

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|                                                                                                     |                                                                                                                                                                                                                             |                                                             |                                   |                                                                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                               |                                                                                                                                                                                                                             | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00087985 | <b>2</b> Total pages filed:<br>38 |                                                                                                                                                                                 |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME                                                              | MS / MRS / MR                                                                                                                                                                                                               | FIRST                                                       | MI                                | <b>OFFICE USE ONLY</b>                                                                                                                                                          |
|                                                                                                     |                                                                                                                                                                                                                             | Jeffrey M.                                                  |                                   |                                                                                                                                                                                 |
|                                                                                                     | NICKNAME                                                                                                                                                                                                                    | LAST                                                        | SUFFIX                            | Date Received                                                                                                                                                                   |
|                                                                                                     | Jeff                                                                                                                                                                                                                        | Barry                                                       |                                   | <b>ELECTRONICALLY FILED</b>                                                                                                                                                     |
|                                                                                                     |                                                                                                                                                                                                                             |                                                             |                                   | 10/07/2024                                                                                                                                                                      |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE                                                                                                                                                                             |                                                             |                                   | Date Hand-delivered or Date Postmarked                                                                                                                                          |
|                                                                                                     | 4418 Broadway St.                                                                                                                                                                                                           |                                                             |                                   |                                                                                                                                                                                 |
|                                                                                                     | Pearland, TX 77581                                                                                                                                                                                                          |                                                             |                                   | Receipt #                                                                                                                                                                       |
|                                                                                                     |                                                                                                                                                                                                                             |                                                             |                                   | Amount                                                                                                                                                                          |
|                                                                                                     |                                                                                                                                                                                                                             |                                                             |                                   | Date Processed                                                                                                                                                                  |
|                                                                                                     |                                                                                                                                                                                                                             |                                                             |                                   | Date Imaged                                                                                                                                                                     |
| <b>5</b> CAMPAIGN TREASURER NAME                                                                    | MS / MRS / MR                                                                                                                                                                                                               | FIRST                                                       | MI                                |                                                                                                                                                                                 |
|                                                                                                     |                                                                                                                                                                                                                             | Julia C.                                                    |                                   |                                                                                                                                                                                 |
|                                                                                                     | NICKNAME                                                                                                                                                                                                                    | LAST                                                        | SUFFIX                            |                                                                                                                                                                                 |
|                                                                                                     |                                                                                                                                                                                                                             | Barry                                                       |                                   |                                                                                                                                                                                 |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE                                                                                                                                                     |                                                             |                                   |                                                                                                                                                                                 |
|                                                                                                     | 3503 Boxwood Gate Trail<br><br>Pearland, TX 77581                                                                                                                                                                           |                                                             |                                   |                                                                                                                                                                                 |
