructions) Employer (See Instructions) HOPE-CAUSEY)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:) CONSERVATIVE REPUBLICANS OF TEXAS PAC Contributor address; City; State; Zip Code HOUSTON, TX 77234		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:) CURRY, PATRICK Contributor address; City; State; Zip Code WACO, TX 76711		Amount of Contribution (\$)	\$500.00
	Principal occu RETIRED	pation / Job title (See Instructions) Employer (See Instructions) RETIRED)		
	Date 07/31/2024	Full name of contributor out-of-state PAC (ID#:) Charter Schools Now PAC Contributor address; City; State; Zip Code AUSTIN, TX 78704		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
		•			

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 6/25	
2	FILER NAME Wharton, Art	hur D. (Mr.)			3	Filer ID (Ethics Commission 00088008	n Filers)
4	Date 07/18/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
0	Dringing! goog	CHAPPELL HILL, TX 77426	0	Employer (See Instructions	<u>,,</u>		
•	CHOCOLAT		9	JET SET CHOCOLATE			
	Date 07/24/2024	Full name of contributor				Amount of Contribution (\$)	\$1,500.00
		BRENHAM, TX 77834			L		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_ GRIMES COUNTY REPUBLICAN PARTY Contributor address; City; State; Zip Code)	-	Amount of Contribution (\$)	\$2,000.00
		NAVASOTA, TX 77868					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID#:_ HILLCO PAC Contributor address; City; State; Zip Code AUSTIN, TX 78701				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 08/09/2024	Full name of contributor out-of-state PAC (ID#:_ J ANCIRA STRATEGIES Contributor address; City; State; Zip Code AUSTIN, TX 78701)		Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 7/25	
2	FILER NAME Wharton, Art	hur D. (Mr.)			3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 09/10/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$1,000.00
_	Deireire Leev	BRENHAM, TX 77833	10	Franksian (Cooksations			
8	RETIRED	pation / Job title (See Instructions)	9	Employer (See Instructions RETIRED	5)		
	Date 09/11/2024	Full name of contributor out-of-state PAC LEMAN, BEN Contributor address; City; State; Zip Code IOLA, TX 77861)		Amount of Contribution (\$)	\$500.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 08/28/2024	Full name of contributor out-of-state PAC LUNSFORD, KEVIN Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$62.50
	Principal occu	HUNTSVILLE, TX 77340 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	RETIRED			RETIRED			
	Date 07/24/2024	Full name of contributor out-of-state PAC MIKE TOOMEY & ASSOCIATES Contributor address; City; State; Zip Code AUSTIN, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> 5)		
	Date 07/16/2024	Full name of contributor out-of-state PAC MILLER, PHIL Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340				Amount of Contribution (\$)	\$100.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			l				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	nis foi	rm.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 8/25	
2	FILER NAME Wharton, Art	hur D. (Mr.)			3	Filer ID (Ethics Commission 00088008	n Filers)
4	Date 07/31/2024	5 Full name of contributor out-of-state PAC (MOAK CASEY 6 Contributor address; City; State; Zip Code	(ID#:		7	Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 09/04/2024	Full name of contributor out-of-state PAC (MORRISON, JAMES Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	GENERAL N					CIAL UTILITY DISTRICT	
	Date 08/28/2024	Full name of contributor out-of-state PAC (McKenzie, LINDA Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$62.50
		Huntsville, TX 77340					
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (OBERHOFF, DONICA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258)	•	Amount of Contribution (\$)	\$250.00
	•	pation / Job title (See Instructions) OF GOVERNMENTAL		Employer (See Instructions ACADIAN AMBULANC		ERVICE	
	Date 07/18/2024	Full name of contributor out-of-state PAC (OVERAKER, MARK Contributor address; City; State; Zip Code HOUSTON, TX 77345			•	Amount of Contribution (\$)	\$100.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 9/25	
2	FILER NAME Wharton, Art	hur D. (Mr.)			3	Filer ID (Ethics Commission 00088008	n Filers)
4	Date 09/20/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$200.00
Ω	Principal occu	KEMAH, TX 77565 pation / Job title (See Instructions)	la.	Employer (See Instructions	-, 		
•	RETIRED	pation / Job title (See Instructions)	9	RETIRED	»)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID# Patrick, Susan Contributor address; City; State; Zip Code lola, TX 77861)	•	Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Retired			Retired			
	Date 09/20/2024	Full name of contributor	:)		Amount of Contribution (\$)	\$250.00
	Dringing	HUNTSVILLE, TX 77340	_	Francis von (Coo Instructions	<u></u>		
