FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00065047 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Joan Huffman Date Received **ELECTRONICALLY FILED** 10/28/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 3733-1 Westheimer Rd. Date Hand-delivered or Date Postmarked Suite 40 Change of Address Houston, TX 77027 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jeb NAME NICKNAME LAST **SUFFIX** Brown STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 3100 Edloe St., Suite 220 STREET **ADDRESS** (Residence or Business) Houston, TX 77027 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3100 Edloe St., Suite 220 MAILING **ADDRESS** Houston, TX 77027 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 439-1988 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Year Month Day COVERED **THROUGH** 10/26/2024 09/27/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff 11/05/2024 χ General Special

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	_
Texans for Joan Huffma					
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME			
PURPOSE		Sen. JOAN HUFFMAN			
(Attach lists on plain	Candidate				
paper to complete this report if necessary.)		OFFICE SOLICHT (condidate) / OFFICE HEL	D (officeholder)		_
	X Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	.D (diliceriolder)		
		State Seriator			
☐ SUPPORT					
(Candidate or Measure)		ELECTI	ION DATE		
Month OPPOSE			Month	Day Year	
(Candidate or Measure)					
ACCICT.	Measure				
X ASSIST (Officeholder)	_	DESCRIPTION			
(Omocholder)					
15 CONTRIBUTION	1. TOTAL POLITICAL CON		N PLEDGES,		_
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE		\$ \$100.00)
	2. TOTAL POLITICAL C	ONTRIBUTIONS		A	
		\$ \$161,540.00)		
EXPENDITURE			_		
TOTALS		\$ \$212.29)		
	4. TOTAL POLITICAL E	XPENDITURES			
				\$ \$69,451.51	-
CONTRIBUTION	5 TOTAL POLITICAL CON	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE		_
BALANCE	REPORTING PERIOD	TRIBOTIONS MAINTAINED AS OF THE EAST	DAT OF THE	\$ \$1,679,304.75	;
OUTSTANDING		UNT OF ALL OUTSTANDING LOANS AS OF	THE LAST		_
LOAN TOTALS	DAY OF THE REPORTIN	IG PERIOD		\$ \$0.00)
					_
16 AFFIDAVIT					_
		I swear, or affirm, under penalty of per and correct and includes all informatio			
		Title 15, Election Code.	·	•	
		Mr le	b Brown		
			mpaign Treasur	er	
AFFIX NOTARY	STAMP / SEAL ABOVE	G	1 0		
Sworn to and subscribed	before me, by the said	, t	his the	day	
	Sworn to and subscribed before me, by the said, this the, this the, 20, to certify which, witness my hand and seal of office.				
Signature of officer add	ministering oath Prin	ted name of officer administering oath	Title of office	er administering oath	
		-		-	

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3 3 of 29

					0 01 23
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethi	ics Commission Filers)
Tex	xans fo	r Joan Huffman	00065047		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS				150,900.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	10,640.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$	
7.		SCHEDULE E: LOANS		\$	
8.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	69,451.51
9.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
10.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
11.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
12.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
13.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
14.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	5,520.50

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/13 Rpt: 4/29	
2	FILER NAME Texans for J	oan Huffman		3	Filer ID (Ethics Commission 00065047	on Filers)
4	Date 10/21/2024			7	Amount of Contribution (\$)	\$2,000.00
_	Deinsinal assu	AUSTIN, TX 78767	C. Franksissa (Caa kaatuustiana			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ALIST CONSULTING LLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78757				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor x out-of-state PAC (ID#: CAMERICAN PHARMACY INC GPAC Contributor address; City; State; Zip Code	000887315		Amount of Contribution (\$)	\$2,500.00