| <b>7</b> CAMPAIGN TREASURER PHONE                                                                   | AREA CODE                                                                                                                                                                                                                   | PHONE NUMBER                                                | EXTENSION                         |                                                                                                                                                                                 |
|                                                                                                     |                                                                                                                                                                                                                             | (713) 805-6493                                              |                                   |                                                                                                                                                                                 |
| <b>8</b> REPORT TYPE                                                                                | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |                                                             |                                   |                                                                                                                                                                                 |
|                                                                                                     | <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)                         |                                                             |                                   |                                                                                                                                                                                 |
| <b>9</b> PERIOD COVERED                                                                             | Month                                                                                                                                                                                                                       | Day                                                         | Year                              | Month                                                                                                                                                                           |
|                                                                                                     |                                                                                                                                                                                                                             | 07/01/2024                                                  |                                   | THROUGH                                                                                                                                                                         |
|                                                                                                     |                                                                                                                                                                                                                             |                                                             |                                   | 09/26/2024                                                                                                                                                                      |
| <b>10</b> ELECTION                                                                                  | ELECTION DATE                                                                                                                                                                                                               |                                                             |                                   | ELECTION TYPE                                                                                                                                                                   |
|                                                                                                     | Month                                                                                                                                                                                                                       | Day                                                         | Year                              | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input checked="" type="checkbox"/> General <input type="checkbox"/> Special |
|                                                                                                     |                                                                                                                                                                                                                             |                                                             | 11/05/2024                        |                                                                                                                                                                                 |
| <b>11</b> OFFICE                                                                                    | OFFICE HELD (if any)                                                                                                                                                                                                        |                                                             |                                   | <b>12</b> OFFICE SOUGHT (if known)                                                                                                                                              |
|                                                                                                     |                                                                                                                                                                                                                             |                                                             |                                   |                                                                                                                                                                                 |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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**13 C / OH NAME** Barry , Jeffrey M. **14 Filer ID** (Ethics Commission Filers)  
00087985

**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

|                                             |                                      |                                |
|---------------------------------------------|--------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> GENERAL | COMMITTEE TYPE                       | COMMITTEE NAME                 |
| <input type="checkbox"/> SPECIFIC           |                                      | Texas REALTORS PAC             |
|                                             | COMMITTEE ADDRESS                    | 1115 San Jacinto Blvd, Ste 200 |
|                                             |                                      | Austin, TX 78701               |
|                                             | COMMITTEE CAMPAIGN TREASURER NAME    | Cantu, Leslie                  |
|                                             | COMMITTEE CAMPAIGN TREASURER ADDRESS | P.O. Box 2246                  |
|                                             |                                      | Austin, TX 78768               |

|                               |                                                                                                                                       |    |           |
|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|----|-----------|
| <b>16 CONTRIBUTION TOTALS</b> | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00      |
|                               | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                                  | \$ | 81,989.82 |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES                                                                                            | \$ | 343.89    |
|                               | 4. TOTAL POLITICAL EXPENDITURES                                                                                                       | \$ | 39,120.10 |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD                                                | \$ | 49,800.04 |
| OUTSTANDING LOAN TOTALS       | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                                         | \$ | 12,500.00 |

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Jeffrey M. Barry  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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|                                                  |                                                                                                             |                                                           |
|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>18 FILER NAME</b><br>Barry , Jeffrey M.       |                                                                                                             | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00087985 |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |                                                                                                             | SUBTOTAL AMOUNT                                           |
| 1.                                               | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$ 74,969.82                                              |
| 2.                                               | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$ 7,020.00                                               |
| 3.                                               | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                                  | \$                                                        |
| 4.                                               | <input type="checkbox"/> SCHEDULE E: LOANS                                                                  | \$                                                        |
| 5.                                               | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$ 35,705.34                                              |
| 6.                                               | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                           | \$                                                        |
| 7.                                               | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                                                        |
| 8.                                               | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$                                                        |