	EXE DIREC	pation / Job title (See Instructions) TOR		Employer (See Instructions TRI COUNTY MHMR	s)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID# ROBERT MILLER LOCKE LORD LLP Contributor address; City; State; Zip Code DALLAS, TX 75201)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#RULLAND, WILLIAM Contributor address; City; State; Zip Code FRANKLIN, TX 77856)		Amount of Contribution (\$)	\$40.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 10/25	
2	FILER NAME Wharton, Art	hur D. (Mr.)		3	Filer ID (Ethics Commission 00088008	n Filers)
4	Date 09/03/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	VICTORIA, TX 77901 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date		5 Employer (See Instructions	,	Amount of Contribution (\$\)	
	07/24/2024	Full name of contributor out-of-state PAC (ID#: TEXAS ALLIANCE FOR LIFE PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	AUSTIN, TX 78754 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	T morpar occa	pation / cos title (cos monastions)	Employer (See meadeache	,		
	Date 09/11/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	Timelpai occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS DENTAL ASSOCIATION PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	AUSTIN, TX 78704 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#: TEXAS FORESTRY ASSOCIATION PAC Contributor address; City; State; Zip Code LUFKIN, TX 75902			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 11/25	
2	FILER NAME Wharton, Ar			3	Filer ID (Ethics Commission 00088008	ı Filers)
4	Date 07/24/2024	5 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78767				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: TEXAS SANDS PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$4,000.00
	Principal occu	AUSTIN, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/16/2024	Full name of contributor out-of-state PAC (ID#: TREPAC-TEXAS REALTORS PAC Contributor address; City; State; Zip Code AUSTIN, TX 78768)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ UTLEY, PATTI Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340			Amount of Contribution (\$)	\$62.50
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID#:_VETERINARIAN PAC Contributor address; City; State; Zip Code AUSTIN, TX 78754)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 12/25	
2	FILER NAME Wharton, Art	hur D. (Mr.)			3	Filer ID (Ethics Commission 00088008	n Filers)
4	Date 08/28/2024	5 Full name of contributorWALKER COUNTY REPU6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$500.00
0	Dringing Loggy	HUNTSVILLE, TX 77340	N	0 Employer (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/26/2024	Full name of contributor WHARTON, DICKSON Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$800.00
	Principal occu	HUNTSVILLE, TX 77340 pation / Job title (See Instructions)	Employer (See Instructions	:)		
	INSURANCE AGENT WHARTON INSURANCE				NETWORK		
	Date 07/31/2024	Full name of contributor WHOLESALE BEER DIST Contributor address; City; St		AS		Amount of Contribution (\$)	\$1,000.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/24/2024	Full name of contributor WINKLER, LARRY Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$250.00
	Principal occu OWNER	BRYAN, TX 77805 pation / Job title (See Instructions)	Employer (See Instructions SELF EMPLOYED	<u> </u>		
	Date 09/20/2024	Full name of contributor Woolley, Billy Contributor address; City; St Huntsville, TX 77320	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occuretired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
				•			

MONET	TARY POLITICAL CONTRIBUTION		SCHEDULE A1		
The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 9/9 Rpt: 13/25		
FILER NAME Wharton, Ar				3	Filer ID (Ethics Commission Filers) 00088008
Date 09/23/2024	 Full name of contributor	7	Amount of Contribution (\$) \$40.00		
	BREMOND, TX 76629 upation / Job title (See Instructions)	9			
SHERIFF			ROBERTSON COUNTY		
	The Instru FILER NAME Wharton, Ar Date 09/23/2024	The Instruction Guide explains how to complete this FILER NAME Wharton, Arthur D. (Mr.) Date 09/23/2024 5 Full name of contributor out-of-state PAC (ID#: YEZAK, GERALD 6 Contributor address; City; State; Zip Code BREMOND, TX 76629 Principal occupation / Job title (See Instructions)	The Instruction Guide explains how to complete this form FILER NAME Wharton, Arthur D. (Mr.) Date 09/23/2024 5 Full name of contributor out-of-state PAC (ID#: YEZAK, GERALD 6 Contributor address; City; State; Zip Code BREMOND, TX 76629 Principal occupation / Job title (See Instructions)	Wharton, Arthur D. (Mr.) Date O9/23/2024 Full name of contributor out-of-state PAC (ID#:	The Instruction Guide explains how to complete this form. FILER NAME Wharton, Arthur D. (Mr.) Date 09/23/2024 Finding and the packing of contributor out-of-state PAC (ID#:

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 14/25 3 Filer ID (Ethics Commission Filers) FILER NAME Wharton, Arthur D. (Mr.) 80088000 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/26/2024 BAGWELL, ERIC \$1,000.00 HOST SITE OF EVENT 7 Contributor address; City; State; Zip Code HEARNE, TX 77859 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) **RETIRED RETIRED** 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) In-kind contribution Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) description 09/03/2024 **GRIMES COUNTY REPUBLICAN PARTY** \$2,000.00 ADVERTISING EXPENSE Contributor address; City; State; Zip Code NAVASOTA, TX 77868 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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	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: 1/11 Rpt: 15/25	Wharton, Arthur D. (Mr.) 00088008
4	Date	5 Payee name
	08/07/2024	ANDERSON VFD
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	392 HILL ST
		ANDERSON, TX 77830
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		EVENT EXPENSE
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experientare to benefit 6/6	<u>'</u>
	Date	Payee name
	07/08/2024	Anedot
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1.30	1920 MCKINNEY AVE
		7TH FLOOR
		DALLAS, TX 75201
┝	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	Check if Austin, TX, officeholder living expense
		PROCESSING FEE
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	07/16/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	1920 MCKINNEY AVE
		7TH FLOOR
		DALLAS, TX 75201
	DUDDOCE	
	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 Austin, TX, officeholder living expense
		PROCESSING FEE
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 2/11 Rpt: 16/25	2 FILER NAME Wharton, Arthur D. (Mr.) 3 Filer ID (Ethics Commission Filers) 00088008
4	Date	5 Payee name
	07/22/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$24.94	1920 MCKINNEY AVE
		7TH FLOOR
		DALLAS, TX 75201
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel queside of Taylor Camplete Schedule T
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		PROCESSING FEE
		T NOOLSON OT LE
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	07/24/2024	Anedot
	Amount (\$)	
	\$20.30	1920 MCKINNEY AVE
		7TH FLOOR
		DALLAS, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		PROCESSING FEE
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Davida nama
	09/09/2024	Payee name Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	1920 MCKINNEY AVE
		7TH FLOOR
		DALLAS, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		PROCESSING FEE
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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 comple	te this form.
1	Total pages Schedule F1: Sch: 3/11 Rpt: 17/25	2 FILER NAME Wharton, Arthur D. (Mr.)	3 Filer ID (Ethics Commission Filers) 00088008
4	Date 09/13/2024	5 Payee name Anedot	·
8	Amount (\$) \$40.30	7 Payee address; City; State; Zip Code 1920 MCKINNEY AVE 7TH FLOOR DALLAS, TX 75201	
	PURPOSE OF EXPENDITURE	Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROCESSING FEE
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 09/18/2024	Payee name Anedot	
	Amount (\$) \$2.30	Payee address; City; State; Zip Code 1920 MCKINNEY AVE 7TH FLOOR DALLAS, TX 75201	
	PURPOSE OF EXPENDITURE	Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROCESSING FEE
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 09/26/2024	Payee name Anedot	
	Amount (\$) \$10.30	Payee address; City; State; Zip Code 1920 MCKINNEY AVE 7TH FLOOR DALLAS, TX 75201	
	PURPOSE OF EXPENDITURE	Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 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	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		kpense /ages/Contract L		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:					3	Filer ID	(Ethics Commission Filers)
L	Sch: 4/11 Rpt: 18/25	Wharton, Ar	thur D. (Mr.)				00088008	
4	Date	5 Payee name						
L	08/12/2024	Anedot						
6	Amount (\$)	7 Payee addres	ss; City; State	e; Zip Co	de			
	\$0.34	1920 MCKIN	INEY AVE					
		7TH FLOOR	?					
		DALLAS, TX	< 75201					
8	PURPOSE	(a) Category (Se	e Categories listed at the top of this so	chedule)	(b) Descrip	otion		
	OF EXPENDITURE	Accounting/I		,			ide of Texas. Com	plete Schedule T.
	EXPENDITORE						, officeholder living	expense
					PROC	ESSING I	FEE	
_	Operation ONE V. C. F	0	- h - l d - a - a - a - a	O#:-			0	Lat
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Offic	ceholder name	Office sou	ght		Office he	eld
	Date	Payee name						
	09/11/2024	BOYS & GIF	RLS CLUB					
	Amount (\$)	Payee addres	s; City; State	e; Zip Co	de			
	\$1,000.00	PO BOX 860	00					
		HUNTSVILL	E, TX 77340					
	PURPOSE	(a) Category (Se	e Categories listed at the top of this so	chedule)	(b) Descrip	otion		
	OF EXPENDITURE	Event Exper		,			ide of Texas. Com	
	EXI ENDITORE						, officeholder living	expense
					EVEN	T EXPEN	SE	
_	Complete ONLY if direct	Candidata/Offic	coholdor nama	Office com	aht		Office he	ald.