		CORPUS CHRISTI, TX 78401				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID#:_ASSOCIATED BUILDERS & CONTRACTORS Contributor address; City; State; Zip Code HOUSTON, TX 77092			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ ASSOCIATED GENERAL CONTRACTORS OF Contributor address; City; State; Zip Code AUSTIN, TX 78768			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 2/13 Rpt: 5/29	
2	FILER NAME Texans for J	oan Huffman				3	Filer ID (Ethics Commission 00065047	on Filers)
4	Date 10/02/2024	5 Full name of contributor BEASLEY, KEVIN6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	7	Amount of Contribution (\$)	\$500.00
Ω	Principal occu	HOUSTON, TX 77024 pation / Job title (See Instructions)	la		Employer (See Instructions	-, 		
		ONSULTANT			MCEA, LLC	·)		
	Date 10/11/2024	Full name of contributor BEER ALLIANCE OF TEX Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
	Drincinal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)			Employer (See Instructions	·/		
	Fillicipal occu	pation / 300 title (3ee instructions)			Employer (See instructions	·)		
	Date 10/11/2024	Full name of contributor BING, ERIC Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code			•	Amount of Contribution (\$)	\$1,500.00
	Deinainal assu	HOUSTON, TX 77056			Franksian (Can Instructions	<u></u>		
	CEO	pation / Job title (See Instructions)			Employer (See Instructions COLLEGE OF HEALTH	•	ROFESSIONALS	
	Date 10/11/2024	Full name of contributor BRESNEN, AMY Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
	Principal occu ATTORNEY	pation / Job title (See Instructions)			Employer (See Instructions SELF-EMPLOYED	<u> </u>		
	Date 10/11/2024	Full name of contributor CAIN, SALLY Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/13 Rpt: 6/29		
2	FILER NAME Texans for J	oan Huffman		3	Filer ID (Ethics Commission 00065047	on Filers)	
4	Date 10/21/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00	
8	Principal occu	DURANT, OK 74702 pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor x out-of-state PAC (ID#: CCIGNA PAC Contributor address; City; State; Zip Code PHILADELPHIA, PA 19192	000085316		Amount of Contribution (\$)	\$1,250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: DALLAS POLICE OFFICER'S PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	DALLAS, TX 75215 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ DANIELLE DELGADILLO CONSULTING Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: DENTAQUEST PAC Contributor address; City; State; Zip Code BOSTON, MA 02129			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/13 Rpt: 7/29
2	FILER NAME Texans for J	oan Huffman		3	Filer ID (Ethics Commission Filers) 00065047
4	Date 10/11/2024	 Full name of contributor	000827292)	7	Amount of Contribution (\$) \$2,000.00
•	Dringing oggu	INDIANAPOLIS, IN 46285	D. Employer (See Instructions)	<u></u>	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)	
	Date 09/27/2024	Full name of contributor	00097568)		Amount of Contribution (\$) \$1,000.00
	Principal occu	ARLINGTON, VA 22209 Dation / Job title (See Instructions)	Employer (See Instructions)	 ;)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:FOCUSED ADVOCACY POLITICAL ACTION CCCCOntributor address; City; State; Zip Code AUSTIN, TX 78746	I		Amount of Contribution (\$) \$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: FRIENDS OF THE UNIVERSITY POLITICAL AC Contributor address; City; State; Zip Code AUSTIN, TX 78763			Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: GERMANIA FARM MUTUAL PAC Contributor address; City; State; Zip Code BRENHAM, TX 77834			Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)	

	MONET	ARY POLITICAL CON	5	SCHEDULE A1			
	The Instru	ction Guide explains how to co	omplete this form	i	1	Total pages Schedule A1: Sch: 5/13 Rpt: 8/29	
2	FILER NAME Texans for J	oan Huffman			3	Filer ID (Ethics Commissi 00065047	on Filers)
4	Date 10/11/2024	 Full name of contributor out out GREENBERG TRAURIG, PA PA Contributor address; City; State; Zip 			7	Amount of Contribution (\$)	\$2,000.00
		ALBANY, NY 12207					
8	Principal occu	pation / Job title (See Instructions)	9 6	Employer (See Instructions))		