| 9.                                               | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                  | \$ 3,414.76                                               |
| 10.                                              | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$                                                        |
| 11.                                              | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                                                        |
| 12.                                              | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                                                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                          |                                                                                                                                                                                                                |                                                          |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>         |                                                                                                                                                                                                                | <b>1</b> Total pages Schedule A1:<br>Sch: 1/21 Rpt: 4/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                |                                                                                                                                                                                                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985 |
| <b>4</b> Date<br>09/17/2024                                              | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Aguirre & Fields LP PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Sugar Land, TX 77479  | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)             |                                                                                                                                                                                                                | <b>9</b> Employer (See Instructions)                     |
| Date<br>08/26/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ali, Sharif<br><hr/> Contributor address; City; State; Zip Code<br><br>Friendswood, TX 77546                               | Amount of Contribution (\$)<br><br>\$5,000.00            |
| Principal occupation / Job title (See Instructions)<br>Gas Station Owner |                                                                                                                                                                                                                | Employer (See Instructions)<br>Self                      |
| Date<br>09/17/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Allen, Keith<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                                 | Amount of Contribution (\$)<br><br>\$150.00              |
| Principal occupation / Job title (See Instructions)                      |                                                                                                                                                                                                                | Employer (See Instructions)                              |
| Date<br>07/24/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Associated Builders & Contractors of Texas PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78767 | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)                      |                                                                                                                                                                                                                | Employer (See Instructions)                              |
| Date<br>09/24/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barcelo, Cecil<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                               | Amount of Contribution (\$)<br><br>\$1,041.02            |
| Principal occupation / Job title (See Instructions)                      |                                                                                                                                                                                                                | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                  |                                                          |
|------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                  | <b>1</b> Total pages Schedule A1:<br>Sch: 2/21 Rpt: 5/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985 |
| <b>4</b> Date<br>09/23/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barron, John<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581 | <b>7</b> Amount of Contribution (\$)<br><br>\$156.15     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                  | <b>9</b> Employer (See Instructions)                     |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beer Alliance of Texas PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701       | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                  | Employer (See Instructions)                              |
| Date<br>09/05/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bionat, Christian<br><hr/> Contributor address; City; State; Zip Code<br><br>League City, TX 77573           | Amount of Contribution (\$)<br><br>\$156.15              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                  | Employer (See Instructions)                              |
| Date<br>08/28/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Black, Jason<br><hr/> Contributor address; City; State; Zip Code<br><br>Manvel, TX 77511                     | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                  | Employer (See Instructions)                              |
| Date<br>08/21/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bourgeois, Keith<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77005                | Amount of Contribution (\$)<br><br>\$250.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                      |                                                            |
|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                      | <b>1</b> Total pages Schedule A1:<br>Sch: 3/21 Rpt: 6/38   |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>07/25/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bradley, Richard<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                      | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/09/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Branstetter, Craig<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77041                  | Amount of Contribution (\$)<br><br>\$1,561.52              |
| Principal occupation / Job title (See Instructions)<br>VP-Sales  |                                                                                                                                                                                                      | Employer (See Instructions)<br>American Fire Systems, Inc. |
| Date<br>09/09/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Branstetter, Craig<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77041                  | Amount of Contribution (\$)<br><br>\$1,561.52              |
| Principal occupation / Job title (See Instructions)<br>VP-Sales  |                                                                                                                                                                                                      | Employer (See Instructions)<br>American Fire Systems, Inc. |
| Date<br>09/24/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brown, Scott<br><hr/> Contributor address; City; State; Zip Code<br><br>Angleton, TX 77515                       | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                      | Employer (See Instructions)                                |
| Date<br>09/13/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Burridge, Jay<br><hr/> Contributor address; City; State; Zip Code<br><br>Lake Jackson, TX 77566                  | Amount of Contribution (\$)<br><br>\$150.00                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                      | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                            |                                                                                                                                                                                                  |                                                          |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>           |                                                                                                                                                                                                  | <b>1</b> Total pages Schedule A1:<br>Sch: 4/21 Rpt: 7/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                  |                                                                                                                                                                                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985 |
| <b>4</b> Date<br>08/27/2024                                                | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Byrom, Clint<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581 | <b>7</b> Amount of Contribution (\$)<br><br>\$182.18     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Contractor |                                                                                                                                                                                                  | <b>9</b> Employer (See Instructions)<br>Self Employed    |
| Date<br>08/27/2024                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Byrom, Clint<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                   | Amount of Contribution (\$)<br><br>\$182.18              |
| Principal occupation / Job title (See Instructions)<br>Contractor          |                                                                                                                                                                                                  | Employer (See Instructions)<br>Self Employed             |
| Date<br>08/07/2024                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Byrom, Clint<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                   | Amount of Contribution (\$)<br><br>\$338.33              |
| Principal occupation / Job title (See Instructions)<br>Contractor          |                                                                                                                                                                                                  | Employer (See Instructions)<br>Self Employed             |
| Date<br>09/15/2024                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cade, Layni<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                    | Amount of Contribution (\$)<br><br>\$156.15              |
