SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction	Guide explains how to complete this	form.	1 Filer ID (Ethics Con 000693	nmission Filers) 38		2 Total pag 57	ges filed:	
3 COMMITTEE NAME						OFEI	CE USE O	NI Y
Friends of Paul Be	ttencourt							
						Date Received ELECTRO 10/07/2024	NICALLY F 4	ILED
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE	#; CIT	Y; ST/	ATE;	ZIP CODE			
ADDRESS	1 E. Greenway Plaza, Ste. 225					Date Hand-deliv	vered or Date Pos	stmarked
Change of Address								
Change of Address	Houston, TX 77046					Receipt #	Amou	nt
						Date Processed	I	
						Date Imaged		
5 CAMPAIGN	MS / MRS / MR FIRST					MI		
TREASURER NAME	Rober	t						
	NICKNAME LAST					SUFFIX		
	Eckels	6						
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PL	EASE):	Α	PT / SUITE	#; CIT`	Y:	STATE;	ZIP CODE
TREASURER	1 E. Greenway Plaza Ste. 225	,			,	- 1	,	
STREET ADDRESS								
(Residence or Business)	Lieusten TV 77040							
	Houston, TX 77046							
7 CAMPAIGN TREASURER	STREET OR PO BOX;		A	NPT / SUITE	#; CIT`	Y;	STATE;	ZIP CODE
MAILING	1 E. Greenway Plaza Ste. 225							
ADDRESS								
Change of Address	Houston, TX 77046							
8 CAMPAIGN	AREA CODE PHONE NUMI	RER F	EXTENSION					
TREASURER	(713) 526-3399							
PHONE	(110) 020 0000							
9 REPORT					r			a. line it
TYPE	January 15	X 30th	day before ele	CUON	L	Exceeded mo	odified reportin	g iimit
		8th	day before elec	tion		Dissolution (A	Attach PAC-DF	R)
	July 15	Run	off		Г		r campaign tre	asurer
						termination		
10 PERIOD COVERED	Month Day Year	-				ay Year	r	
COVERED	07/01/2024	IF	IROUGH		09/20	6/2024		
11 ELECTION	ELECTION DATE Month Day Year	Prin	an/	ELECTION	LITE F	Other		
	11/05/2024		iai y		L	Other		
	11/03/2024	X Gen	eral	Special				
	<u> </u>							
		GO 1	O PAGE 2	2				
Forms provided by Te	xas Ethics Commission	www.et	hics.state.tx	us		١	Version V4.	1.0.48da51f7

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	
Friends of Paul Bettence	ourt		00069338		
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME			
PURPOSE		Paul Bettencourt			
(Attach lists on plain					
(Attach lists on plain paper to complete this	X Candidate				
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	.D (officeholder)		
		State Senator			
X SUPPORT					
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE	
			Month	Day Year	
(Candidate or Measure)					
	Measure				
ASSIST (Officeholder)		DESCRIPTION			
(Onicenoider)					
15 CONTRIBUTION		L FRIBUTIONS OF \$50 OR LESS (OTHER THAI			
TOTALS	LOANS, OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE	VFLLDGLS,	\$ \$0.0	
	ELECTRONICALLY), UNI	ESS ITEMIZED			
	2. TOTAL POLITICAL CO	ONTRIBUTIONS			
	(OTHER THAN PLEDGES	S, LOANS, OR GUARANTEES OF LOANS)		\$ \$106,975.6	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES			
TOTALO				\$ \$0.0	
	4. TOTAL POLITICAL EX				
		FENDITORES		\$ \$103,521.7	
CONTRIBUTION		RIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE		
BALANCE	REPORTING PERIOD			\$ \$939,529.0	
L					
OUTSTANDING LOAN TOTALS	 TOTAL PRINCIPAL AMO DAY OF THE REPORTIN 	UNT OF ALL OUTSTANDING LOANS AS OF G PERIOD	THE LAST	¢ +0.0	
				\$ \$0.0	
16 AFFIDAVIT		Louiser or offirm under penalty of per	ium, that the eas	omnonving report is true	
		I swear, or affirm, under penalty of per and correct and includes all information			
		Title 15, Election Code.			
		Poher	t Eckels		
				er	
AFFIX NOTARY STAMP / SEAL ABOVE Signature of Campaign Treasurer					
Sworn to and subscribed	hefore me, by the said	, t	his the	day	
				uuy	
of, 20, to certify which, witness my hand and seal of office.					
	ministoring acth	od nome of officer administrationth		ar administariar	
Signature of officer ad	ministering oath Print	ed name of officer administering oath	THE OF OTHER	er administering oath	

SUBTOTALS - SPAC	CO/	FORM SPAC
	iler ID (E	3 of 57 Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	106,975.66
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	3
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	3
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	3
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION	NOR \$	3
6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGA		3
7. SCHEDULE E: LOANS	\$	3
8. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	72,876.39
9. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	5
10. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	6
11. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	30,645.38
12. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C	/ОН \$	3
13. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	3
14. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETU TO FILER	IRNED	3

SCHEDULE A1

The	e Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/57	
2 FILE	R NAME			3	Filer ID (Ethics Commissio	on Filers)
		aul Bettencourt			00069338	,
4 Date	9	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
09/2	26/2024	Andro, Richard				\$5,000.00
		6 Contributor address; City; State; Zip Code		1		
		ROWLETT, TX 75088				
8 Princ	cipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Pres	sident		Refund Advisory Corp			
Date)	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09/1	6/2024	AssociaPAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75205				
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	;	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09/2	26/2024	Bawcom, Debra				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Cedar Park, TX 78613				
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Pres	sident		Protax			
Date	;	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09/2	26/2024	Brannan, Ryan				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions			
cons	sultant		W.R. Brannan & Associa	ate	S	
Date	;	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09/1	13/2024	Britton, Kathy				\$500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77019				
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Exec	cutive Cł	nair	Perry Homes			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/9 Rpt: 5/57 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Friends of Paul Bettencourt 00069338 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/16/2024 Carona, John \$5,000.00 6 Contributor address; City; State; Zip Code Dallas, TX 75205 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) CEO Associa Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/20/2024 Caterpillar Inc PAC \$1,500.00 Contributor address; City; State; Zip Code Irving, TX 75039 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) Date 07/29/2024 Christopher Investment Company \$2,500.00 Contributor address; City; State; Zip Code Austin, TX 78709 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/28/2024 Daugherty, Gerald \$2,500.00 Contributor address; City; State; Zip Code Austin, TX 78735 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 08/29/2024 \$1,000.00 Delin, John Contributor address; City; State; Zip Code Roanoke, TX 76262 Principal occupation / Job title (See Instructions) Employer (See Instructions) Builder Integrity Group, LLC

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 3/9 Rpt: 6/57	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Friends of Paul Bettencourt				00069338		
4	Date	5 Full name of contributor	X out-of-state PAC (ID#:	000097568)	7	Amount of Contribution (\$)	
	09/26/2024	Employees of RTX Corpora	ation PAC				\$1,000.00
		6 Contributor address; City; Sta	te; Zip Code		1		
		Arlington, VA 22209					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/16/2024	Gregory, Bob					\$2,500.00
		Contributor address; City; Sta					
		Austin TV 70740					
	Deinsinglasse	Austin, TX 78746		Frankriger (On a landar stimu			
	Chairman	pation / Job title (See Instructions)		Employer (See Instructions TDS	5)		
					_		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	#0 500 00
	09/26/2024	Hart, Gregory					\$2,500.00
		Contributor address; City; Sta	ite; Zip Code				
		Austin, TX 78702					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Managing Pa	artner		Hart Legal Group			
	Date	Full name of contributor	X out-of-state PAC (ID#:	С00199711)		Amount of Contribution (\$)	
	08/28/2024	Health Care Service Corpo	oration PAC				\$1,000.00
		Contributor address; City; Sta	te; Zip Code		1		
		Chicago, IL 60601					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/25/2024	Herman, Constable Mark					\$2,500.00
		Contributor address; City; Sta					
⊢	Daimeire al	Spring, TX 77388			<u> </u>		
1		pation / Job title (See Instructions)		Employer (See Instructions	5)		
⊢	Police Office			Harris County			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/9 Rpt: 7/57 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Friends of Paul Bettencourt 00069338 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 07/12/2024 Houston Region Business Coaltion \$2,500.00 6 Contributor address; City; State; Zip Code Bellaire, TX 77401 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/23/2024 \$500.00 Howell, Steven Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/19/2024 Kendrick, Randall \$5,000.00 Contributor address; City; State; Zip Code Dallas, TX 75201 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Xebec Realty Parters** Owner Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 09/26/2024 Kickapoo Traditional Tribe of Texas \$10,000.00 Contributor address; City; State; Zip Code Eagle Pass, TX 78852 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/12/2024 Livingston, Shannon \$1,500.00 Contributor address; City; State; Zip Code Dallas, TX 75209 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Commercial Real Estate RREAF** Communities

SCHEDULE A1

-	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/57	
2 F	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
F	-riends of Pa	ds of Paul Bettencourt				00069338	,
4 C	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
(08/23/2024	Menger, Bill					\$400.00
		6 Contributor address; City; Sta	ate; Zip Code		1		
		Houston, TX 77024					
		pation / Job title (See Instructions))	9 Employer (See Instructions	5)		
F	Retired			Retired			
[Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
(09/16/2024	Michel, Lorri					\$5,000.00
		Contributor address; City; Sta			1		
		Austin, TX 78741		-			
		pation / Job title (See Instructions))	Employer (See Instructions			
1	Managing Pa	artner		Michel Gray Rogers LLF	>		
[Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
(08/28/2024	Montgomery County Repu					\$500.00
		Contributor address; City; Sta			1		
	1						
		Conroe, TX 77305					
F	Principal occur	pation / Job title (See Instructions))	Employer (See Instructions	5)		
[Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
(08/01/2024	NWFRW PAC					\$1,000.00
		Contributor address; City; Sta	ate; Zip Code]		
		Tomball, TX 77377					
F	Principal occur	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
0	09/17/2024	Nosek, Nicole					\$3,625.00
		Contributor address; City; Sta	ate; Zip Code]		
		Austin, TX 78741					
		pation / Job title (See Instructions))	Employer (See Instructions			
(Chair			Texans for Reasonable	So	lutions	

SCHEDULE A1

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/57	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Friends of Pa	Paul Bettencourt			00069338	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/17/2024	Nosek, Nicole				\$3,450.00
		6 Contributor address; City; State; Zip Code				
	- · · ·	Austin, TX 78741		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions		l. tiene	
	Chair		Texans for Reasonable	50		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/19/2024	Nye, Erle				\$1,000.00
		Contributor address; City; State; Zip Code				
	<u></u>	Dallas, TX 75225		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Self		EN Consulting			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/28/2024					\$5,000.00
		Contributor address; City; State; Zip Code				
		Dallas TV 75995				
<u> </u>	Dringingl oppu	Dallas, TX 75225	Employer (See Instructions	<u> </u>		
	Self	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷0 500 00
	09/04/2024	Pack, Sam				\$2,500.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75248				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> יו		
	Owner		Pack Auto Group	9		
╞				<u> </u>	Amount of Contribution (\$)	
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5,000.00
	09/20/2024	Perot Jr., Ross				\$3,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75219				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ວ		
	Chairman		Hillwood	<i>''</i>		
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/57			
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Friends of Paul Bettencourt					00069338	
4	Date	5 Full name of contributor X out-of-state P	AC (ID#: C)))))))))))))))))))))))))))))))))))))))	7	Amount of Contribution (\$)	
	08/28/2024	Phillips 66 PAC					\$1,500.66
		6 Contributor address; City; State; Zip Code					
		Washington, DC 20004					
8	Principal occu	pation / Job title (See Instructions)	9	B Employer (See Instructions	;)		
	Date	Full name of contributor X out-of-state P	AC (ID#: <u>C</u>)))		Amount of Contribution (\$)	
	09/16/2024	Plains All American PAC					\$2,000.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state P	AC (ID#:)		Amount of Contribution (\$)	
	09/16/2024	Political Action Committee of Winstead F	PC				\$2,500.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75201					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor 🛛 out-of-state P	AC (ID#:)		Amount of Contribution (\$)	
	09/26/2024	Rvest LP					\$2,500.00
		Contributor address; City; State; Zip Code					
	Deinsinglasse	West Lake Hills, TX 78746			Ĺ		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state P	AC (ID#:)		Amount of Contribution (\$)	
	09/05/2024	Sandlin, Scott					\$1,500.00
		Contributor address; City; State; Zip Code					
		North Richland Hills, TX 76180-6873					
\vdash	Principal acou	pation / Job title (See Instructions)		Employer (Soo Instructions			
I	Builder			Employer (See Instructions Sandlin Homes	9		
⊢	Dunuer			Gundiin Homes			