	Date 10/11/2024	Full name of contributor out HCA TEXAS GOOD GOVERNM Contributor address; City; State; Zip DALLAS, TX 75240				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	E	Employer (See Instructions))		
	Date 10/16/2024	Full name of contributor	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
		FREDERICKSBURG, TX 78624					
	OWNER	pation / Job title (See Instructions)		Employer (See Instructions) GRAPE CREEK VINEYA		DS	
	Date 10/25/2024	HILLCO PAC	t-of-state PAC (ID#: D Code			Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)	E	Employer (See Instructions))		
	Date 10/11/2024	HMWK, LLC	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	E	Employer (See Instructions))		
			I				

	MONET	ARY POLITICAL (ONS	SCHEDULE A1				
	The Instru	ction Guide explains how	v to complete this fo	orm.	1	1 Total pages Schedule A1: Sch: 6/13 Rpt: 9/29		
2	FILER NAME Texans for J	oan Huffman			3	Filer ID (Ethics Commission 00065047	on Filers)	
4	Date 10/11/2024	 Full name of contributor HOLLAND AND KNIGHT Contributor address; City; S 			7	Amount of Contribution (\$)	\$1,000.00	
		DALLAS, TX 75201	,					
8	Principal occu	pation / Job title (See Instruction	5)	9 Employer (See Instructions	5)			
	Date 10/11/2024	Contributor address; City; S		RS		Amount of Contribution (\$)	\$2,000.00	
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instruction	5)	Employer (See Instructions	 s)			
	Date 10/11/2024	Full name of contributor HUNTON ANDREWS KU Contributor address; City; S HOUSTON, TX 77002			•	Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	<u>l</u> s)			
	Date 10/11/2024	Full name of contributor IATSE LOCAL 484 PAC Contributor address; City; S AUSTIN, TX 78741)	•	Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)			
	Date 10/25/2024	Full name of contributor KAUFMAN, PHILIP Contributor address; City; S EDINA, MN 55435	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$1,500.00	
	Principal occu CEO	pation / Job title (See Instruction	5)	Employer (See Instructions SEVITA	s)			

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/13 Rpt: 10/29		
2	FILER NAME Texans for J	oan Huffman		3	Filer ID (Ethics Commission 00065047	on Filers)	
4	Date 10/11/2024	 Full name of contributor	LP	7	Amount of Contribution (\$)	\$2,500.00	
		AUSTIN, TX 78760					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: LLOYD GOSSELINK ROCHELLE & TOWNSENI Contributor address; City; State; Zip Code AUSTIN, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 10/21/2024	Full name of contributor x out-of-state PAC (ID#:C MARATHON PETROLEUM CORP PAC Contributor address; City; State; Zip Code	00496307)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>;</u>)			
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Date 10/21/2024	Full name of contributor out-of-state PAC (ID#:_ MCCORMICK, J PHILIP Contributor address; City; State; Zip Code HOUSTON, TX 77025			Amount of Contribution (\$)	\$500.00	
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			

	MONET	ARY POLITICAL CO	NS 	SCHEDULE A1			
	The Instru	ction Guide explains how to	complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/13 Rpt: 11/29	
2	FILER NAME Texans for J	oan Huffman			3	Filer ID (Ethics Commission 00065047	on Filers)
4	Date 10/11/2024	 Full name of contributor X MCGUIREWOODS FEDERAL Contributor address; City; State; 			7	Amount of Contribution (\$)	\$1,000.00
		RICHMOND, VA 23219					
8	Principal occu	pation / Job title (See Instructions)	9	9 Employer (See Instructions	;)		
	Date 10/11/2024	MCKESSON CORP EMPLOY Contributor address; City; State;		00108035		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 10/02/2024	Full name of contributor MILLER, BALOUS Contributor address; City; State; SAN ANTONIO, TX 78207	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/21/2024	N. W. AUSTIN REP WOMEN				Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/11/2024	Full name of contributor PAC OF THE INDEPENDEN Contributor address; City; State; AUSTIN, TX 78768				Amount of Contribution (\$)	\$3,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/13 Rpt: 12/29		
2	FILER NAME Texans for J	oan Huffman		3	Filer ID (Ethics Commission 00065047	on Filers)	