| Principal occupation / Job title (See Instructions)                        |                                                                                                                                                                                                  | Employer (See Instructions)                              |
| Date<br>09/19/2024                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Capital Leadership Fund<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701          | Amount of Contribution (\$)<br><br>\$250.00              |
| Principal occupation / Job title (See Instructions)                        |                                                                                                                                                                                                  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                    |                                                          |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                    | <b>1</b> Total pages Schedule A1:<br>Sch: 5/21 Rpt: 8/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                    | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985 |
| <b>4</b> Date<br>09/16/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cavazos, Sandy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584 | <b>7</b> Amount of Contribution (\$)<br><br>\$156.15     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                    | <b>9</b> Employer (See Instructions)                     |
| Date<br>08/13/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cavazos, Sandy<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                   | Amount of Contribution (\$)<br><br>\$26.03               |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                    | Employer (See Instructions)                              |
| Date<br>08/09/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cherry, Leonard<br><hr/> Contributor address; City; State; Zip Code<br><br>Friendswood, TX 77546               | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                    | Employer (See Instructions)                              |
| Date<br>09/17/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cobb Fendley PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77041                  | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                    | Employer (See Instructions)                              |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Congress Avenue Partners LLC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701       | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                    | Employer (See Instructions)                              |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                          |                                                          |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                          | <b>1</b> Total pages Schedule A1:<br>Sch: 6/21 Rpt: 9/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                          | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985 |
| <b>4</b> Date<br>09/19/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Congress Ventures, LLC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703 | <b>7</b> Amount of Contribution (\$)<br><br>\$750.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                          | <b>9</b> Employer (See Instructions)                     |
| Date<br>09/17/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Consulting Engineers PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                 | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                              |
| Date<br>09/25/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Daniel, Matt<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77079                            | Amount of Contribution (\$)<br><br>\$150.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                              |
| Date<br>08/27/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Davis, Dan<br><hr/> Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578                               | Amount of Contribution (\$)<br><br>\$150.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                              |
| Date<br>09/24/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dietrich, Drew<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                         | Amount of Contribution (\$)<br><br>\$156.15              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                                |                                                                                                                                                                                                            |                                                           |
|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>               |                                                                                                                                                                                                            | <b>1</b> Total pages Schedule A1:<br>Sch: 7/21 Rpt: 10/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                      |                                                                                                                                                                                                            | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985  |
| <b>4</b> Date<br>08/20/2024                                                    | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Droege, Jody<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511              | <b>7</b> Amount of Contribution (\$)<br><br>\$104.10      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Vice President |                                                                                                                                                                                                            | <b>9</b> Employer (See Instructions)<br>TDEC Inc          |
| Date<br>08/20/2024                                                             | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Droege, Jody<br><hr/> Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511                                | Amount of Contribution (\$)<br><br>\$156.15               |
| Principal occupation / Job title (See Instructions)<br>Vice President          |                                                                                                                                                                                                            | Employer (See Instructions)<br>TDEC Inc                   |
| Date<br>08/20/2024                                                             | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Droege, Jody<br><hr/> Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511                                | Amount of Contribution (\$)<br><br>\$1,041.02             |
| Principal occupation / Job title (See Instructions)<br>Vice President          |                                                                                                                                                                                                            | Employer (See Instructions)<br>TDEC Inc                   |
| Date<br>09/17/2024                                                             | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dugas, Chad<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                              | Amount of Contribution (\$)<br><br>\$1,000.00             |
| Principal occupation / Job title (See Instructions)                            |                                                                                                                                                                                                            | Employer (See Instructions)                               |
| Date<br>08/21/2024                                                             | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>EYE PAC of the Texas Ophthalmological Assn<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | Amount of Contribution (\$)<br><br>\$1,000.00             |
| Principal occupation / Job title (See Instructions)                            |                                                                                                                                                                                                            | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                | <b>1</b> Total pages Schedule A1:<br>Sch: 8/21 Rpt: 11/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985  |
| <b>4</b> Date<br>09/19/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ellmer, Mindy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Auatn, TX 78701 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                | <b>9</b> Employer (See Instructions)                      |
| Date<br>08/22/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fernandez, Rick<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581              | Amount of Contribution (\$)<br><br>\$1,500.00             |
| Principal occupation / Job title (See Instructions)<br>Owner     |                                                                                                                                                                                                | Employer (See Instructions)<br>Cop Stop                   |
| Date<br>08/21/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Garza, Gabriel<br><hr/> Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578                 | Amount of Contribution (\$)<br><br>\$156.15               |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                | Employer (See Instructions)                               |
| Date<br>09/05/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Giesecke, Rob<br><hr/> Contributor address; City; State; Zip Code<br><br>Damon, TX 77430                   | Amount of Contribution (\$)<br><br>\$150.00               |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                | Employer (See Instructions)                               |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gonzales, Larry<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681            | Amount of Contribution (\$)<br><br>\$500.00               |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>   |                                                                                                                                                                                                                           | <b>1</b> Total pages Schedule A1:<br>Sch: 9/21 Rpt: 12/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                          |                                                                                                                                                                                                                           | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985  |