SCHEDULE A1

_							
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/57	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		aul Bettencourt				00069338	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	08/28/2024	Susser, Sam					\$1,000.00
		6 Contributor address; City; St	ate; Zip Code		1		
		Dallas, TX 75220					
8	Principal occu	pation / Job title (See Instructions	;)	9 Employer (See Instructions	5)		
	Owner			Susser Holdings			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/21/2024	Taylor, Catherine					\$1,000.00
		Contributor address; City; St			1		
		Dallas, TX 75209					
⊢	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Investor			Self			
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	09/16/2024	Texas BOMA PAC					\$1,000.00
	00/10/2024		into: Zin Codo		•		φ <u>1</u> ,000.00
		Contributor address; City; St	ate, Zip Code				
		Leander, TX 78646					
⊢	Principal occu	pation / Job title (See Instructions	;)	Employer (See Instructions	<u>ا</u> ج)		
			,		-,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	09/26/2024	Texas Consumer Lenders)			\$2,500.00
	00/20/2021	Contributor address; City; St			1		<i>\$2,000.00</i>
		Contributor address, City, St	ale, Zip Coue				
		Greenville, SC 29615					
⊢	Principal occu	L pation / Job title (See Instructions	;)	Employer (See Instructions	<u> </u> 3)		
			,		-,		
╞	Data	Full name of contributor			Г	Amount of Contribution (\$)	
	Date 09/26/2024	Texas Oil and Gas Assoc	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5,000.00
	09/20/2024						\$5,000.00
		Contributor address; City; St	ate; Zip Code				
		Austin, TX 78701					
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	i mcipai occu		"		"		
\vdash							

SCHEDULE A1

	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/57		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Friends of P	aul Bettencourt			00069338	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/17/2024	Turner, Tracy	/			\$2,500.00
		6 Contributor address; City; State; Zip Code		•		+=,000100
		Contributor address, City, State, Zip Code				
		Dallas, TX 75370				
-	Bringinal occu		9 Employer (See Instructions	<u> </u>		
l°			Brusniak Turner PC	5)		
	Attorneys			_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/16/2024	Westlake Medical of Austin Ltd.				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78716				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	·					
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	\ \	<u> </u>	Amount of Contribution (\$)	
)		Amount of Contribution (\$)	¢1 000 00
	09/26/2024					\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77057				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real Estate	Executive	Welcome Group, LLC			
1						
I						
1						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food, Gift/A nmittee Legal	Expense Beverage Expense wards/Memorials Expense Services Instruction Guide expla	Transportation E Travel in District Travel Out of Dis	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:					3 Filer ID	(Ethics Commission Filers)			
-	Sch: 1/17 Rpt: 13/57	Friends of Paul	Bettencourt			00069338				
4	Date 07/12/2024	Payee name A-1 Delivery Se	rvices							
6	Amount (\$) \$16.56	Payee address; PO Box 36906 Houston, TX 77		tate; Zip Co	le					
8	PURPOSE OF EXPENDITURE		egories listed at the top of thi d/Rental Expense	s schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living elivery Charges	expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeho	lder name	Office sou	ıht	Office he	eld			
	Date	Payee name								
	09/19/2024	A-1 Delivery Services								
	Amount (\$) \$33.12	Payee address; PO Box 36906	City; S	tate; Zip Co	le					
	PURPOSE OF EXPENDITURE		236 egories listed at the top of thi d/Rental Expense	s schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living elivery Charges	expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	07/03/2024	American Expre	ess							
	Amount (\$) \$2,181.25	Payee address; PO Box 650448	-	tate; Zip Co	le					
		Dallas, TX 7526								
	PURPOSE OF EXPENDITURE	Category (See Cat Credit Card Pay	egories listed at the top of thi /ment	s schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living redit Card Payn	expense			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeho	lder name	Office sou	ıht	Office he	eld			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Con Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explain	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 2/17 Rpt: 14/57		Friends of Paul Bettencourt					00069338	
4	Date	5	Payee name						
	08/05/2024		American Express						
6	Amount (\$)	7	Payee address; City; Stat	e; Zip C	ode				
	\$1,080.32		PO Box 650448						
			Dallas, TX 75265		-				
8	PURPOSE OF		Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	EXPENDITURE		Credit Card Payment					ide of Texas. Complete Schedule T. , officeholder living expense	
								it Card Payment	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held	
	Date		Payee name						
	09/03/2024		American Express						
	Amount (\$)		Payee address; City; Stat	e; Zip C	ode				
	\$2,476.43		PO Box 650448						
			Dallas, TX 75265						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF EXPENDITURE							ide of Texas. Complete Schedule T.	
								, officeholder living expense it Card Payment	
						Campaign Ci	eui	it Cald Fayment	
	Complete ONLY if direct		andidate/Officeholder name	Office so	lught			Office held	
	expenditure to benefit C/OI								
	Date		Payee name						
	07/03/2024		Anedot.com						
	Amount (\$)		Payee address; City; Stat	e; Zip C	ode				
	\$19.80		PO Box 84314						
			Baton Rouge, LA 70884		_				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T.	
								, officeholder living expense hant Account Fees	
						Sampaign M	GIU		
-	Complete ONLY if direct		andidate/Officeholder name	Office so	lught			Office held	
	expenditure to benefit C/Oł			21100 300	agin				
-									

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense
	Accounting/Banking Consulting Expense	Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District
	Contributions/ Donations Made By Candidate/Officeholder/Politica	r - Gift/Awards/Memorials Expense Printing Expense Travel Out of District
	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: 3/17 Rpt: 15/57	Friends of Paul Bettencourt 00069338
4	Date	5 Payee name
	08/26/2024	Anedot.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.30	PO Box 84314
		Baton Rouge, LA 70884
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Merchant Account Fees
0	Complete ONIL V if direct	Candidate/Officeholder name Office sought Office held
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	
	Date	Payee name
	08/27/2024	Anedot.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.90	PO Box 84314
		Baton Rouge, LA 70884
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Merchant Account Fees
		Campaign moronant / Coodine / Cood
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	09/04/2024	Anedot.com
-	Amount (\$)	Payee address; City; State; Zip Code
	\$39.30	PO Box 84314
		Baton Rouge, LA 70884
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Merchant Account Fees
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	8

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 4/17 Rpt: 16/57	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Friends of Paul Bettencourt 00069338
4	Date 09/09/2024	5 Payee name Anedot.com
6	Amount (\$) \$58.80	7 Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Merchant Account Fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/17/2024	Anedot.com
	Amount (\$) \$78.60	Payee address; City; State; Zip Code PO Box 84314
		Baton Rouge, LA 70884
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Merchant Account Fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/19/2024	Anedot.com
	Amount (\$) \$569.63	Payee address; City; State; Zip Code PO Box 84314
		Baton Rouge, LA 70884
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Merchant Account Fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 5/17 Rpt: 17/57	2 FILER NAME Friends of Paul Bettencourt	3 Filer ID (Ethics Commission Filers) 00069338
4	Date	5 Pavee name	
	09/23/2024	Anedot.com	
6	Amount (\$) \$195.30	7 Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884	
_	DUDDOCE		
8	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense erchant Account Fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/25/2024	Anedot.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.80	PO Box 84314 Baton Rouge, LA 70884	
	PURPOSE		
	OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense erchant Account Fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/12/2024	Austin Club	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$340.00	110 E 9th St	
		Austin, TX 78701	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense taff Meeting
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 6/17 Rpt: 18/57	Friends of Paul Bettencourt	00069338							
4	Date	Payee name								
	07/01/2024	Blakemore & Associates								
6	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,500.00	1 E Greenway Plaza Ste 225								
		Houston, TX 77046								
8	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description								
	EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense							
			onsulting Fees							
			-							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/01/2024	Blakemore & Associates								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,500.00	1 E Greenway Plaza Ste 225								
		Houston, TX 77046								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense onsulting Fees							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	09/01/2024	Blakemore & Associates								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,500.00	1 E Greenway Plaza Ste 225								
		Houston, TX 77046								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Onsulting Fees							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPENDI	URE CATEGO	RIES FOF	R BOX	. 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Mittee Legal Services Salaries/Wages/Contract Labor						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	1 Total pages Schedule F1: 2 FILER N							Ī	3	Filer ID	(Ethics C	commission Filers)	
-	Sch: 7/17 Rpt: 19/57				ends of Paul Bettencourt					00069338	(0		
4	Date 07/16/2024		Payee name Chase Bank										
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de						
Ū	\$4,406.57												
8	PURPOSE	(2)	Cotogony				(h) D	accription					
0	OF		Category _{(Se}		d at the top of this sch	nedule)			TX,	de of Texas. Comp officeholder living t Card Paym	expense	ule T.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offi	ceholder name	e (Office sou	ght			Office he	eld		
	Date		Payee name										
	08/21/2024		Chase Bank	[
_	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de						
	\$14,675.17		PO Box 940 Houston, T>										
	PURPOSE OF EXPENDITURE		Category _{(Se} Credit Card		d at the top of this sch	nedule)		_	TX,	de of Texas. Comp officeholder living t Card Paym	expense	ule T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	e (Office sou	ght			Office he	eld		
	Date		Payee name				-				_		
	09/25/2024		Chase Bank										
-	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de						
	\$10,408.04	I	PO Box 940		State	, בוף כס							
			Houston, T>										
	PURPOSE OF EXPENDITURE		Category _{(Se} Credit Card		d at the top of this sch	nedule)		_	TX,	de of Texas. Comp officeholder living t Card Paym	expense	ule T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offi	ceholder name	e (Office sou	ght			Office he	eld		