4	Date 10/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
8	Principal occu	WASHINGTON, DC 20005 pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ POINSETT PLLC Contributor address; City; State; Zip Code AUSTIN, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: SAMPSON PUBLIC AFFAIRS LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_ SCOTT, CAROL Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411			Amount of Contribution (\$)	\$500.00	
	·	pation / Job title (See Instructions) FAIRS CONSULTANT	Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ STONE HILTON PLLC Contributor address; City; State; Zip Code AUSTIN, TX 78748)		Amount of Contribution (\$)	\$1,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1	
	The Instru	ction Guide explains how to complete this form	n.	1 Total pages Schedule A1: Sch: 10/13 Rpt: 13/29
2	FILER NAME Texans for J	oan Huffman	;	3 Filer ID (Ethics Commission Filers) 00065047
4	Date 10/11/2024	 Full name of contributor		7 Amount of Contribution (\$) \$1,000.00
8	Principal occu	OMAHA, NE 68154 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#: TEXANS FOR LAWSUIT REFORM PAC Contributor address; City; State; Zip Code AUSTIN, TX 78701		Amount of Contribution (\$) \$15,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: TEXAS AGRICULTURAL AVIATION ASSOC PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: TEXAS AUTOMOBILE DEALERS ASSN PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,500.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: TEXAS BANKERS ASSN BANK PAC Contributor address; City; State; Zip Code AUSTIN, TX 78701		Amount of Contribution (\$) \$7,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	r

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this for	m.	l	otal pages Schedule A1: Sch: 11/13 Rpt: 14/29	
2	FILER NAME Texans for J	oan Huffman		l	iler ID (Ethics Commissi 0065047	on Filers)
4	Date 10/09/2024	5 Full name of contributor out-of-state PAC (ID#: TEXAS DENTAL ASSOCIATION PAC 6 Contributor address; City; State; Zip Code			mount of Contribution (\$)	\$10,000.00
		AUSTIN, TX 78704				
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions)	5)		
	Date Full name of contributor out-of-state PAC (ID#:) TEXAS FARM BUREAU AGFUND Contributor address; City; State; Zip Code WACO, TX 76702-2689				mount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Date 10/11/2024			A	mount of Contribution (\$)	\$2,000.00
	Principal occu	DALLAS, TX 75243 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: TEXAS LAND TITLE ASSOCIATION PAC Contributor address; City; State; Zip Code AUSTIN, TX 78703		А	mount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Date 10/21/2024	Full name of contributor out-of-state PAC (ID#: TEXAS NURSE PAC Contributor address; City; State; Zip Code AUSTIN, TX 78759		А	mount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/13 Rpt: 15/29	
2	FILER NAME Texans for J	oan Huffman		3	Filer ID (Ethics Commission 00065047	on Filers)
4	Date 10/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	AUSTIN, TX 78754 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 10/21/2024	Full name of contributor X out-of-state PAC (ID#: C			Amount of Contribution (\$)	\$2,000.00
		Contributor address; City; State; Zip Code ARLINGTON, VA 22202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor 🗓 out-of-state PAC (ID#: C00542365) 10/11/2024 TOYOTA MOTOR NORTH AMERICA INC PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	WASHINGTON, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions))		
Date Full name of contributor out-of-state PAC (ID#:		•		Amount of Contribution (\$)	\$500.00	
	Principal occu	ATHENS, TX 75751 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date Full name of contributor out-of-state PAC (ID#:) 10/11/2024 UNION PACIFIC CORP FUND FOR EFFECTIVE GOVERNMENT Contributor address; City; State; Zip Code WASHINGTON, DC 20004				Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONET	ARY POLITICAL CONTR	RIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to comp	lete this fo	orm.	1	Total pages Schedule A1: Sch: 13/13 Rpt: 16/29	