| <b>4</b> Date<br>09/25/2024                                        | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Greater Houston Builders Assn HOME-PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77064 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,500.00    |
| <b>8</b> Principal occupation / Job title (See Instructions)       |                                                                                                                                                                                                                           | <b>9</b> Employer (See Instructions)                      |
| Date<br>09/26/2024                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Green, Shayne<br><hr/> Contributor address; City; State; Zip Code<br><br>Lake Jackson, TX 77566                                       | Amount of Contribution (\$)<br><br>\$52.05                |
| Principal occupation / Job title (See Instructions)                |                                                                                                                                                                                                                           | Employer (See Instructions)                               |
| Date<br>09/03/2024                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Grohman, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                                           | Amount of Contribution (\$)<br><br>\$250.00               |
| Principal occupation / Job title (See Instructions)<br>Real Estate |                                                                                                                                                                                                                           | Employer (See Instructions)<br>Self                       |
| Date<br>09/23/2024                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Grohman, Tammy<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                                          | Amount of Contribution (\$)<br><br>\$150.00               |
| Principal occupation / Job title (See Instructions)                |                                                                                                                                                                                                                           | Employer (See Instructions)                               |
| Date<br>09/23/2024                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Grohman, Tammy<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                                          | Amount of Contribution (\$)<br><br>\$104.10               |
| Principal occupation / Job title (See Instructions)                |                                                                                                                                                                                                                           | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                                          | <b>1</b> Total pages Schedule A1:<br>Sch: 10/21 Rpt: 13/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                                          | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>09/19/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HOMEPAC of the Texas Assn. of Builders<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                                          | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/17/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hill, Amy<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                                              | Amount of Contribution (\$)<br><br>\$52.05                 |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                          | Employer (See Instructions)                                |
| Date<br>07/24/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HillCo PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                                               | Amount of Contribution (\$)<br><br>\$5,000.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                          | Employer (See Instructions)                                |
| Date<br>09/11/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hollis, Alan<br><hr/> Contributor address; City; State; Zip Code<br><br>Cypress, TX 77433                                            | Amount of Contribution (\$)<br><br>\$1,041.02              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                          | Employer (See Instructions)                                |
| Date<br>08/27/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hoogeboom, Andrew<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                                      | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                          | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                               | <b>1</b> Total pages Schedule A1:<br>Sch: 11/21 Rpt: 14/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                               | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>09/25/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Houston Apartment Assn PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77041 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,500.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                               | <b>9</b> Employer (See Instructions)                       |
| Date<br>07/02/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Houston Region Business Coalition<br><hr/> Contributor address; City; State; Zip Code<br><br>Bellaire, TX 77401           | Amount of Contribution (\$)<br><br>\$1,500.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                               | Employer (See Instructions)                                |
| Date<br>09/17/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Isenberg, Derrell<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                           | Amount of Contribution (\$)<br><br>\$182.18                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                               | Employer (See Instructions)                                |
| Date<br>09/24/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kelley, Kenjo<br><hr/> Contributor address; City; State; Zip Code<br><br>Brazoria, TX 77422                               | Amount of Contribution (\$)<br><br>\$1,041.02              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                               | Employer (See Instructions)                                |
| Date<br>09/24/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Korth, Joy<br><hr/> Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511                                     | Amount of Contribution (\$)<br><br>\$1,041.02              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                               | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                       |                                                                                                                                                                                                 |                                                                 |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>      |                                                                                                                                                                                                 | <b>1</b> Total pages Schedule A1:<br>Sch: 12/21 Rpt: 15/38      |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                             |                                                                                                                                                                                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985        |
| <b>4</b> Date<br>09/06/2024                                           | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Koza, Jerry<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Owner |                                                                                                                                                                                                 | <b>9</b> Employer (See Instructions)<br>Pro-Fax                 |
| Date<br>07/24/2024                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leal, Roland<br><hr/> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78628                | Amount of Contribution (\$)<br><br>\$1,000.00                   |
| Principal occupation / Job title (See Instructions)                   |                                                                                                                                                                                                 | Employer (See Instructions)                                     |
| Date<br>09/11/2024                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Matlock, Brad<br><hr/> Contributor address; City; State; Zip Code<br><br>League City, TX 77573-1842         | Amount of Contribution (\$)<br><br>\$200.00                     |
| Principal occupation / Job title (See Instructions)                   |                                                                                                                                                                                                 | Employer (See Instructions)                                     |
| Date<br>09/19/2024                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McElray, James<br><hr/> Contributor address; City; State; Zip Code<br><br>Cypress, TX 77433                 | Amount of Contribution (\$)<br><br>\$1,041.02                   |
| Principal occupation / Job title (See Instructions)                   |                                                                                                                                                                                                 | Employer (See Instructions)                                     |
| Date<br>09/04/2024                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mike, Schmidt<br><hr/> Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578                   | Amount of Contribution (\$)<br><br>\$1,000.00                   |
| Principal occupation / Job title (See Instructions)<br>Engineer       |                                                                                                                                                                                                 | Employer (See Instructions)<br>Blacksmith Construction Services |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>         |                                                                                                                                                                                                 | <b>1</b> Total pages Schedule A1:<br>Sch: 13/21 Rpt: 16/38               |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                |                                                                                                                                                                                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                 |