			EXPENDIT	JRE CATEGO	RIES FOR	BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Fees Food/Beverage Ex; Gift/Awards/Memor nmittee Legal Services The Instruction		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME				3 Filer ID (Ethics Commission File				
	Sch: 8/17 Rpt: 20/57		Friends of Paul Bettenco	urt				00069338		,
4	Date	5	Payee name							
	07/02/2024		Clark, David							
6	Amount (\$)	7	Payee address; City;	State	; Zip Cod	e				
	\$2,500.00		PO Box 310365							
			New Braunfels, TX 7813	L						
8	PURPOSE OF		Category (See Categories listed		nedule)	b) Description				
	EXPENDITURE		Salaries/Wages/Contract	Labor				de of Texas. Comp		
						Campaign Co		officeholder living	expense	
						Campaign Co	onu			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	(Office soug	ht		Office he	ld	
-	Date		Payee name							
	08/01/2024		Clark, David							
				Ctata						
	Amount (\$)		Payee address; City;	State	; Zip Cod	e				
	\$2,500.00		PO Box 310365							
			New Braunfels, TX 7813	L						
	PURPOSE	(a)	Category (See Categories listed	at the top of this sch	nedule) (b) Description				
	OF EXPENDITURE		Salaries/Wages/Contract	Labor				de of Texas. Comp		
				Campaign Co		officeholder living	expense			
						Campaign Co	Unu	act Labui		
	-									
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	nt		Office he	Ia	
	Date		Payee name							
	09/01/2024		Clark, David							
-	Amount (\$)		Payee address; City;	State	; Zip Cod	e				
	\$1,250.00		PO Box 310365	Olalo	, בוף סטט	0				
	φ1,200.00		10 800 910909							
			New Braunfels, TX 7813	L						
	PURPOSE OF		Category (See Categories listed		nedule)	b) Description				
	EXPENDITURE		Salaries/Wages/Contract	Labor				de of Texas. Comp		
						Campaign Co		officeholder living	expense	
						Campaign Co	unt	αυι μαυθί		
	0							017		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	(Office soug	ht		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage E Gift/Awards/Mem nittee Legal Services The Instructio	Travel in District Travel Out of Dis	quipment & Related Expense						
1	Total pages Schedule F1:		•			3 Filer ID	(Ethics Commission Filers)			
-	Sch: 9/17 Rpt: 21/57	Friends of Paul Bettenc	ourt			00069338	(
4	Date 07/01/2024	Payee name Clockwork Consulting								
6	Amount (\$)	Payee address; City;	State;	Zip Code						
	\$2,500.00	347 Lamonte Lane Houston, TX 77018		·						
8	PURPOSE	Category (See Categories liste	d at the tap of this cabo	(b)	Description					
	OF EXPENDITURE	Salaries/Wages/Contrac		aule)	Check if travel	outside of Texas. Com , TX, officeholder living DNtract Labor				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder nam	e O	ffice sought		Office he	ld			
	Date	ayee name								
	08/01/2024	Clockwork Consulting								
	Amount (\$)	Payee address; City;	State;	Zip Code						
	\$2,500.00	.347 Lamonte Lane Houston, TX 77018								
	PURPOSE OF EXPENDITURE	Category (See Categories liste Salaries/Wages/Contrac		_{dule)} (b)		outside of Texas. Com , TX, officeholder living DNtract Labor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder nam	e O	ffice sought		Office he	ld			
	Date	Payee name								
	09/01/2024	Clockwork Consulting								
	Amount (\$)	Payee address; City;	State:	Zip Code						
	\$2,500.00	.347 Lamonte Lane								
		louston, TX 77018		i						
	PURPOSE OF EXPENDITURE	Category (See Categories liste Salaries/Wages/Contrac		dule) (b)		outside of Texas. Com , TX, officeholder living Ontract Labor				
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder nam	e O	ffice sought		Office he	ld			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment			Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related E Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed at						quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 10/17 Rpt: 22/57	I	Friends of Paul Bettencourt						00069338	
4	Date 09/01/2024		Payee name Dewitt, Taylor							
6	Amount (\$) \$250.00		Payee address; City; 11215 Taterwood Dr Austin, TX 78750	State	; Zip Co	de				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Salaries/Wages/Contract Labo		iedule)	□⊂	heck if travel o	, TX,	de of Texas. Comp officeholder living act Labor	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	ld
	Date		Payee name							
	07/01/2024		Edwards, Courtney							
	Amount (\$) \$500.00		Payee address; City; 12001 Vista Parke Dr Apt 306		; Zip Co	de				
		_	Austin, TX 78726							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Salaries/Wages/Contract Labo		iedule)	□⊂	heck if travel o heck if Austin,	, TX,	de of Texas. Comp officeholder living act Labor	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	ld
	Date		Payee name							
	08/01/2024		Edwards, Courtney							
	Amount (\$) \$500.00		Payee address; City; 12001 Vista Parke Dr Apt 306	·	; Zip Co	de				
			Austin, TX 78726							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Salaries/Wages/Contract Labo		iedule)	□⊂	heck if travel o heck if Austin,	, тх,	de of Texas. Comp officeholder living act Labor	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Offi Pol Prir Sal	ce Overh ling Expe nting Expe aries/Wag	nse es/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 11/17 Rpt: 23/57		Friends of Paul Bettencourt					00069338		
4	Date 09/01/2024		Payee name Edwards, Courtney							
6	Amount (\$) \$500.00		Payee address; City; St 12001 Vista Parke Dr Apt 306 Austin, TX 78726	ate; Zi	p Code	9				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	schedule) (t		ı, TX,	de of Texas. Comp officeholder living S Subscription	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	e sough	t		Office he	ld	
	Date		Payee name							
	08/16/2024		Greater Houston Council Of Federa	ted Re	publica	an Women				
	Amount (\$) \$500.00		Payee address; City; St 9741 Katy Freeway #272 Houston, TX 77024	ate; Zi	p Code	2				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Contributions/Donations Made By Candidate/Officeholder/Political Cor		,			de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	e sough	t		Office he	ld	
	Date		Payee name							
	07/19/2024		Harris County Republican Party							
	Amount (\$) \$5,000.00		Payee address; City; St 8588 Katy Freeway Ste 445	ate; Zi	p Code	;				
			Houston, TX 77024							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Contributions/Donations Made By Candidate/Officeholder/Political Cor		,			de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	e sough	t		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains F	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	· · · ·	1011 10 000		2	Filer ID (Ethics Commission Filers)				
1	Sch: 12/17 Rpt: 24/57		Friends of Paul Bettencourt			3	00069338				
4	Date	5	Payee name								
	07/01/2024		Hurt, Bradley								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le						
	\$250.00 190 Maroon Ln										
			Kyle, TX 78640								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor	,		outsi	de of Texas. Complete Schedule T.				
	EXPENDITORE						officeholder living expense				
					Campaign Co	ontr	act Labor				
_					1.						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office soug	ght		Office held				
	Date		Payee name								
	08/01/2024		Hurt, Bradley								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$250.00		190 Maroon Ln								
			Kyle, TX 78640								
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description						
	EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T. officeholder living expense				
					Campaign Co						
					1						
	Complete ONLY if direct	<u>с</u>	Candidate/Officeholder name C	office sou	ght		Office held				
	expenditure to benefit C/OF	Н			-						
-	Date		Payee name								
	09/01/2024		Hurt, Bradley								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$250.00		190 Maroon Ln	1							
			Kyle, TX 78640								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.				
	-				Campaign Co		officeholder living expense				
					Campaign Ct	חות					
-	Complete ONLV if direct	Ļ	andidate/Officeholder name C	office sou	abt		Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH			muce sou	ynt						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	ials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Travel in District Travel Out of Distr	uipment & Related Expense	
				Guide explains l	how to con	nplete this form.	-			
1	Total pages Schedule F1: Sch: 13/17 Rpt: 25/57		FILER NAME Friends of Paul Bettenco	urt			3	Filer ID 00069338	(Ethics Commission Filers)	
4	Date	5	Payee name							
	07/01/2024		Kirksey, Jason							
6	Amount (\$) \$250.00		Payee address; City; 5217 Old Spicewood Spr Austin, TX 78731		; Zip Coc 104	le				
8	PURPOSE	(a)	Category (See Categories listed	at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Salaries/Wages/Contract			Check if travel	ι, TX,	ide of Texas. Compl , officeholder living e ract Labor		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	c	Office soug	ht		Office hel	d	
	Date		Payee name							
	08/01/2024		Kirksey, Jason							
	Amount (\$)	┢	Payee address; City;	State;	; Zip Coc	le				
	\$250.00		5217 Old Spicewood Spr Austin, TX 78731							
	PURPOSE OF EXPENDITURE		Category (See Categories listed Salaries/Wages/Contract		edule)		η, TX,	ide of Texas. Compl , officeholder living e ract Labor		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office hel	d	
	Date		Payee name							
	09/01/2024		Kirksey, Jason							
	Amount (\$)		Payee address; City;	State;	; Zip Coc	le				
	\$250.00		5217 Old Spicewood Spr							
			Austin, TX 78731							
	PURPOSE OF EXPENDITURE		Category (See Categories listed Salaries/Wages/Contract		iedule)		η, TX,	ide of Texas. Compl , officeholder living e ract Labor		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	С	Office soug	ht		Office hel	d	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-		Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
Ļ			The Instruction Guid	le explains	how to cor	npiete this form.	1_			
1	Total pages Schedule F1: Sch: 14/17 Rpt: 26/57		ILER NAME riends of Paul Bettencourt				3	Filer ID (Ethics Commission Filers) 00069338		
4	Date	5 P	ayee name				•			
	07/01/2024	L	eake, Ross							
6	Amount (\$) \$250.00	2	ayee address; City; 104 Woodmont ustin, TX 78703	State;	; Zip Co	de				
8	PURPOSE	(a) C	ategory (See Categories listed at the	top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		alaries/Wages/Contract Lab		,	Check if travel	ι, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ract Labor		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office held		
	Date	P	ayee name							
	08/01/2024	L	eake, Ross							
	Amount (\$)	P	ayee address; City;	State	; Zip Co	de				
	\$250.00	A	104 Woodmont ustin, TX 78703							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the alaries/Wages/Contract Lab		nedule)		η, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ract Labor		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	(Office sou	ght		Office held		
	Date	P	ayee name							
	09/01/2024	L	eake, Ross							
	Amount (\$) \$250.00		ayee address; City; 104 Woodmont	State	; Zip Co	de				
		A	ustin, TX 78703							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the alaries/Wages/Contract Lab		nedule)		ι, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ract Labor		
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-		Office Over Polling Exp Printing Ex Salaries/W	rhead/ ense pense ages/C	/Reimbursement Rental Expense Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
			The Instruction Guide	explains	how to cor	nplet	e this form.			
1	Total pages Schedule F1:							3	Filer ID (Ethics Commission Filers)	
	Sch: 15/17 Rpt: 27/57		Friends of Paul Bettencourt						00069338	
4	Date		Payee name							
	09/01/2024		Leake, Ross							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de				
	\$500.00		2104 Woodmont							
			Austin, TX 78703							
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule)	(b) [Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor			Į			de of Texas. Complete Schedule T.	
						L			officeholder living expense	
						,	Campaign Co	лц		
9	Complete ONLY if direct		Candidate/Officeholder name		Office sou	ht			Office held	
9	expenditure to benefit C/OF				JIIICE SOU	JIIL			Onice heid	
	Date		Payee name							
	07/01/2024		Roehling, Braden							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$250.00		2422 Corey St							
			Brenham, TX 77833							
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule)	(b) [Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor			Į			de of Texas. Complete Schedule T.	
						L			officeholder living expense	
						(Campaign Co	oritr	act Labor	
	Complete ONIL V if direct		Sandidata/Officabaldar nama			wh+			Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	JIIL			Office held	
	Data	—								
	Date 07/01/2024		Payee name Salvato, Marc							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$1,000.00		6713 Sunderland Trail							
			A							
			Austin, TX 78747							
	PURPOSE OF	(a)	Category (See Categories listed at the top		edule)	(b) [Description			
	EXPENDITURE		Salaries/Wages/Contract Labor	•		Ļ			de of Texas. Complete Schedule T. officeholder living expense	
						L	Campaign Co			
							1			
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name	ſ	Office soug	nht			Office held	
	expenditure to benefit C/Oł				2.1100 0000	,				
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Inmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Cabadula F1	1	· · ·	11011 10 00		12	Filer ID (Ethics Commission Filers)		
1	Total pages Schedule F1: Sch: 16/17 Rpt: 28/57	2	Friends of Paul Bettencourt			3	Filer ID(Ethics Commission Filers)00069338		
4	Date	5	Payee name			•			
	08/01/2024		Salvato, Marc						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode				
	\$1,000.00		6713 Sunderland Trail						
			Austin, TX 78747						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T.		
					Campaign C		, officeholder living expense ract Lahor		
					Campaign C	onu			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l ight		Office held		
	Date		Payee name						
	09/01/2024		Salvato, Marc						
	Amount (\$)			; Zip Co	ode				
	\$1,000.00		6713 Sunderland Trail	, zip co					
	Φ1,000.00								
			Austin, TX 78747						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	nedule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense ract Labor		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ı ıght		Office held		
	Date		Payee name						
	07/01/2024		Stinsman, Elizabeth						
-	Amount (\$)	-	Payee address; City; State	; Zip Co	ode				
	\$500.00		13127 Lemur Lane	,					
	\$000100								
			Cypress, TX 77429						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	nedule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense ract Labor		
L	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2				3	Filer ID (Ethics Commission Filers)					
-	Sch: 17/17 Rpt: 29/57		Friends of Paul Bettencourt			5	00069338					
4	Date 08/01/2024	5	Payee name Stinsman, Elizabeth									
6	Amount (\$)	7		· Zin Co	do							
ľ	\$500.00	ľ	7 Payee address; City; State; Zip Code 13127 Lemur Lane									
	\$500.00											
			Cypress, TX 77429									
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description							
	OF EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T.					
					Campaign Co		, officeholder living expense					
					Campaign Co	JIII						
9	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	abt		Office held					
9	expenditure to benefit C/OF			Jince Sou	yın		Onice neid					
	Date		Payee name									
	09/01/2024		Stinsman, Elizabeth									
_	Amount (\$)		Payee address; City; State;	Zip Co	de							
	\$500.00		13127 Lemur Lane	, <u></u> p ee								
	\$000.00											
			Cypress, TX 77429									
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description							
	OF EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T.					
							, officeholder living expense					
					Campaign Co	วทแ	ract Labor					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held					
		_										
	Date		Payee name									
	07/12/2024		Texas Senate									
	Amount (\$)		Payee address; City; State;	; Zip Co	de							
	\$222.50		PO Box 12068									
			Austin, TX 78711									
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description							
	OF EXPENDITURE		Gift/Awards/Memorials Expense				ide of Texas. Complete Schedule T.					
							officeholder living expense					
					Campaign Fla	ags	s For Constituents					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held					
		-										