2	FILER NAME Texans for J	oan Huffman			3	Filer ID (Ethics Commissi 00065047	on Filers)
4	Date 10/11/2024	 Full name of contributor x out-of-state UPS PAC Contributor address; City; State; Zip Cod 	ate PAC (ID#: <u>C</u>)	7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	WASHINGTON, DC 20003 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u> s)		
	Date 10/11/2024	Full name of contributor out-of-sta VISTRA EMPLOYEE PAC COMMIT Contributor address; City; State; Zip Cod IRVING, TX 75039-2479		STRA CORP		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> S)		
	Date 10/25/2024	ZACHRY CONSTRUCTION CORPO				Amount of Contribution (\$)	\$2,500.00
	Principal occu	SAN ANTONIO, TX 78265 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 17/29 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texans for Joan Huffman 00065047 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution **6** Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 10/18/2024 Senate Republican Caucus \$10,640.00 i Polling 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 1/11 Rpt: 18/29	FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4	Date 09/30/2024	5 Payee name AMAZON	-
6	Amount (\$) \$920.11	7 Payee address; City; State; Zip Code410 TERRY AVENUE NORTH	
		SEATTLE, WA 98109	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense OFFICE SUPPLIES FOR OFFICEHOLDER'S OFFICE
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 10/08/2024	Payee name AMAZON	
	Amount (\$) \$306.18	Payee address; City; State; Zip Code 410 TERRY AVENUE NORTH	
		SEATTLE, WA 98109	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense OFFICE SUPPLIES FOR OFFICEHOLDER'S OFFICE
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 09/27/2024	Payee name ANEDOT	
	Amount (\$) \$281.20	Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE, LA 70808	
	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 CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/11 Rpt: 19/29	Texans for Joan Huffman 00065047
4	Date	5 Payee name
	10/08/2024	ANEDOT
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.30	5555 HILTON AVE
		SUITE 106
		BATON ROUGE, LA 70808
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		CREDIT CARDS FEES FOR CAMPAIGN
		CONTRIBUTIONS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/07/2024	ANEDOT
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.90	5555 HILTON AVE
		SUITE106
		BATON ROUGE, LA 70808
		1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel subside of Taylor Camplete Schedule T
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		CREDIT CARDS FEES FOR CAMPAIGN
		CONTRIBUTIONS
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	10/21/2024	ANEDOT
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.30	5555 HILTON AVE
		SUITE 106
		BATON ROUGE , LA 70808
	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	1
1		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			ages	/Contract Labor		OTHER (enter a	a category not listed ab	ove)
				The Instruction G	lide explains ho	ow to cor	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 3/11 Rpt: 20/29		Texans for 3	Joan Huffman						00065047		
4	Date	5	Payee name						_			
	09/30/2024		ARCENEAL	JX, AUSTIN								
_	Amount (t)	7	Payee addres	<u> </u>	Ctoto	Zip Coo	d0					
6	Amount (\$)	'			Sidie,	Zip Coo	ue					
	\$750.00		12810 SHE	RBOURNE ST								
			AUSTIN, TX	(78729								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this sched	lule)	(b)	Description				
	OF EXPENDITURE			ges/Contract La		,		Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITORE							—		officeholder livin		
								CAMPAIGN	CC	NTRACT L	ABOR	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	fice souç	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	10/10/2024		AT&T MOBI	LITY								
_	Amount (\$)	┢	Payee addres	ss; City;	State:	Zip Coo	de					
	\$465.46		PO BOX 53		Otato,	Z.p 000	uo					
	Ψ403.40		FO DOX 33	7104								
			ATLANTA,	TX 30353-7104								
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this sched	lule)	(b)	Description				
	OF EXPENDITURE		Office Overl	nead/Rental Exp	oense			=			nplete Schedule T.	