	expenditure to benefit C/O	Candidate/Office	cenoider name	Office sou	yııı		Office ne	au
L								
	Date	Payee name	LLEGE CTATION OUT	DED 05 1	201414553	_		
	08/06/2024		LLEGE STATION CHAME			,E		
	Amount (\$)	Payee addres	•	e; Zip Co	de			
	\$325.00	1733 BRIAR	CREST DR					
		STE 200						
		BRYAN, TX	77802					
	PURPOSE	(a) Category (Se	e Categories listed at the top of this sc	chedule)	(b) Descrip	otion		
	OF EXPENDITURE	Advertising I					ide of Texas. Com	
						k if Austin, TX, BERSHIP	, officeholder living	expense
					IVI⊏IVIE	LUSUIL		
_	Compulate ONII V if diseast	Candidate/Offic	seholder name	Office sou	aht		Office he	ald
l		Canuluate/Offic	CHOIDE HAIHE	OHICE SOR	grit		Office He	iu
	Complete ONLY if direct expenditure to benefit C/OH							

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			Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction (lls Expense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 5/11 Rpt: 19/25	L	Wharton, Ar	thur D. (Mr.)					L	80088000	
4	Date	5	Payee name								
L	08/06/2024		BRYAN-CO	LLEGE STATI	ON CHAMBE	ER OF (COM	MERCE			
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$500.00		1733 BRIAF	CREST DR							
			STE 200								
			BRYAN, TX	77802							
8	PURPOSE	(a)	Category (Se	e Categories listed at	t the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Event Exper	ıse				=		de of Texas. Com	
								EVENT EXPE		officeholder living	g expense
								_ v _ i v i _ / \		J_	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Ω	office sou	l lght			Office he	eld
	expenditure to benefit C/Oł						-9				
	Date		Payee name								
	09/23/2024		Brand It Gra	phix							
	Amount (\$)		Payee addres		State;	Zip Co	ode				
	\$622.44		2507 Becke	r Dr							
			Brenham, T	X 77833							
	PURPOSE OF	(a)		e Categories listed at	t the top of this sche	edule)	(b)	Description			
	EXPENDITURE		Advertising	Expense				-		de of Texas. Com officeholder living	
								SIGNAGE	, , ,,	oocrioider iiviliy	, o.po.ioc
	Complete ONLY if direct		Candidate/Offic	ceholder name	0	office sou	ıght			Office he	eld
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	07/19/2024		-	ONAL BANK							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$3.00		PO BOX 65	9							
			HUNTSVILL	E, TX 77342							
	PURPOSE OF	(a)		e Categories listed at	t the top of this sche	edule)	(b)	Description			
	EXPENDITURE		Accounting/	Banking				ш		de of Texas. Com officeholder living	•
								BANKING FE		omcendider living	J CAPCILISE
									-		
	Complete ONLY if direct		Candidate/Offic	ceholder name	0	office sou	ıght			Office he	eld
	expenditure to benefit C/O	Н					-				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/11 Rpt: 20/25	Wharton, Arthur D. (Mr.) 00088008
4	Date	5 Payee name
	08/19/2024	FIRST NATIONAL BANK
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.00	PO BOX 659
		HUNTSVILLE, TX 77342
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. Check if Austin, TX, officeholder living expense
		BANKING FEE
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/19/2024	FIRST NATIONAL BANK
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.00	PO BOX 659
		HUNTSVILLE, TX 77342
	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.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		BANK FEE
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/02/2024	GRIFFIN COMMUNICATIONS
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	176 VENICE COVE
	, —, · · · · ·	
		AUSTIN, TX 78737
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		CONSULTING EXP
	0 1: 0:::::::::::::::::::::::::::::::::	
	Complete ONLY if direct expenditure to benefit C/Ol	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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a extraory pat listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/11 Rpt: 21/25	Wharton, Arthur D. (Mr.)