	EXPI	ENDITURE CATEGO	DRIES FOR BOX 10(a)								
Advertising Expense	Event Exp	ense	Loan Repayment/Reimbursement								
Accounting/Banking Consulting Expense		erage Expense	Office Overhead/Rental Expense Polling Expense	Transportation Equipme Travel in District	ent & Related	±xpense					
Contributions/ Donations Made B Candidate/Officeholder/Politic	/ - Gift/Award al Committee Legal Serv	ls/Memorials Expense <i>v</i> ices	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a catego	ory not listed a	oove)					
	The Inst	ruction Guide explains	how to complete this form.		-						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)					
Sch: 1/27 Rpt: 30/57	Friends of Paul Bet	ttencourt		00069338							
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ	ZED							
ISSUER	America	n Express	EXPENDITURES	\$							
	, include		CHARGED TO A CRE CARD	EDIT	r j						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid							
			09/03/2024								
	\$15.60	07/16/2024									
7 PAYEE				City	Ctata	Zin Code					
/ PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	Levy Fiserv Forum		1111 N VELR. Phillips	1111 N Vel R. Phillips Ave							
			Milumukaa M/I 52202								
			Milwaukee, WI 53203	i							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	hilo Travolling							
	Food/Beverage Expe	nse	Officerioider Meals W	Officeholder Meals While Travelling							
X Political											
Non-Political		of Texas. Complete Schedule		in, TX, officeholder living ex	pense						
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name C	Office sought	Office held							
expenditure to benefit C/OH		-									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is 09/03/2024	ssuer Paid							
	\$125.00	07/26/2024	09/03/2024								
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	IAH Parking		2800 North Terminal I	2800 North Terminal Rd							
			Houston, TX 77032								
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	(b) Description Officeholder Parking							
	Transportation Equip										
X Political	Expense										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule									
Complete ONLY if direct	Candidate/Officeholder	r name C	Office sought	Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid							
	\$225.37	08/21/2024									
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	Jonathans Rub		12505 Memorial Dr								
			Houston, TX 77024								
PURPOSE OF	(a) Category (See Categories listed at the top	of this schedulo)	.,	(b) Description							
	Food/Beverage Expe	,	Campaign Staff Meeti	Campaign Staff Meeting							
X Political											
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austi	in, TX, officeholder living ex	pense						
Complete ONLY if direct	Candidate/Officeholder	r name C	Dffice sought	Office held							
expenditure to benefit C/OH											

EXPENDITURES MADE BY CREDIT CARD	

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		- Gift/Award	erage Expense s/Memorials Expense	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 category not listed above)			
The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 2/27 Rpt: 31/57	Friends of Paul Bet	tencourt		00069338			
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED				
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	⊤ \$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
		\$366.01	08/29/2024					
7	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
		Hertz Car Rental		5601 Northwest Express	sway			
				Oklahoma City, OK 731	32			
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this schoolule)	(b) Description				
		Transportation Equip	,	Officeholder Car Rental				
	X Political	Expense						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense			
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held			
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
		\$28.00	08/29/2024					
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
		IAH Parking		2800 North Terminal Rd				
		3		Houston TX 77022				
⊢	PURPOSE OF	(a) Category		Houston, TX 77032 (b) Description				
	EXPENDITURE	(See Categories listed at the top	,	Officeholder Parking				
	X Political	Transportation Equipment And Related						
	Non-Political		of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense			
⊢	Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held			
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
		\$28.00	09/12/2024					
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
		IAH Parking		2800 North Terminal Rd				
⊢	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Officeholder Parking				
	X Political	Transportation Equip	ment And Related					
	Non-Political	Expense (c) Check if travel outside	of Texas. Complete Schedule	T Check if Austin T	X, officeholder living expense			
⊢	Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held			
e	expenditure to benefit C/OH							

	EXPENDITORE	5 WADE	ы		D		S	CHEDUL	е F 4
				ENDITURE CATEGOR					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Offi Food/Beverage Expense Poll By - Gift/Awards/Memorials Expense Prin		Loan Repayment Office Overhead/ Polling Expense Printing Expense Salaries/Wages/0	ice Overhead/Rental Expense Tra ling Expense Tra nting Expense Tra		olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District		
	Candidate/Onicenoiden/Politica	Commutee	Legal Serv The Inst	ruction Guide explains h	-		OTHER (enter a cate	gory not listed a	JOVE)
1	Total pages Schedule F4:	2 FILER NAM		• • • •			3 Filer ID (Et	hics Commiss	sion Filers)
-	Sch: 3/27 Rpt: 32/57	Friends of I		tencourt			00069338		,
4	CREDIT CARD	Name of financial institution			5 TOTA	L OF UNITEMIZE	>		
	ISSUER	see previous			EXPE	NDITURES	\$		
6	PAYMENT	(a) Amount Cha	arged	(b) Date of Charge		s) Credit Card Issu	ier Paid		
		\$41.68		07/16/2024	09/03/2	2024			
7	PAYEE	(a) Payee name	9		(b) Paye	e address;	City,	State,	Zip Code
		The Old Fa	shioned		23 N Pi	nckney St #1			
					Madiso	n, WI 53703			
8	PURPOSE OF	(a) Category	d at the ten	of this school (10)	(b) Desc	•			
EXPENDITURE		(See Categories listed at the top of this schedule) Food/Beverage Expense			ign Staff Meeting				
	Non-Political	(C) Check if tra	avel outside	of Texas. Complete Schedule	т.	Check if Austin, T	X, officeholder living e	expense	
9	Complete ONLY if direct	Candidate/Off	iceholder	name O	ffice sought		Office held		
e	penditure to benefit C/OH								
	PAYMENT	(a) Amount Cha \$85.00		(b) Date of Charge 07/17/2024	(c) Date(09/03/2	s) Credit Card Issu 2024	ier Paid		
	PAYEE	(a) Payee name	د		(h) Pave	e address;	City,	State,	Zip Code
		(u) i uyee name				orth Terminal Rd	-	Olule,	
		IAH Parking		2000 11					
					Housto	n, TX 77032			
	PURPOSE OF	(a) Category			(b) Desc				
	EXPENDITURE	(See Categories liste Transportatio		of this schedule)	Officeh	older Parking			
	X Political	Expense	ո եզաթ						
	Non-Political	(C) Check if tra	avel outside	of Texas. Complete Schedule	T.	Check if Austin, T	X, officeholder living e	expense	
	Complete ONLY if direct	Candidate/Off	iceholder	name O	ffice sought		Office held		
e	penditure to benefit C/OH								
	PAYMENT	(a) Amount Cha	arged	(b) Date of Charge	(c) Date(09/03/2	s) Credit Card Issu	ier Paid		
		\$1,007.8	8	07/26/2024	09/03/2	.024			
	PAYEE	(a) Payee name	9	•	(b) Paye	e address;	City,	State,	Zip Code
					650 15t	h St			
		Hyatt Rege	псу						
						, CO 80202			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste	ed at the top	of this schedule)	(b) Desc	ription ign Staff Lodging		=C Confor	ance
	X Political	Travel Out of	•	, 	Campa	iyii Stali Luuyiiiy			
	Non-Political	(C) Check if tra	avel outside	of Texas. Complete Schedule	т.	Check if Austin, T	X, officeholder living e	expense	
e	Complete <u>ONLY</u> if direct openditure to benefit C/OH	Candidate/Off	iceholder	name O	ffice sought		Office held		

EXPENDITURES MADE BY CREDIT CARD

EXPENDITURES MADE BY CREDIT CARD	

	EXPENDITURE CATEGORIES FOR BOX 10(a)									
Candidate/Officeholder/Political Committee Legal Services		erage Expense s/Memorials Expense rices	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)						
			how to complete this form.							
1	Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)					
	Sch: 4/27 Rpt: 33/57	Friends of Paul Bet	tencourt		00069338					
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE EXPENDITURES	ED \$					
	ISSUER	see p	revious	CHARGED TO A CREDIT CARD						
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid					
		\$1,201.27	07/26/2024	09/03/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	е				
		Llasta Cas Dantal		5601 Northwest Expres	ssway					
		Hertz Car Rental								
				Oklahoma City, OK 73	132					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
		Transportation Equip		Campaign Stan Car Re	Campaign Staff Car Rental To Attend ALEC Conference					
	X Political	Expense								
	Non-Political		of Texas. Complete Schedule		TX, officeholder living expense					
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought	Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid					
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	е				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
		(g								
	Political									
	Non-Political		of Texas. Complete Schedule		Office held					
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought	Office held					
		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid	_				
		(u) / mount onlarged	(b) Dute of onlarge							
⊢	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	e				
				(-,,,	,,,	-				
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)		of this schedule)	(b) Description							
	Political									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	• • • • • • • • • • • • • • • • • • •						
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held	_				
e	expenditure to benefit C/OH									

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
	Advertising Expense	Event Expe	Dan Repayment/Reimbursement Solicitation/Fundraising Expense						
Accounting/Banking Consulting Expense		Food/Beverage Expense P		Office Overhead/Rental Expense Polling Expense	Travel in District	ransportation Equipment & Related Expense ravel in District			
Contributions/ Donations Made By - Candidate/Officeholder/Political Comm		y - Gift/Awards/Memorials Expense P		Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a catego	ravel Out of District THER (enter a category not listed above)			
	The Instruction Guide explains how			-		.,	,		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)		
	Sch: 5/27 Rpt: 34/57	Friends of Paul Bet	tencourt		00069338				
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZI	ED				
	ISSUER		e Bank	EXPENDITURES	\$				
		Chas	e Dalik	CHARGED TO A CRE	DIT				
				CARD					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
		\$462.50	07/01/2024	08/21/2024					
7	PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code		
				1 Hacker Way					
		Facebook							
				Menlo Park, CA 94025	,				
8	PURPOSE OF	(a) Category		(b) Description	,				
ľ	EXPENDITURE	(See Categories listed at the top	of this schedule)	()	orticina				
		Advertising Expense		Campaign Online Auve	Campaign Online Advertising				
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder living ex	oense			
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
		\$345.00	07/02/2024	08/21/2024					
		\$345.00	0110212024						
⊢	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				1 Hacker Way	- · · y ,	,	_p		
		Facebook							
				Menlo Park, CA 94025	:				
⊢	PURPOSE OF	(a) Category		(b) Description)				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Online Advertising					
	_	Advertising Expense							
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder living ex	pense			
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
		\$124.55	07/03/2024	08/21/2024					
-	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				1 Hacker Way	0.0,	enare,	Lip oodo		
		Facebook		I Hacker Way					
⊢		(a) Catagory		Menlo Park, CA 94025)				
	PURPOSE OF	(a) Category	of this schedule)	(b) Description					
	EXPENDITURE (See Categories listed at the top of this schedule) Advertising Expense		Campaign Online Adve	erusing					
	X Political								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
e	xpenditure to benefit C/OH								
Ĺ									