	-							_		officeholder livin		
								CAMPAIGN 1	IEL	ECOMINIO	NICATIONS	
		<u> </u>										
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Off	fice souç	ght			Office h	eld	
	experialitate to bettern 6/61											
	Date		Payee name									
	10/25/2024		AT&T MOBI	LITY								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$168.35		PO BOX 53	7104								
			ATI ANITA -	ΓX 30353-7104								
		L.				Т						
	PURPOSE OF	(a)		e Categories listed at the		lule)	(b)	Description				
	EXPENDITURE		Office Overh	nead/Rental Exp	oense					officeholder livin	nplete Schedule T.	
								CAMPAIGN 7				
								_, ,				
\vdash	Complete ONLY if direct	Ц	Pandidato/Offic	ceholder name	Off	fice soug	tdr			Office h	eld.	
	expenditure to benefit C/OI		zariuluale/OIII	Sendidei Haille	Oli	แคน รถต์(JIIL			Office II	CIU	
	•											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wa The Instruction Guide explains how to com		/Contract Labor OTHER (enter a category not listed above) te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 21/29	Texans for Joan Huffman		00065047
4	Date	5 Payee name		
	10/16/2024	BRAZOSPORT FACTS		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$19.50	720 S MAIN ST		
		CLUTE, TX 77531		
8	PURPOSE OF	, (************************************	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense SUBSCRIPTION
				SOBSCIAII TION
Ļ	Operation ONLY & Street	Occasionate (Office Included a second	l- 4	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug H	Int	Office held
F	Date	Payee name		
	09/28/2024	CONSTANT CONTACT		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$55.44	RESERVOIR PLACE		
		1601 TRAPELO ROAD		
		WALTHAM, MA 02451		
_	DUDDOGE		/I- \	
	PURPOSE OF	, , ,	(a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
				CAMPAIGN EMAIL SERVICE
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI	Н		
H	Date	Payee name		
	10/09/2024	DOWNRIGHT AUSTIN		
			l a	
	Amount (\$)	l ' ' ' '	ie	
	\$53.96	701 EAST 11TH ST		
		AUSTIN, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense OFFICEHOLDER MEAL WHILE IN TOWN FOR
				MEETING
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıb+	Office held
	Complete ONLY if direct expenditure to benefit C/OI	•	JI IL	Office field
	•			
l				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 5/11 Rpt: 22/29	Texans for Joan Huffman 00065047				
4	Date	5 Payee name				
	10/20/2024	DOWNRIGHT AUSTIN				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$1,306.83	701 EAST 11TH ST				
		AUSTIN, TX 78701				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		LODGING FOR OFFICEHOLDER FOR EVENT				
_	Complete ONLY if direct	Candidate/Office holder years Office country				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	10/10/2024	FOURS SEASONS HOTEL AUSTIN				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$450.72	98 SAN JACINTO BLVE				
		AUSTIN, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense LODGING FOR OFFICEHOLDER'S MEETING				
		LODGING FOR OFFICEHOLDER'S MEETING				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
_	Data					
	Date 10/11/2024	Payee name GODADDY.COM				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$108.33	14455 NORTH HAYDEN ROAD				
		SCOTTSDALE, AZ 85260				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		CAMPAIGN ADVERTISING				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)				
		_			uide explains h	now to co	mple	ete this form.	_		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 6/11 Rpt: 23/29		Texans for 3	Joan Huffman						00065047	
4	Date	5	Payee name								
	09/27/2024		JENNIFER	NAEDLER CON	SULTING						
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de				
	\$1,197.25		12122 CYP	RESS CREEK I	AKES DR						
			CYPRESS,	TX 77433							
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	he ton of this sche	edule)	(b)	Description			
	OF		Consulting E		110 top 01 tillo 00110	oudio,		_ :	outsi	de of Texas. Con	nplete Schedule T.