| <b>4</b> Date<br>09/04/2024                                              | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mike, Schmidt<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578 | <b>7</b> Amount of Contribution (\$)<br><br>\$150.00                     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Engineer |                                                                                                                                                                                                 | <b>9</b> Employer (See Instructions)<br>Blacksmith Construction Services |
| Date<br>07/31/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Moak Casey PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                  | Amount of Contribution (\$)<br><br>\$500.00                              |
| Principal occupation / Job title (See Instructions)                      |                                                                                                                                                                                                 | Employer (See Instructions)                                              |
| Date<br>08/18/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mona, Chavarria<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77588               | Amount of Contribution (\$)<br><br>\$1,561.52                            |
| Principal occupation / Job title (See Instructions)<br>Owner             |                                                                                                                                                                                                 | Employer (See Instructions)<br>AA Cleaning Services                      |
| Date<br>08/24/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Munoz, JJ<br><hr/> Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578                       | Amount of Contribution (\$)<br><br>\$156.15                              |
| Principal occupation / Job title (See Instructions)                      |                                                                                                                                                                                                 | Employer (See Instructions)                                              |
| Date<br>09/13/2024                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Murray, Shannan<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584               | Amount of Contribution (\$)<br><br>\$100.00                              |
| Principal occupation / Job title (See Instructions)                      |                                                                                                                                                                                                 | Employer (See Instructions)                                              |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                                                                             | <b>1</b> Total pages Schedule A1:<br>Sch: 14/21 Rpt: 17/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                                                                             | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>09/19/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>National Association of Benefit and Insurance Professionals - Texas PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Cranford, NJ 07016 | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                                                                             | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/17/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>O'Day, Mike<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                                                                               | Amount of Contribution (\$)<br><br>\$1,041.02              |
| Principal occupation / Job title (See Instructions)<br>Retired   |                                                                                                                                                                                                                                                             | Employer (See Instructions)<br>Retired                     |
| Date<br>09/13/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>O'Day, Patrick<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                                                                            | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                                                             | Employer (See Instructions)                                |
| Date<br>09/06/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Palmer, Dinah<br><hr/> Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511                                                                                | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                                                             | Employer (See Instructions)                                |
| Date<br>09/17/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Pape-Dawson Engineers PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78213                                                              | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                                                             | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                                   | <b>1</b> Total pages Schedule A1:<br>Sch: 15/21 Rpt: 18/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                                   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>08/11/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Pearland Area Republican Club<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77588 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                                   | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/23/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Perdue, Brandon, Fielder, Collins & Mott, LLP<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77008    | Amount of Contribution (\$)<br><br>\$1,100.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                   | Employer (See Instructions)                                |
| Date<br>09/26/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ramm, Rebecca<br><hr/> Contributor address; City; State; Zip Code<br><br>Taylor Lake Village, TX 77586                        | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                   | Employer (See Instructions)                                |
| Date<br>09/16/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Redman, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578                                   | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Owner     |                                                                                                                                                                                                                   | Employer (See Instructions)<br>Redman Communications       |
| Date<br>09/24/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rhame, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                                  | Amount of Contribution (\$)<br><br>\$312.30                |
| Principal occupation / Job title (See Instructions)<br>Retired   |                                                                                                                                                                                                                   | Employer (See Instructions)<br>Retired                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                     |                                                                                                                                                                                                            |                                                            |
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| <b>The Instruction Guide explains how to complete this form.</b>    |                                                                                                                                                                                                            | <b>1</b> Total pages Schedule A1:<br>Sch: 16/21 Rpt: 19/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                           |                                                                                                                                                                                                            | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>09/19/2024                                         | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Riceland Consulting, LLC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)        |                                                                                                                                                                                                            | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/23/2024                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Richard, Dawn<br><hr/> Contributor address; City; State; Zip Code<br><br>Kotzebue, AK 99752                            | Amount of Contribution (\$)<br><br>\$150.00                |
| Principal occupation / Job title (See Instructions)                 |                                                                                                                                                                                                            | Employer (See Instructions)                                |
| Date<br>09/25/2024                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Roberts, Davis<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78738                             | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)                 |                                                                                                                                                                                                            | Employer (See Instructions)                                |
| Date<br>08/22/2024                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sass, Walt<br><hr/> Contributor address; City; State; Zip Code<br><br>Katy, TX 77450                                   | Amount of Contribution (\$)<br><br>\$150.00                |
| Principal occupation / Job title (See Instructions)                 |                                                                                                                                                                                                            | Employer (See Instructions)                                |