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
	Advertising Expense Accounting/Banking	Loan Repayment/Reimbursement Office Overhead/Rental Expense							
Consulting Expense		Food/Beverage Expense F		Polling Expense	Travel in District				
			s/Memorials Expense ices	Printing Expense Salaries/Wages/Contract Labor		ravel Out of District ITHER (enter a category not listed above)			
		how to complete this form.	i						
	Total pages Schedule F4:	2 FILER NAME			3 Filer ID) (Ethics Commiss	sion Filers)		
	Sch: 6/27 Rpt: 35/57	Friends of Paul Bet	tencourt		0006933	8			
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEM					
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CF					
				CARD					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid				
		\$187.50	07/04/2024	08/21/2024					
		Φ107.5U	07/04/2024						
-	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
Ľ		(d) Fayee hame			City,	State,	Zip Coue		
		Facebook		I HACKET WAY	1 Hacker Way				
				Marala Darle CA 040	25				
		(a) Category		Menlo Park, CA 940 (b) Description	25				
8	PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	· /	wartising				
	Delitical	Advertising Expense		Campaign Online Advertising					
	X Political								
	Non-Political		of Texas. Complete Schedule		stin, TX, officeholder liv				
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office he	eld			
ех	penditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid				
		\$125.00	07/05/2024	08/21/2024					
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
				1 Hacker Way					
		Facebook							
				Menlo Park, CA 94025					
	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Campaign Online Advertising					
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	stin, TX, officeholder liv	ving expense			
	Complete ONLY if direct	Candidate/Officeholder	name C	Diffice sought	Office he	eld			
е×	penditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid				
		\$175.00	07/05/2024	08/21/2024					
		φ173.00	01103/2024						
-	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				1 Hacker Way	eny,	etato,	Lip oodo		
		Facebook							
				Menlo Park, CA 940	25				
⊢	PURPOSE OF	(a) Category		(b) Description	_~				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Online Ac	lvertisina				
	X Political	Advertising Expense							
	Non-Political		of Texas. Complete Schedule		stin, TX, officeholder liv				
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office he	eld			
ех	penditure to benefit C/OH								

EXPENDITURES MADE BY CREDIT CARD						

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
Accounting/Banking Fees O			Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	ce Overhead/Rental Expense Transportation Equipment & Related Expense				
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	ls/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)		bove)		
	The Inst	ruction Guide explains h	now to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethio	cs Commiss	sion Filers)			
Sch: 7/27 Rpt: 36/57	Friends of Paul Bet	ttencourt		00069338				
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE EXPENDITURES	D \$				
ISSUER	see p	revious	CHARGED TO A CREDIT CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid				
	\$76.02	07/07/2024	08/21/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Facebook		1 Hacker Way					
	Facebook							
8 PURPOSE OF	(a) Category		Menlo Park, CA 94025 (b) Description					
8 PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Online Adver	rtisina				
X Political	Advertising Expense							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin.	TX, officeholder living exp	ense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		Diffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$250.00	07/07/2024	08/21/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	(a) Fayee hame		1 Hacker Way	City,	State,	Zip Code		
	Facebook							
			Menlo Park, CA 94025					
PURPOSE OF	(a) Category (See Categories listed at the top	of this school ()	(b) Description					
EXPENDITURE	Advertising Expense	of this schedule)	Campaign Online Advertising					
X Political								
Non-Political		of Texas. Complete Schedule		TX, officeholder living exp	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	name O	office sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$400.00	07/09/2024	08/21/2024					
		01/00/2021						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Facebook		1 Hacker Way					
	Facebook							
	(a) Category		Menlo Park, CA 94025 (b) Description					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Campaign Online Adver	rtisina				
X Political	Advertising Expense			3				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	TX, officeholder living exp	ense			
Complete <u>ONLY</u> if direct	Candidate/Officeholde	•	office sought	Office held				
expenditure to benefit C/OH								

	EXP	ENDITURE CATEGO	RIES FOR BOX 10)(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve - Gift/Award	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
	The Inst	ruction Guide explains								
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commis	sion Filers)			
Sch: 8/27 Rpt: 37/57	Friends of Paul Bet	tencourt			00069338					
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL O	F UNITEMIZED)					
ISSUER	see p	revious	EXPEND CHARGE CARD	ITURES D TO A CREDI	т \$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	er Paid					
	\$600.00	07/12/2024	08/21/2024	4						
7 PAYEE	(a) Payee name		(b) Payee ad	ddress:	City,	State,	Zip Code			
			1 Hacker V		0.0),	otato,	p 0000			
	Facebook			lay						
			Menlo Parl	k, CA 94025						
8 PURPOSE OF	(a) Category		(b) Descripti	-						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign	Online Advert	ising					
X Political	Advertising Expense									
Non-Political	(C) Check if travel outside	ет. Г	pense							
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		Dffice sought		Office held					
expenditure to benefit C/OH			Ũ							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	er Paid					
	\$800.00	07/14/2024	08/21/2024	4						
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code			
			1 Hacker V	Vay						
	Facebook			-						
			Menlo Parl	Menlo Park, CA 94025						
PURPOSE OF	(a) Category		(b) Descripti	on						
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Campaign	Online Advert	ising					
X Political										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul	ет.	Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	r name (Office sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	., .,	Credit Card Issue	er Paid					
	\$800.00	07/17/2024	08/21/2024	4						
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code			
	Facebook		1 Hacker V	Vay						
	Facebook									
				k, CA 94025						
	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descripti							
	Advertising Expense		Campaign	Online Advert	ISING					
X Political										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul		Check if Austin, TX	K, officeholder living ex	pense				
Complete ONLY if direct	Candidate/Officeholder	name (Office sought		Office held					
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Expe Fees Food/Beve Cift/Award	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense	ffice Overhead/Rental Expense Transportation Equipment & Related Expense Travel in District						
Candidate/Officeholder/Politica	utions/ Donations Made By - Gift/Awards/Memorials Expense Prin didate/Officeholder/Political Committee Legal Services Sala			OTHER (enter a category no	t listed ab	ove)			
	The Inst	ruction Guide explains h	ow to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics C	commiss	ion Filers)			
Sch: 9/27 Rpt: 38/57	Friends of Paul Bet	tencourt		00069338					
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE						
ISSUER	see p	revious		EXPENDITURES \$ CHARGED TO A CREDIT CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid					
	\$800.00	07/21/2024	08/21/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City, S	State.	Zip Code			
			1 Hacker Way	0.0),	otato,	p 0000			
	Facebook			L HUCKET WAY					
			Menlo Park, CA 94025						
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Campaign Online Adver	Campaign Online Advertising					
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	rX, officeholder living expense	e				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged (b) Date of Charge		(c) Date(s) Credit Card Issu 08/21/2024	uer Paid					
	\$800.00	07/23/2024	00/21/2024						
PAYEE					<u></u>	7. 0. 1			
PATEE	(a) Payee name		(b) Payee address;	City, S	State,	Zip Code			
	Facebook		1 Hacker Way						
			Menlo Park, CA 94025						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Online Adver	tising					
X Political	Advertising Expense								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	Check if Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid					
	\$800.00	07/26/2024	08/21/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, S	State,	Zip Code			
	Facebook		1 Hacker Way						
	TUCEDOUN								
			Menlo Park, CA 94025						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign Online Adver	tisina					
X Political	Advertising Expense	,		usiliy					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, 1	TX, officeholder living expense	e				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held					
expenditure to benefit C/OH									

EXPENDITURE CATEGORIES FOR BOX 10(a)											
	Advertising Expense	Event Expe	Loan Repayment/Reimbursement	g Expense							
	Consulting Expense Food/Beverage Expense Polli			Office Overhead/Rental Expense Polling Expense	Transportation Equipm Travel in District	ient & Related I	_xpense				
				Printing Expense Salaries/Wages/Contract Labor							
		5		now to complete this form.			,				
1	Total pages Schedule F4:		· · · · · · · · ·	• • • • •	3 Filer ID (Eth	nics Commiss	ion Filers)				
Ľ	Sch: 10/27 Rpt: 39/57	Friends of Paul Bet	toncourt		00069338						
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEM EXPENDITURES	IZED S						
	ISSUER	see p	revious	CHARGED TO A CF	Ŧ						
				CARD							
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid						
		\$800.00	07/31/2024	09/25/2024							
		φ000.00	01/31/2024								
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
				., .	Oity,	olulo,					
		Facebook		1 Hacker Way							
					05						
				Menlo Park, CA 940	25						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description							
		Advertising Expense	of this schedule)	Campaign Online Ac	Campaign Online Advertising						
	X Political										
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	Check if Austin, TX, officeholder living expense						
9	Complete ONLY if direct	Candidate/Officeholder	name C	Diffice sought	Office held						
	xpenditure to benefit C/OH										
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	(c) Date(s) Credit Card Issuer Paid						
				09/25/2024							
		\$800.00 08/04/2024									
-	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		(d) Fayee hame			City,	State,					
		Facebook		I HACKET WAY	1 Hacker Way						
					05						
⊢		(a) Catagony		Menlo Park, CA 940	25						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign Online Advertising							
	_	Advertising Expense		Campaign Online Ac							
	X Political										
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	stin, TX, officeholder living ex	kpense					
	Complete ONLY if direct	Candidate/Officeholder	name C	office sought	Office held						
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid						
		\$57.44	08/06/2024	09/25/2024							
		401.111	00/00/2024								
-	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
				1 Hacker Way	City,	otato,	Lip Couc				
		Facebook		I Hacker Way							
				Monto Darte CA 040	25						
⊢		(a) Catagony		Menlo Park, CA 940	20						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	huarticipa						
		Advertising Expense		Campaign Online Ac	liverusing						
	X Political	5									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	stin, TX, officeholder living ex	pense					
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held						
e	xpenditure to benefit C/OH										
⊢		1									

	EXPE	ENDITURE CATEGOR	RIES FOR BOX 1	.0(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice	y - Gift/Awards al Committee Legal Serv	Office Overhead/Rental Expense Tra Beverage Expense Polling Expense Tra wards/Memorials Expense Printing Expense Tra			Transportation Equipm Travel in District Travel Out of District				
	i	ruction Guide explains h	now to complete the	his form.	i				
Total pages Schedule F4: Sch: 11/27 Rpt: 40/57	2 FILER NAME Friends of Paul Bet	tencourt			3 Filer ID (Eth 00069338	ics Commiss	sion Filers)		
4 CREDIT CARD		ncial institution	5 TOTAL	OF UNITEMIZ					
ISSUER		revious	EXPEND	DITURES ED TO A CRE	\$				
6 PAYMENT	(a) Amount Charged \$131.25	(b) Date of Charge 08/06/2024	(c) Date(s) 09/25/202	Credit Card Is 24	ssuer Paid				
7 PAYEE	(a) Payee name		(b) Payee a	uddress:	City,	State,	Zip Code		
			1 Hacker						
	Facebook			inay					
		Menlo Park, CA 94025							
B PURPOSE OF	(a) Category	(b) Descript	(b) Description						
EXPENDITURE	(See Categories listed at the top	Campaign Online Advertising							
X Political	Advertising Expense								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			т. Г	Check if Austir	n, TX, officeholder living ex	pense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Is	ssuer Paid				
	\$800.00	08/11/2024	09/25/202	<u>2</u> 4					
PAYEE	(a) Payee name		(b) Payee a	ıddress;	City,	State,	Zip Code		
			1 Hacker	Way					
	Facebook								
			Menlo Pa	rk, CA 9402	5				
PURPOSE OF	(a) Category		(b) Descript						
EXPENDITURE	(See Categories listed at the top Advertising Expense	Campaigr	n Online Adv	rertising					
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т. [Check if Austir	n, TX, officeholder living ex	pense			
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	., .,	Credit Card Is	ssuer Paid				
	\$900.00	08/14/2024	09/25/202	<u>-</u> 4					
PAYEE	(a) Payee name	l	(b) Payee a	ddress:	City,	State,	Zip Code		
			1 Hacker		0.0,	Otato,	p 0000		
	Facebook								
			Menlo Pa	rk, CA 9402	5				
PURPOSE OF	(a) Category		(b) Descript						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaigr	n Online Adv	vertising				
X Political	Advertising Expense								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т. Г	Check if Austir	n, TX, officeholder living ex	pense			
	· · —		L	—					