	EXPENDITURE			•				—		officeholder livin	
								CAMPAIGN	PR	OFESSION	IAL SERVICES
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	0	office sou	ght			Office h	eld
	experientare to benefit Grot										
	Date		Payee name								
	10/18/2024		JUDICIAL F	AIRNESS PAC							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de				
	\$2,000.00		1233 W LO	OP S							
			STE 1375								
			HOUSTON,	TX 77027							
	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			ıs/Donations Ma		ŕ		Check if travel	outsi	de of Texas. Con	nplete Schedule T.
	EXPENDITORE		Candidate/C	Officeholder/Pol	itical Commi	ittee		ш		officeholder livin	g expense
								POLITICAL D	O	NATION	
		L									
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	O	office sou	ght			Office h	eld
	<u>'</u>	_									
	Date		Payee name								
	09/30/2024		KNESEK, JI	ENNIFER							
	Amount (\$)		Payee addres		State;	Zip Co	de				
	\$250.00		15211 PARI	K ROW							
			APT 427								
			HOUSTON,	TX 77084							
	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wa	iges/Contract L	abor						nplete Schedule T.
	LXI LINDITORL							—		officeholder livin	
								CAMPAIGN	CC	MIRACIL	ABOR
_	Complete ONLY if direct	Ц,	Candidata/C#	achaldar nama		office co:	abt			Office	ald
	Complete ONLY if direct expenditure to benefit C/OI		Januluale/Offic	ceholder name	O	office sou	yılı			Office h	eiu
_											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total nagge Schodule F1:	
	Total pages Schedule F1: Sch: 7/11 Rpt: 24/29	Texans for Joan Huffman Texans for Joan Huffman 00065047
4	Date	5 Payee name
	10/09/2024	LAND ROVER AUSTIN
6	Amount (\$) \$2,569.25	7 Payee address; City; State; Zip Code 1515 W 5th ST AUSTIN, TX 78703
8	PURPOSE	
١	OF	
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		REPAIRS TO CAMPAIGN VEHICLE
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/22/2024	LAWSON STRATEGIES
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1407 LOST CREEK BLVD
	Ψ2,300.00	TION EGGN GIVELINGEND
		AUSTIN, TX 78746
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		CAMPAICN SERVICES
		CAMPAIGN SERVICES
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2024	MAHNKE, CHRISTY
	Amount (\$)	Payee address; City; State; Zip Code
	\$837.50	11217 TODD ST
	Ψ001.30	
		HOUSTON, TX 77055
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	LA LIDITOIL	Check if Austin, TX, officeholder living expense
		CAMPAIGN BOOKKEEPING SERVICES
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a category not listed choice)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		ore)
_	Sch: 8/11 Rpt: 25/29	Texans for Joan Huffman 00065047	eis)
4	Date	5 Payee name	
	10/12/2024	MARRIOTT DALLAS	
6	Amount (\$) \$745.47	7 Payee address; City; State; Zip Code 3033 FAIRMONT ST	
		DALLAS, TX 75201	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		LODGING FOR OFFICEHOLDER'S STAFF FO EVENT	R
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
_	expenditure to benefit C/OI		
	Date	Payee name	
	10/12/2024	MARRIOTT DALLAS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$745.47	3033 FAIRMONT ST	

		DALLAS, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		LODGING FOR OFFICEHOLDER FOR EVENT	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	10/21/2024	OMNI AUSTIN DOWNTOWN	
	Amount (\$)	Payee address; City; State; Zip Code	
	` ,		
	\$2,502.78	700 SAN JACINTO BLVD	
		AUSTIN, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
	LAI LINDITORL	Check if Austin, TX, officeholder living expense	
		LODGING FOR OFFICEHOLDER FOR MEETII	NG
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 26/29	Texans for Joan Huffman 00065047
4	Date	5 Payee name
	10/03/2024	PUBLIC STORAGE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$148.00	2603 JOEL WHEATON RD
		STE 400
		HOUSTON, TX 77082
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		STORAGE FOR OFFICEHOLDER'S HOUSTON OFFICE
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/03/2024	PUBLIC STORAGE
	Amount (\$)	Payee address; City; State; Zip Code
	\$224.00	2121 S I-35
		AUSTIN, TX 78741
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense STORAGE FOR OFFICEHOLDER'S AUSTIN
		OFFICE OFFICEHOLDER'S AUSTIN
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	D :	
	Date	Payee name
	10/14/2024	RACONTEUR COMPANY
	Amount (\$)	Payee address; City; State; Zip Code
	\$50,000.00	1717 WEST SIXTH STREET
		STE 215
		AUSTIN, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CAMPAIGN SERVICES
		CAIVIF AIGIV SLIVVICES
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	Sch: 10/11 Rpt: 27/29	Texans for Joan Huffman		00065047					
4	Date	5 Payee name							
	10/03/2024	SOUTHWEST AIRLINES							
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode						
	\$226.00	2702 LOVE FIELD DR							
		DALLAS, TX 75235							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.					