| Date<br>08/27/2024                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stacy, Adams<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                             | Amount of Contribution (\$)<br><br>\$750.00                |
| Principal occupation / Job title (See Instructions)<br>Commissioner |                                                                                                                                                                                                            | Employer (See Instructions)<br>Brazoria County             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                              |                                                                                                                                                                                                  |                                                            |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>             |                                                                                                                                                                                                  | <b>1</b> Total pages Schedule A1:<br>Sch: 17/21 Rpt: 20/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                    |                                                                                                                                                                                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>08/22/2024                                                  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stacy, Adams<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581 | <b>7</b> Amount of Contribution (\$)<br><br>\$750.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Commissioner |                                                                                                                                                                                                  | <b>9</b> Employer (See Instructions)<br>Brazoria County    |
| Date<br>09/11/2024                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Starkey, James<br><hr/> Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511                    | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)                          |                                                                                                                                                                                                  | Employer (See Instructions)                                |
| Date<br>09/25/2024                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stavinoha, Marianne<br><hr/> Contributor address; City; State; Zip Code<br><br>Liverpool, TX 77577           | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)                          |                                                                                                                                                                                                  | Employer (See Instructions)                                |
| Date<br>09/09/2024                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stevens, Buck<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77588                  | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)                          |                                                                                                                                                                                                  | Employer (See Instructions)                                |
| Date<br>09/09/2024                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Taylor, Terrell<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77027                 | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)                          |                                                                                                                                                                                                  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                                 |                                                            |
|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                                 | <b>1</b> Total pages Schedule A1:<br>Sch: 18/21 Rpt: 21/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>09/19/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texans for Lawsuit Reform PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | <b>7</b> Amount of Contribution (\$)<br><br>\$10,000.00    |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                                 | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Alliance for Life PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78754                     | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                 | Employer (See Instructions)                                |
| Date<br>09/25/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Apartment Assn. PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                       | Amount of Contribution (\$)<br><br>\$1,500.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                 | Employer (See Instructions)                                |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Association of Health Plans PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701           | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                 | Employer (See Instructions)                                |
| Date<br>07/24/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Association of Nurse Anesthetists PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701     | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                 | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                             |                                                                                                                                 |                                                            |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>            |                                                                                                                                 | <b>1</b> Total pages Schedule A1:<br>Sch: 19/21 Rpt: 22/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                   |                                                                                                                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>08/13/2024                                                 | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Automobile Dealers Assn. PAC | <b>7</b> Amount of Contribution (\$)<br>\$1,000.00         |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 |                                                                                                                                 |                                                            |
| <b>8</b> Principal occupation / Job title (See Instructions)                |                                                                                                                                 | <b>9</b> Employer (See Instructions)                       |
| Date<br>07/01/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Dental Assn PAC                       | Amount of Contribution (\$)<br>\$500.00                    |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78704          |                                                                                                                                 |                                                            |
| Principal occupation / Job title (See Instructions)                         |                                                                                                                                 | Employer (See Instructions)                                |
| Date<br>09/19/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Energy PAC                            | Amount of Contribution (\$)<br>\$500.00                    |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78701          |                                                                                                                                 |                                                            |
| Principal occupation / Job title (See Instructions)                         |                                                                                                                                 | Employer (See Instructions)                                |
| Date<br>09/17/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Thurber, William                            | Amount of Contribution (\$)<br>\$500.00                    |
| Contributor address; City; State; Zip Code<br><br>Bellarie, TX 77401        |                                                                                                                                 |                                                            |
| Principal occupation / Job title (See Instructions)                         |                                                                                                                                 | Employer (See Instructions)                                |
| Date<br>09/13/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vasut, Cody                                 | Amount of Contribution (\$)<br>\$26.03                     |
| Contributor address; City; State; Zip Code<br><br>Angleton, TX 77516        |                                                                                                                                 |                                                            |
| Principal occupation / Job title (See Instructions)                         |                                                                                                                                 | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                          |                                                            |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                          | <b>1</b> Total pages Schedule A1:<br>Sch: 20/21 Rpt: 23/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                          | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>09/13/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vasut, Cody<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Angleton, TX 77516          | <b>7</b> Amount of Contribution (\$)<br><br>\$156.15       |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                          | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/09/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vaughan, Eugene<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                        | Amount of Contribution (\$)<br><br>\$156.15                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                                |
| Date<br>08/26/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wagner, Bill<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                           | Amount of Contribution (\$)<br><br>\$1,041.02              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                                |