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

	EXPENDITURE	ES MADE	BYC	CREDIT CAF	RD			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		Fees Offic Food/Beverage Expense Polli Gift/Awards/Memorials Expense Print			S FOR BOX 10(a) an Repayment/Reimbursement ffice Overhead/Rental Expense Jiling Expense alaries/Wages/Contract Labor		
			The Inst	ruction Guide explains	how	to complete this form.		
1	Total pages Schedule F4: Sch: 12/27 Rpt: 41/57	2 FILER NAM Friends of	_	tencourt				
4	CREDIT CARD ISSUER	Nan		ncial institution revious		5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD		
6	PAYMENT	(a) Amount Cha \$900.0	U	(b) Date of Charge 08/16/2024		(c) Date(s) Credit Card Iss 09/25/2024		
7	PAYEE	(a) Payee name	9			(b) Payee address; 1 Hacker Way		

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)		
	Sch: 12/27 Rpt: 41/57	Friends of Paul Bet	tencourt	00069338						
4		Name of final	ncial institution			¢				
	ISSUER	see p	revious		EXPENDITURES S CHARGED TO A CREDIT CARD					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid				
		\$900.00	08/16/2024	09/25/20	24					
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code		
		Facebook		1 Hacker	Way					
				Maple De						
8	PURPOSE OF	(a) Category		(b) Descrip	ark, CA 94025					
ľ	EXPENDITURE	(See Categories listed at the top	of this schedule)		n Online Advertis	sing				
	X Political	Advertising Expense				0				
	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				
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid				
		\$900.00	08/19/2024	09/25/20	24					
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code		
		Facebook		1 Hacker Way						
				Monto Dark CA 04025						
-	PURPOSE OF	(a) Category		Menlo Park, CA 94025 (b) Description						
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Online Advertising						
	X Political	Advertising Expense								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Office	ce sought Office held						
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 09/25/20	Credit Card Issuer	r Paid				
		\$900.00	08/23/2024	09/23/20	24					
\vdash	PAYEE	(a) Payee name		(b) Payee	addross	City,	State,	Zip Code		
		(a) Fayee hame		1 Hacker		City,	State,	Zip Code		
		Facebook		Indeker	Way					
				Menlo Park, CA 94025						
	PURPOSE OF	(a) Category		(b) Descrip	otion					
		(See Categories listed at the top Advertising Expense	Campaig	n Online Advertis	sing					
1	X Political									
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
1	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Office	e sought		Office held				
L e	xpenditure to benefit C/OH									

EXPENDITURE CATEGORIES FOR BOX 10(a)										
	Advertising Expense Accounting/Banking	Event Expe Fees	Loan Repayment/Reimbursement Office Overhead/Rental Expense		tation/Fundraising Expense portation Equipment & Related Expense					
	Consulting Expense Food/Beverage Expense Polli			Polling Expense	Travel in District	eni a Reialeu i	zxpense			
				Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a categ	ory not listed at	oove)			
			ruction Guide explains I	how to complete this form.						
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	nics Commiss	sion Filers)			
	Sch: 13/27 Rpt: 42/57	Friends of Paul Bet	tencourt		00069338					
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMI						
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CR	\$					
				CARD						
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid					
		\$900.00	08/25/2024	09/25/2024						
		\$900.00	00/25/2024							
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
Ľ		(d) Fayee hame			City,	State,	Zip Coue			
		Facebook		1 Hacker Way						
				Marria Dark CA 0400						
Ŀ		(a) Category		Menlo Park, CA 9402 (b) Description	25					
8	PURPOSE OF EXPENDITURE	(A) Categories listed at the top	of this schedule)	() (vertising					
		Advertising Expense			Campaign Online Advertising					
	X Political									
	Non-Political		of Texas. Complete Schedule		tin, TX, officeholder living ex	pense				
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held					
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid					
		\$900.00	08/26/2024	09/25/2024						
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
		E t t		1 Hacker Way						
		Facebook								
				Menlo Park, CA 94025						
	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Campaign Online Ad	vertising					
	X Political									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	Check if Austin, TX, officeholder living expense						
	Complete ONLY if direct	Candidate/Officeholder	name C	Diffice sought	Office held					
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid					
		\$900.00	08/27/2024	09/25/2024						
		\$300.00	00/21/2024							
⊢	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
				1 Hacker Way	0.0,	otato,	Lip oodo			
		Facebook		I Hacker Way						
				Menlo Park, CA 9402	25					
⊢	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Online Ad	vertisina					
	X Political	Advertising Expense								
L	Non-Political		of Texas. Complete Schedule		tin, TX, officeholder living ex	pense				
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought	Office held					
e e	expenditure to benefit C/OH									

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P		Loan Re Office C Polling I Printing Salaries	ban Repayment/Reimbursement ffice Overhead/Rental Expense Diling Expense inting Expense alaries/Wages/Contract Labor		Tra Tra Tra	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District ITHER (enter a category not listed above)		
	Tatal same Oshadula E4				eenipiete ti					ian Filana)
1	Total pages Schedule F4:								(Ethics Commiss	sion Filers)
	Sch: 14/27 Rpt: 43/57	Friends of Paul Bet	ttencourt					00069338	3	
4	CREDIT CARD	Name of fina	ncial institution	5		F UNITEMIZ	ΖED			
	ISSUER	see p	revious		EXPEND	ITURES ED TO A CRE	דוח	\$		
					CARD					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(0	c) Date(s) (Credit Card Is	suer	Paid		
		\$900.00	08/30/2024							
		\$900.00	00/30/2024							
7	PAYEE	(a) Payee name		(b	b) Payee a	ddress:		City,	State,	Zip Code
		(ì	L Hacker \			- · · y ,	,	
		Facebook		1		vay				
				L.	Jenlo Par	k, CA 9402	5			
8	PURPOSE OF	(a) Category			b) Descript		<u> </u>			
ľ	EXPENDITURE	(See Categories listed at the top	of this schedule)	`	<i>,</i> .	Online Adv	rtis	ina		
	X Political	Advertising Expense								
	Non-Political					-				
_			of Texas. Complete Schedule		Check if Austin, TX, officeholder living expense fice sought Office held					
9		Candidate/Officeholder	name C	Once sc	ougni			Office her	u	
e	xpenditure to benefit C/OH							<u> </u>		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(C	c) Date(s) (Credit Card Is	ssuer	Paid		
		\$900.00	09/03/2024							
	PAYEE	(a) Payee name	1	`	o) Payee a			City,	State,	Zip Code
		Facebook			L Hacker \	Nay				
							-			
						k, CA 9402	5			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	`	(b) Description Campaign Online Advertising					
	-	Advertising Expense			Jampaign		enus	ing		
	X Political				_ <u></u>					
	Non-Political		of Texas. Complete Schedule							
	Complete ONLY if direct	Candidate/Officeholder	r name C	Office so	ought			Office hel	d	
е	xpenditure to benefit C/OH		1							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(C	c) Date(s) (Credit Card Is	ssuer	Paid		
		\$55.12	09/06/2024							
	PAYEE	(a) Payee name		(b	o) Payee a	ddress;		City,	State,	Zip Code
		Faaabaak		1	Hacker \	Vay				
		Facebook								
				N	Menlo Par	k, CA 9402	5			
	PURPOSE OF	(a) Category	of this schodule)		b) Descript			. –		
		(See Categories listed at the top Advertising Expense	or this schedule)	C	Campaign	Online Adv	ertis	ing		
	X Political									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	le T.	Г	Check if Austi	n, TX,	officeholder livir	ng expense	
	Complete ONLY if direct	Candidate/Officeholder	r name C	Office so	ought	_		Office hel	d	
е	xpenditure to benefit C/OH									
Eo	rms provided by Texas F	thiss Commission	www.othics.s	ctoto tv	(110				Version V/1 1	0 100-51

SCHEDULE F4

Forms provided by Texas Ethics Commission

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisin Transportation Equipm Travel in District Travel Out of District OTHER (enter a categ	ent & Related I	
		i	ruction Guide explains I	how to complete this form.	<u> </u>		
1	Total pages Schedule F4:		4 4		3 Filer ID (Eth	iics Commiss	sion Filers)
	Sch: 15/27 Rpt: 44/57	Friends of Paul Bet			00069338		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMI EXPENDITURES CHARGED TO A CRI CARD	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid		
		\$145.67	09/06/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Coc
		Facebook		1 Hacker Way			
				Menlo Park, CA 9402	5		
8	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top of this schedule)		Campaign Online Adv	/ertising		
	X Political	Advertising Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Aust	n, TX, officeholder living ex	mense	
9		Candidate/Officeholder	•	Office sought	Office held		
	expenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid		
		\$900.00	09/08/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Coc
		Faarbaak		1 Hacker Way			
		Facebook		Maple Dark CA 0402	F		
	PURPOSE OF	(a) Category		Menlo Park, CA 9402 (b) Description	5		
	EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		Campaign Online Advertising			
	X Political	Advertising Expense		Campaign Chine / a	ortioning		
	Non-Political						
_		(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Diffice sought	in, TX, officeholder living e	pense	
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid		
		\$900.00	09/10/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Coc
				1 Hacker Way			
		Facebook					
				Menlo Park, CA 9402	5		
	PURPOSE OF	(a) Category		(b) Description			
		(See Categories listed at the top Advertising Expense	of this schedule)	Campaign Online Adv	/ertising		
	X Political						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aust	n, TX, officeholder living ex	rpense	
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought	Office held		
е	expenditure to benefit C/OH						
Fο	rms provided by Texas F	thics Commission	www.ethics.s	tate ty us	Vei	sion V4 1	0.48da5

SCHEDULE F4

Zip Code

Zip Code

Zip Code

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Exp Fees Food/Beve ly - Gift/Award al Committee Legal Serv	ense erage Expense Is/Memorials Expense rices	RIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Poling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising I Transportation Equipmer Travel in District Travel Out of District OTHER (enter a categor	t & Related	·
		ruction Guide explains	how to complete this form.			
1 Total pages Schedule F4: Sch: 16/27 Rpt: 45/57	2 FILER NAME Friends of Paul Bet	ttencourt		3 Filer ID (Ethio 00069338	3 Filer ID (Ethics Commission Filer 00069338	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMI EXPENDITURES CHARGED TO A CR CARD	\$		
6 PAYMENT	(a) Amount Charged \$900.00	(b) Date of Charge 09/15/2024	(c) Date(s) Credit Card I	ssuer Paid		
7 PAYEE	(a) Payee name Facebook		(b) Payee address; 1 Hacker Way	City,	State,	Zip Coo
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	Menlo Park, CA 9402 (b) Description Campaign Online Adv			
 Non-Political Complete <u>ONLY</u> if direct expenditure to benefit C/OH 			le T. Check if Aust Office sought	tin, TX, officeholder living exp Office held	ense	
PAYMENT	(a) Amount Charged \$900.00	(b) Date of Charge 09/20/2024	(c) Date(s) Credit Card I	ssuer Paid		
PAYEE	(a) Payee name Facebook		(b) Payee address; 1 Hacker Way Menlo Park, CA 9402	City, 25	State,	Zip Coc
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Campaign Online Adv	vertising		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedu	e T. Check if Aust	tin, TX, officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name (Office sought	Office held		
PAYMENT	(a) Amount Charged \$900.00	(b) Date of Charge 09/24/2024	(c) Date(s) Credit Card I	Issuer Paid		
PAYEE	(a) Payee name Facebook	I	(b) Payee address; 1 Hacker Way Menlo Park, CA 9402	City,	State,	Zip Coc
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Campaign Online Adv			
Non-Political Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	of Texas. Complete Schedul r name	IE T. Check if Aust	tin, TX, officeholder living exp Office held	ense	
Forms provided by Texas E	Ethics Commission	www.ethics.	state.tx.us	Vers	ion V4.1	.0.48da5