				Check if Austin, TX, officeholder living expense TRAVEL FOR POLITICAL MEETING					
				TRAVEL FOR FOLITICAL MEETING					
_	0 1: 0 1: 0	0.5		000					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	ıght	Office held					
	Date	Payee name							
	10/12/2024	TOULOUSE DALLAS							
	Amount (\$)	Payee address; City; State; Zip Co	ode						
	\$150.16	3314 KNOX ST							
		DALLAS, TX 75205							
PURPOSE		(a) Category (See Categories listed at the top of this schedule)	Description						
OF EXPENDITURE		Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.					
				Check if Austin, TX, officeholder living expense OFFICEHOLDER'S MEAL WHILE IN TOWN FOR					
				EVENT					
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	iaht	Office held					
	expenditure to benefit C/O		ignt	Office field					
	Date	Payee name							
	10/11/2024	UBER							
	Amount (\$)	Payee address; City; State; Zip Co	ode						
	\$4.28	1455 MARKET ST							
		STE 400							
		SAN FRANCISCO, CA 94103							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF	Travel Out of District	(~)	Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Traver eat or Bistrict		Check if Austin, TX, officeholder living expense					
				TRAVEL					
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held					
	expenditure to benefit C/OI	-1							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries	Expense Wages/Contract Labor	Trave	el in District el Out of Dis ER (enter a	trict category not listed above)
1	Total pages Schedule F1:					3 File		(Ethics Commission Filers)
	Sch: 11/11 Rpt: 28/29	Texans for	r Joan Huffman			000	65047	
4	Date	5 Payee nam	е					
	10/15/2024	UBER						
6	Amount (\$)	7 Payee addr	ress; City;	State; Zip C	ode			
	\$87.48	1455 MAR	RKET ST					
		STE 400						
		SAN FRAI	NCISCO, CA 94103					
8	PURPOSE	(a) Category (See Categories listed at the top	p of this schedule)	(b) Description			
	OF EXPENDITURE	OF Travel Out of Dietrict Check if travel outside of Texas. Complete Schedule T.						
					TRAVEL	stin, TX, office	nolder living	expense
					HOWEL			
9	Complete ONLY if direct expenditure to benefit C/Oh	L Candidate/O ¹ H	fficeholder name	Office so	<u>l</u> ught		Office he	eld

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 29/29 2 FILER NAME Filer ID (Ethics Commission Filers) Texans for Joan Huffman 00065047 8 Amount (\$) Date 5 Name of person from whom amount is received 09/30/2024 FIDELITY INVESTMENTS \$4,144.58 6 Address of person from whom amount is received; City; State; Zip Code BOSTON, MA 02205 Purpose for which amount is received Check if political contribution returned to filer DIVIDEND INCOME Amount (\$) Name of person from whom amount is received Date 10/15/2024 **SOUTHWEST AIRLINES** \$1,375.92 Address of person from whom amount is received; City; State; Zip Code DALLAS, TX 75236 Purpose for which amount is received Check if political contribution returned to filer REFUND OF AIRFARE FOR POLITICAL MEETING