4	Date	5 Payee name
	08/01/2024	GRIFFIN COMMUNICATIONS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	176 VENICE COVE
		AUSTIN, TX 78737
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		CONSULTING EXP
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/02/2024	GRIFFIN COMMUNICATIONS
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	176 VENICE COVE
		AUSTIN, TX 78737
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CONSULTING EXP
		CONSOLTING EXI
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
_	Data	Davisa nama
	Date 07/30/2024	Payee name GRIMES COUNTY TRUE BLUE/OSS
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	7750 RAYMOND STOTZER PKWY
		COLLEGE STATION, TX 77845
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense EVENT EXPENSE
		EVENT EXICENSE
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
sing 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 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:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Sch: 8/11 Rpt: 22/25	Wharton, Arthur D. (Mr.)		00088008				
4	Date	5 Payee name						
	07/11/2024	Huntsville Item						
6	Amount (\$)	7 Payee address; City; State; Zip Coc	de					
	\$1,094.00	1409 10th Street						
		Lhorte ille TV 77040						
Ļ		Huntsville, TX 77310	<i>.</i>					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(a)	Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense				
				NEWSPAPER ADS				
_			_					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held				
_	Data							
	Date 09/19/2024	Payee name RIVAS, JOSE						
			40					
	Amount (\$) \$380.00	Payee address; City; State; Zip Coo 5 GROGANS GROVE	Je					
	φοσο.σσ	3 GROCKING GROVE						
		HUNTSVILLE, TX 77320						
	PURPOSE		(b)	Description				
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.				
	LXI LINDITORE			Check if Austin, TX, officeholder living expense SIGNAGE EXPENSE				
				SIGNAGE EAF ENGE				
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held				
	expenditure to benefit C/OI	4						
	Date	Payee name						
	08/23/2024	ROBERTSON COUNTY REPUBLICAN WOME	N					
	Amount (\$)	Payee address; City; State; Zip Coo	de					
	\$500.00	9959 JACKRABBIT LANE						
		BRYAN, TX 77808						
	PURPOSE OF	, ,	(b)	Description				
	EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
				EVENT EXPENSE				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held				
	experientale 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 Committee

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

	Candidate/Officenoider/Political 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: 9/11 Rpt: 23/25	Wharton, Arthur D. (Mr.) 00088008					
4	Date	5 Payee name					
	07/03/2024	TEXANA PUBLIC AFFAIRS					
6	Amount (\$) \$4,000.00	7 Payee address; City; State; Zip Code PO BOX 114 CHAPPELL HILL, TX 77426					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CONSULTING					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	08/14/2024	TEXANA PUBLIC AFFAIRS					
	Amount (\$) \$1,551.17	Payee address; City; State; Zip Code PO BOX 114 CHAPPELL HILL, TX 77426					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CONSULTING EXP					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date 09/19/2024	Payee name TEXANA PUBLIC AFFAIRS					
	Amount (\$) \$1,598.85	Payee address; City; State; Zip Code PO BOX 114					
		CHAPPELL HILL, TX 77426					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CONSULTING EXP					
	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 Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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: 10/11 Rpt: 24/25	2 FILER NAME Wharton, Arthur D. (Mr.) 3 Filer ID (Ethics Commission Filers) 00088008	
4	Date 07/02/2024	5 Payee name THE BANNER PRESS	_
6	Amount (\$) \$301.60	7 Payee address; City; State; Zip Code 2430 STRINGER ST	
8	PURPOSE OF EXPENDITURE	BRENHAM, TX 77833 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense newspaper ads	_
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 07/11/2024	Payee name TU-MILE SPORTSMEN'S ASSOCATION	
	Amount (\$) \$750.00	Payee address; City; State; Zip Code PO BOX 269 HUNTSVILLE, TX 77342	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EVENT EXPENSE	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 08/15/2024	Payee name WALKER COUNTY GO TEXAN	
	Amount (\$) \$175.00	Payee address; City; State; Zip Code PO BOX 9765	
		HUNTSVILLE, TX 77340	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EVENT EXPENSE	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Unicenoider/Political Committee Legal Services Salanes/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 11/11 Rpt: 25/25	1	Wharton, Arthur D. (Mr.)		00088008	
4	Date	5	Payee name			
	09/20/2024		WASHINGTON COUNTY REPUBLICAN PAR	ΤY		
6	Amount (\$) \$1,500.00		Payee address; City; State; Zip Co PO BOX 479 BRENHAM, TX 77834	ode		
8	PURPOSE	₩	Category (See Categories listed at the top of this schedule)	(b)) Description	
	OF EXPENDITURE		Event Expense	(~)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EVENT EXPENSE	
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name Office sou	ight	t Office held	
	Date	T	Payee name			
	08/01/2024		WASHINGTON COUNTY REPUBLICAN WON	ΛEΝ	N	
	Amount (\$) \$100.00		Payee address; City; State; Zip Co PO BOX 723 BRENHAM, TX 77834	ode		
一	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description	
	OF EXPENDITURE		Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EVENT EXPENSE	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sou	ıght	t Office held	