SCHEDULE F4

Zip Code

Zip Code

Zip Code

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	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve / - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisi Transportation Equip Travel in District Travel Out of District OTHER (enter a cate	ment & Related E		
		i	ruction Guide explains	how to complete this form.				
L	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	thics Commiss	sion Filers)	
	Sch: 17/27 Rpt: 46/57	Friends of Paul Bet	tencourt		00069338			
1	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE				
	ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREE CARD	эт \$			
3	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
		\$900.00	09/26/2024					
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
				1 Hacker Way	3 7			
		Facebook						
				Menlo Park, CA 94025				
<u>,</u>	PURPOSE OF	(a) Category		(b) Description				
2	EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Online Adve	rtisina			
	V Delition	Advertising Expense			rusing			
	X Political							
Non-Political		(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin,	TX, officeholder living	expense		
э е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought	Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
		\$29.99	07/26/2024	08/21/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Houston Chronicle		PO Box 4260				
				Houston, TX 77210				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description				
				Campaign News Subscription				
	X Political		•					
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held			
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
		\$29.99	08/27/2024	09/25/2024				
		\$20100	00/21/2021					
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		(u) r uyee name		PO Box 4260	ony,	otato,	Lip Obud	
		Houston Chronicle		10 00x 4200				
				Liqueter TX 77210				
		(a) Catagony		Houston, TX 77210				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	vintion			
		Office Overhead/Rent		Campaign News Subsc	inpuon			
	X Political							
_	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin,	TX, officeholder living	expense		
	Complete ONLY if direct	Candidate/Officeholder	name C	Dffice sought	Office held			
е	xpenditure to benefit C/OH							
		L						
0	rms provided by Texas E	thics Commission	www.ethics.s	state.tx.us	Ve	ersion V4.1.	0.48da51f	
		-						

	EXPENDITURE	5 MADE	ы		D		SCI	HEDUL	e F4
				ENDITURE CATEGOR					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica			rage Expense s/Memorials Expense	Loan Repayment/Reimbu Office Overhead/Rental B Polling Expense Printing Expense Salaries/Wages/Contract	Expense Tra Tra Tra	licitation/Fundraising E ansportation Equipmen avel in District avel Out of District THER (enter a category	t & Related E	
			The Inst	ruction Guide explains h	ow to complete this	form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethics	s Commiss	ion Filers)
	Sch: 18/27 Rpt: 47/57	Friends of F	aul Bet	tencourt			00069338		
4	CREDIT CARD	Nam	e of fina	ncial institution		UNITEMIZED			
	ISSUER		see p	revious	EXPENDITI CHARGED CARD	URES TO A CREDIT	\$		
6	PAYMENT	(a) Amount Cha	rged	(b) Date of Charge	(c) Date(s) Cre	edit Card Issuer	Paid		
		\$29.99		09/25/2024					
7	PAYEE	(a) Payee name		1	(b) Payee add	ress;	City,	State,	Zip Code
					PO Box 4260	0			
		Houston Ch	ronicle						
					Houston, TX	77210			
8 PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description						
		Office Overhe			Campaign N	ews Subscrip	tion		
	X Political			·					
	Non-Political			of Texas. Complete Schedule	т. 🔲 🤆	Check if Austin, TX,	officeholder living expe	nse	
				ffice sought		Office held			
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Cha \$29.84	rged	(b) Date of Charge 07/02/2024	(c) Date(s) Cre 08/21/2024	edit Card Issuer	Paid		
	PAYEE	(a) Payee name			(b) Payee add	ress;	City,	State,	Zip Code
					1 Microsoft V	Vay			
		Microsoft							
					Austin, TX 7				
	PURPOSE OF	(a) Category (See Categories lister	t at the ten	of this schodule)	(b) Description				
		Office Overhe			Campaign Email Hosting				
	X Political			-					
	Non-Political			of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expe	nse	
	Complete ONLY if direct	Candidate/Offi	ceholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH	(a) Amount Cha	ue e el	(h) Data of Charge		dit Canal Jacuan	Daid		
	PAYMENT	(a) Amount Cha	rgea	(b) Date of Charge	09/25/2024	edit Card Issuer	Palu		
		\$29.84		08/02/2024					
	PAYEE	(a) Payee name			(b) Payee add	ress;	City,	State,	Zip Code
		Microsoft			1 Microsoft V	Vay			
		WICLUSUIL							
					Austin, TX 7				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories lister	d at the top	of this schedule)	(b) Description Campaign E				
	_	Office Overhe				maii nostiny			
	Non-Political			of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expe	nse	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Offi	cenoider	name O	ffice sought		Office held		

		EXPE	ENDITURE CATEGOR	RIES FOR BOX	(10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/I Office Overhead/R Polling Expense Printing Expense Salaries/Wages/C	Rental Expense	Tran Trav Trav	el in District el Out of Distric	pment & Related I	
		The Instr	ruction Guide explains l	how to complete	e this form.				
1	Total pages Schedule F4:	2 FILER NAME				:	3 Filer ID (Ethics Commiss	sion Filers)
	Sch: 19/27 Rpt: 48/57	Friends of Paul Bet	tencourt				00069338		
4	CREDIT CARD	Name of finar	ncial institution				*		
	ISSUER	see pr	revious		NDITURES GED TO A CRE		\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	s) Credit Card Is	suer I	Paid		
		\$29.84	09/02/2024						
7	PAYEE	(a) Payee name	•	(b) Payee	e address;		City,	State,	Zip Code
		Mieropoft		1 Micros	soft Way				
		Microsoft							
					TX 78704				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	•	ina			
	—	Office Overhead/Rent	al Expense	Campai	gn Email Hosti	I Hosting			
0	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	e T. Office sought	Check if Austin	n, TX, of	fficeholder living		
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Oniceriolder		Sought			Office field		
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	s) Credit Card Is	suer l	Paid		
		\$258.87	07/25/2024	08/21/20					
	PAYEE	(a) Payee name	•	(b) Payee	e address;		City,	State,	Zip Code
		Moonshine Patio		1239 W	19th St				
				Houston	Houston, TX 77008				
	PURPOSE OF	(a) Category		()	(b) Description				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	,	Campaign Staff Meeting					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule			TX of	fficeholder living		
	Complete ONLY if direct	Candidate/Officeholder		Office sought		1, 17, 01	Office held		
e	xpenditure to benefit C/OH			Ū					
	PAYMENT	(a) Amount Charged	(b) Date of Charge		s) Credit Card Is	suer I	Paid		
		\$549.96	08/22/2024	09/25/20	024				
	PAYEE	(a) Payee name	•	(b) Payee	e address;		City,	State,	Zip Code
		Southwest Airlines		PO Box	36647				
		Southwest Annues							
		(a) Catagory		Dallas, 7 (b) Descr	TX 75235				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	. ,	lder Airfare				
	X Political	Travel Out of District		Childente					
	Non-Political		of Texas. Complete Schedule		Check if Austin	n, TX, of	fficeholder living		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought			Office held		

	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards al Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisin Transportation Equipin Travel in District Travel Out of District OTHER (enter a cate	ment & Related E			
	·	ruction Guide explains I	now to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	thics Commiss	ion Filers)		
Sch: 20/27 Rpt: 49/57	Friends of Paul Bet	tencourt		00069338				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
	\$439.97	09/26/2024						
7 PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code		
	Southwest Airlines		PO Box 36647					
			Dallas, TX 75235					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Officeholder Airfare					
Non-Political	(C) X Check if travel outside	of Texas. Complete Schedule	T. Check if Austi	n, TX, officeholder living e	expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	office sought	Office held				
expenditure to benefit C/OH		-						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
	\$90.00	09/03/2024						
PAYEE	(a) Payee name The Texan		(b) Payee address; 1011 San Jacinto Bld Austin, TX 78701	City, g Ste 315	State,	Zip Code		
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign News Subs	scription				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austi	n, TX, officeholder living e	expense			
Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 07/14/2024	(c) Date(s) Credit Card Is 08/21/2024	ssuer Paid				
PAYEE	(a) Payee name	- -	(b) Payee address; 233 S Wacker Dr	City,	State,	Zip Code		
	United Airlines		Chicago, IL 60606					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Airfare Surcharges					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austi	n, TX, officeholder living e	expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	Diffice sought	Office held				

Forms provided by Texas Ethics Commission

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve - Gift/Awards	erage Expense s/Memorials Expense	RIES FOR BOX 10(Loan Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	ursement S Expense T T T	Solicitation/Fundrais Transportation Equi Travel in District Travel Out of Distric DTHER (enter a cat	pment & Related I		
		The Inst	ruction Guide explains	how to complete this	form.	_			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commiss	ion Filers)	
	Sch: 21/27 Rpt: 50/57	Friends of Paul Bet	tencourt			00069338			
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDIT	UNITEMIZED URES TO A CREDI	\$			
6	PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 07/14/2024	(c) Date(s) Cr 08/21/2024	edit Card Issue	er Paid			
7	PAYEE	(a) Payee name United Airlines	1	(b) Payee add 233 S Wack Chicago, IL	er Dr	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (c) Check if travel outside of Texas. Complete Schedule T.							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedul	ет.	Check if Austin, TX	C, officeholder living	l expense		
9 e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		Office sought		Office held			
	PAYMENT	(a) Amount Charged \$1,277.96	(b) Date of Charge 07/14/2024	(c) Date(s) Cr 08/21/2024	edit Card Issue	er Paid			
	PAYEE	(a) Payee name United Airlines	I	(b) Payee add 233 S Wack Chicago, IL	er Dr	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description	(b) Description Officeholder Airfare To Attend ALEC Conference				
	Non-Political	(C) X Check if travel outside	of Texas. Complete Schedul	ет. 🗌	Check if Austin, TX	(, officeholder living	expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought		Office held			
	PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 07/18/2024	(c) Date(s) Cr 08/21/2024	edit Card Issue	er Paid			
	PAYEE	(a) Payee name United Airlines		(b) Payee add 233 S Wack Chicago, IL	er Dr	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Airfare Surc					
	Non-Political		of Texas. Complete Schedul		Check if Austin, TX		l expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought		Office held			
0	rms provided by Texas F	thics Commission	www.ethics.s			V	ersion V/4 1	0 1842511	

		ENDITURE CATEGO		.,				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/Re Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Cor	ntal Expense	Transportation Equipr Travel in District Travel Out of District			
	The Inst	ruction Guide explains	how to complete t	his form.				
L Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commis	sion Filers)	
Sch: 22/27 Rpt: 51/57	Friends of Paul Bet	ttencourt			00069338			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZ DITURES ED TO A CRE	\$			
5 PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 07/15/2024	(c) Date(s) 08/21/20	Credit Card Is 24	ssuer Paid			
7 PAYEE	(a) Payee name	•	(b) Payee a	address;	City,	State,	Zip Code	
	Zoom		55 Almad	en Blvd 6th	Floor			
				, CA 95113				
B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Ren	,	(b) Descrip Campaig	tion n Subscriptic	ons			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul	е Т.	Check if Austi	in, TX, officeholder living e	expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name (Office sought		Office held			
PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 07/25/2024	(c) Date(s) 08/21/20	Credit Card Is 24	ssuer Paid			
PAYEE	(a) Payee name Zoom			address; en Blvd 6th , CA 95113	City, Floor	State,	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Ren	,	(b) Descrip Campaig	tion n Subscriptio	ons			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul	е Т.	Check if Austi	in, TX, officeholder living e	expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name (Office sought		Office held			
PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 08/15/2024	(c) Date(s) 09/25/20	Credit Card Is 24	ssuer Paid			
PAYEE	(a) Payee name Zoom			address; en Blvd 6th , CA 95113	City, Floor	State,	Zip Code	
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		n Subscriptio	ons			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul		Check if Austi	n, TX, officeholder living e	expense		
Complete ONLY if direct	Candidate/Officeholder	r name	Office sought		Office held			

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				50	HEDUL	E F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expe Fees Food/Beve y - Gift/Awards al Committee Legal Serv	erage Expense Is/Memorials Expense vices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising E Fransportation Equipmer Travel in District Fravel Out of District DTHER (enter a category	t & Related I	
L Total pages Schedule F4:		•	· .	3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 23/27 Rpt: 52/57	Friends of Paul Bet	tencourt		00069338		,
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED			
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDI CARD	т		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$17.05	08/25/2024	09/25/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Cod
	Zoom		55 Almaden Blvd 6th Flo	or		
			San Jose, CA 95113 (b) Description			
B PURPOSE OF EXPENDITURE		a) Category See Categories listed at the top of this schedule) Office Overhead/Rental Expense				
Non-Political						
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	K, officeholder living expension	ense	
O Complete <u>ONLY</u> if direct expenditure to benefit C/OH		name C				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$17.05	09/15/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Cod
	Zoom		55 Almaden Blvd 6th Flo	or		
			San Jose, CA 95113			
PURPOSE OF	(a) Category	of this schodule)	(b) Description			
EXPENDITURE	Office Overhead/Rent		Campaign Subscriptions			
X Political		-				
Non-Political		of Texas. Complete Schedule		K, officeholder living expe	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name C	ffice sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$17.05	09/25/2024				
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Cod
	Zoom		55 Almaden Blvd 6th Flo	or		
			San Jose, CA 95113			
PURPOSE OF	(a) Category		(b) Description		_	
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign Subscriptions			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living expe	ense	

Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name

Office sought

Office held

SCHEDULE F4

State, Zip Code

State, Zip Code

State, Zip Code

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	rage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a categoi	nt & Related I		
		The Inst	ruction Guide explains h	low to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 24/27 Rpt: 53/57	Friends of Paul Bet	tencourt		00069338			
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED				
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDI CARD	⊤ \$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
		\$45.00	07/17/2024	08/21/2024				
7	PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code	
		United Airlines		233 S Wacker Dr				
		Officer Alimes						
			Chicago, IL 60606					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description Airfare Surcharges				
		Travel Out of District	· · · · · · · · · ,	Amare Surcharges				
	X Political		(C) Check if travel outside of Texas. Complete Schedule T.					
L	Non-Political				X, officeholder living exp	ense		
	Complete <u>ONLY</u> if direct kpenditure to benefit C/OH	Candidate/Officeholder		ffice sought	Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
		\$89.99	07/17/2024	08/21/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code	
		United Airlines		233 S Wacker Dr				
		United Allines						
				Chicago, IL 60606				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description Airfare Surcharges				
	X Political	Travel Out of District		Amare Surcharges				
	Non-Political		/=					
⊢	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	X, officeholder living exp Office held	ense		
e	xpenditure to benefit C/OH	Canalate, Chiecholder	liane 0	nice sought	Office field			
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
		\$200.00	07/25/2024	08/21/2024				
		Ψ200.00	0172372024					
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
				2733 Crystal Dr #1000				
		American Legislativ	e Exchange					
				Arlington, VA 22202				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	X Political	Office Overhead/Rent		Campaign Dues				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living exp	ense		
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held			
e	xpenditure to benefit C/OH							
		Candidate/Onicerioider	name O	nice sought	Onice neid			
Ē								

	EXPENDITURE	ES MADE BY (CREDIT CARI	D	
		EXPI	ENDITURE CATEGORI	ES FOR BOX 10(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense I Is/Memorials Expense I	Loan Repayment/Reimbursement Sol Office Overhead/Rental Expense Tra Polling Expense Tra Printing Expense Tra Salaries/Wages/Contract Labor OT	ans ave ave
		The Inst	ruction Guide explains ho	ow to complete this form.	
1	Total pages Schedule F4:	2 FILER NAME			3
	Sch: 25/27 Rpt: 54/57	Friends of Paul Bet	ttencourt		0
4	CREDIT CARD ISSUER	Name of fina see p	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6	PAYMENT	(a) Amount Charged \$132.80	(b) Date of Charge 07/22/2024	(c) Date(s) Credit Card Issuer 08/21/2024	P
7	PAYEE	(a) Payee name Best Western		(b) Payee address; 5501 W National Ave Milwaukee, WI 53214	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Officeholder Lodging	
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	Check if Austin, TX,	offi
9 е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	r name Off	ïce sought	(
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Ρ

itation/Fundraising Expense sportation Equipment & Related Expense el in District el Out of District ER (enter a category not listed above)

Filer ID (Ethics Commission Filers)

Sch: 25/27 Rpt: 54/57	Friends of Paul Bettencourt			00069338			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid			
	\$132.80	07/22/2024	08/21/2024				
7 PAYEE	(a) Payee name Best Western		(b) Payee address; 5501 W National Ave Milwaukee, WI 53214	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Officeholder Lodging				
Non-Political		of Texas. Complete Schedule T.		n, TX, officeholder living ex	pense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid			
	\$54.11	09/06/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Chili's		4420 N Lamar Blvd				
			Austin, TX 78756				
PURPOSE OF EXPENDITURE	(a) Category (b) Description (See Categories listed at the top of this schedule) Campaign Staff Meeting Food/Beverage Expense —		(b) Description Campaign Staff Meeting				
Non-Political			n, TX, officeholder living ex	pense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought			Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid			
	\$842.95	07/31/2024	09/25/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Costco		10401 Research Blvd				
			Austin, TX 78759				
PURPOSE OF EXPENDITURE			(b) Description Capitol Office Supplies				
X Political	Office Overhead/Ren						
Non-Political		of Texas. Complete Schedule T.		n, TX, officeholder living ex	pense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Of						
	I						

EXPENDITURE CATEGORIES FOR BOX 10(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisi Transportation Equip Travel in District Travel Out of District OTHER (enter a cate	ment & Related E			
		The Inst	ruction Guide explains	how to complete this form.					
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	thics Commiss	ion Filers)		
	Sch: 26/27 Rpt: 55/57	Friends of Paul Bet	tencourt		00069338				
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMI					
	ISSUER	see previous		EXPENDITURES CHARGED TO A CR CARD	EDIT				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	Issuer Paid				
		\$32.51	07/04/2024	08/21/2024					
7	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
				1954 Commerce St					
		Dallas Morning Nev	WS						
_				Dallas, TX 75201					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	scription				
	X Political	Office Overhead/Rent	tal Expense	Campaign News Subscription					
	Non-Political								
0	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Aust	tin, TX, officeholder living Office held	expense			
	xpenditure to benefit C/OH	Culturale, Childenolder			Office field				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	Issuer Paid				
		\$32.51	08/04/2024	09/25/2024					
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				1954 Commerce St					
		Dallas Morning Nev	VS						
				Dallas, TX 75201					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
		Office Overhead/Rental Expense		Campaign News Subscription					
	X Political								
	Non-Political		of Texas. Complete Schedule		tin, TX, officeholder living	expense			
<u>م</u>	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought	Office held				
0.	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	Issuer Paid				
		\$32.51	09/04/2024	(-) (-)					
		Ψ <u></u>	03/04/2024						
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				1954 Commerce St					
Dallas Mo		Dallas Morning Nev	VS						
		Dallas, TX 75201							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	., .	(b) Description				
EXPENDITURE (See Categories listed at the top of this schedule) Campaign News Subscription X Political Office Overhead/Rental Expense Campaign News Subscription									
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
e	xpenditure to benefit C/OH								

EXPENDITURE CATEGORIES FOR BOX 10(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Ti Polling Expense Ti Printing Expense Ti Salaries/Wages/Contract Labor O	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)		
		·	ruction Guide explains f	now to complete this form.			
1	Total pages Schedule F4:			3 Filer ID (Ethics Commission Filers)			
	Sch: 27/27 Rpt: 56/57	Friends of Paul Bet	tencourt		00069338		
4	CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$26.19	07/17/2024	08/21/2024			
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Drink Wisconsinbly Pub		320 W Highland Ave			
				Milwaukee, WI 53203			
8	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Campaign Staff Meeting			
	X Political		1130				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX	, officeholder living expense		
9	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	office sought	Office held		
e	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$29.42	07/17/2024	08/21/2024			
	PAYEE	\$29.42 (a) Payee name	07/17/2024	(b) Payee address;	City, State, Zip Code		
	PAYEE	(a) Payee name			City, State, Zip Code		
	PAYEE			(b) Payee address;	City, State, Zip Code		
	PAYEE	(a) Payee name		(b) Payee address; 320 W Highland Ave Milwaukee, WI 53203	City, State, Zip Code		
	PURPOSE OF	(a) Payee name Drink Wisconsinbly (a) Category	Pub	(b) Payee address; 320 W Highland Ave Milwaukee, WI 53203 (b) Description	City, State, Zip Code		
	PURPOSE OF EXPENDITURE	 (a) Payee name Drink Wisconsinbly (a) Category (See Categories listed at the top 	Pub of this schedule)	(b) Payee address; 320 W Highland Ave Milwaukee, WI 53203	City, State, Zip Code		
	PURPOSE OF EXPENDITURE	(a) Payee name Drink Wisconsinbly (a) Category	Pub of this schedule)	(b) Payee address; 320 W Highland Ave Milwaukee, WI 53203 (b) Description	City, State, Zip Code		
	PURPOSE OF EXPENDITURE X Political Non-Political	 (a) Payee name Drink Wisconsinbly (a) Category (See Categories listed at the top Food/Beverage Expendence (c) Check if travel outside 	Pub of this schedule) nse of Texas. Complete Schedule	(b) Payee address; 320 W Highland Ave Milwaukee, WI 53203 (b) Description Campaign Staff Meeting	, officeholder living expense		
	PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	 (a) Payee name Drink Wisconsinbly (a) Category (See Categories listed at the top Food/Beverage Expendence 	Pub of this schedule) nse of Texas. Complete Schedule	 (b) Payee address; 320 W Highland Ave Milwaukee, WI 53203 (b) Description Campaign Staff Meeting 			
e	PURPOSE OF EXPENDITURE X Political Non-Political	 (a) Payee name Drink Wisconsinbly (a) Category (See Categories listed at the top Food/Beverage Expendence (c) Check if travel outside 	Pub of this schedule) nse of Texas. Complete Schedule	(b) Payee address; 320 W Highland Ave Milwaukee, WI 53203 (b) Description Campaign Staff Meeting	, officeholder living expense		
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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.						1 Total pages Schedule T: Sch: 1/1 Rpt: 57/57		
2 FILER NAME					3 F	Filer ID (Ethics Con	mmission Filers)	
Friends of Paul	Friends of Paul Bettencourt					00069338		
4 Name of Contribut	tor / Corpora	ation or Labor Organ	nization / Pledgor /Payee	9				
Southwest Airlin	ies							
5 Contribution / Exp	enditure rep	oorted on:						
Schedule A2	:	Schedule B	Schedule B(J)	Schedule C2	ļ	Schedule D	Schedule F1	
Schedule F2		Schedule F4	Schedule G	Schedule H		Schedule COH-UC		
6 Dates of Travel		of person(s) traveling	g					
	Betten	ncourt, Paul						
	8 Depart	ture city or name of d	leparture location					
12/02/2024	Houst	on, TX						
	9 Destina	ation city or name of	destination location					
12/02/2024	Washi	ington, DC						
10 Means of transpor	rtation	11 Purpose of trave	el (including name of co	nference, seminar, or	r other	r event)		
Commercial Airp	olane	Officeholder A	Airfare to attend ALEC	Summit.				
Name of Contribut	tor / Corpora	ation or Labor Orgar	nization / Pledgor /Payee	<u> </u>				
United Airlines								
Contribution / Exp	enditure rep	ported on:						
Schedule A2	:	Schedule B	Schedule B(J)	Schedule C2	ľ	Schedule D	Schedule F1	
Schedule F2		Schedule F4	Schedule G	Schedule H		Schedule COH-UC		
Dates of Travel		of person(s) traveling						
Dates of Haver		ncourt, Paul	9					
		ture city or name of d	departura location					
07/22/2024		ion, TX	leparture location					
0112212027			destinction logation					
07/22/2024	Destina	ation city or name of	desunation location					
					- 10 0	43		
Means of transpor	tation		el (including name of co Airfare To Attend ALE		Other	(event)		