| Date<br>09/25/2024                                               | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00502229</u> )<br>Weber For Congress<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78734 | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                                |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wholesale Beer Distributors Of Texas PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                          | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                    |                                                            |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                    | <b>1</b> Total pages Schedule A1:<br>Sch: 21/21 Rpt: 24/38 |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                        |                                                                                                                                                                                                    | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985   |
| <b>4</b> Date<br>08/16/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>William, Killian<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75201 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,041.02     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                    | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Williams, Mark<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                     | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                    | Employer (See Instructions)                                |
| Date<br>09/19/2024                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Williams, Thomas<br><hr/> Contributor address; City; State; Zip Code<br><br>Navasota, TX 77868                 | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                    | Employer (See Instructions)                                |



# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|                                                                                      |                                                                                                    |                                                                 |                                                                                  |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                     |                                                                                                    | 1 Total pages Schedule A2:<br>Sch: 1/6 Rpt: 25/38               |                                                                                  |
| 2 FILER NAME<br>Barry , Jeffrey M.                                                   |                                                                                                    | 3 Filer ID (Ethics Commission Filers)<br>00087985               |                                                                                  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                                |                                                                                                    | \$                                                              |                                                                                  |
| 5 Date<br>09/22/2024                                                                 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bradshaw, Amy | 8 Amount of contribution (\$)<br>\$120.00                       | 9 In-kind contribution description<br>Food for Campaign Event                    |
|                                                                                      | 7 Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                             |                                                                 |                                                                                  |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)            |                                                                                                    | 11 Employer (FOR NON-JUDICIAL) (See instructions)               |                                                                                  |
| 12 Contributor's principal occupation (FOR JUDICIAL)                                 |                                                                                                    | 13 Contributor's job title (FOR JUDICIAL) (See instructions)    |                                                                                  |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                    |                                                                                                    | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)     |                                                                                  |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)          |                                                                                                    |                                                                 |                                                                                  |
| Date<br>09/10/2024                                                                   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brown, Heather  | Amount of contribution (\$)<br>\$225.00                         | In-kind contribution description<br>Donation Item for Campaign Fundraising Event |
|                                                                                      | Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                               |                                                                 |                                                                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)               |                                                                                                    | Employer (FOR NON-JUDICIAL) (See instructions)                  |                                                                                  |
| Contributor's principal occupation (FOR JUDICIAL)                                    |                                                                                                    | Contributor's job title (FOR JUDICIAL) (See instructions)       |                                                                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                                       |                                                                                                    | Law firm of contributor's spouse (if any) (FOR JUDICIAL)        |                                                                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)             |                                                                                                    |                                                                 |                                                                                  |
| Date<br>08/01/2024                                                                   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Byrom, Clint    | Amount of contribution (\$)<br>\$200.00                         | In-kind contribution description<br>Donation Item for Campaign Fundraising Event |
|                                                                                      | Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                               |                                                                 |                                                                                  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Contractor |                                                                                                    | Employer (FOR NON-JUDICIAL) (See instructions)<br>Self Employed |                                                                                  |
| Contributor's principal occupation (FOR JUDICIAL)                                    |                                                                                                    | Contributor's job title (FOR JUDICIAL) (See instructions)       |                                                                                  |
| Contributor's employer/law firm (FOR JUDICIAL)                                       |                                                                                                    | Law firm of contributor's spouse (if any) (FOR JUDICIAL)        |                                                                                  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)             |                                                                                                    |                                                                 |                                                                                  |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|                                                                                                  |                                                                                                    |                                                                      |                                                                                    |
|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                                 |                                                                                                    | 1 Total pages Schedule A2:<br>Sch: 2/6 Rpt: 26/38                    |                                                                                    |
| 2 FILER NAME<br>Barry , Jeffrey M.                                                               |                                                                                                    | 3 Filer ID (Ethics Commission Filers)<br>00087985                    |                                                                                    |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                                            |                                                                                                    | \$                                                                   |                                                                                    |
| 5 Date<br>09/22/2024                                                                             | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cade, Ryan    | 8 Amount of contribution (\$)<br>\$150.00                            | 9 In-kind contribution description<br>Donation Item for Campaign Fundraising Event |
|                                                                                                  | 7 Contributor address; City; State; Zip Code<br><br>Angleton, TX 77516                             |                                                                      |                                                                                    |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>County Commissioner |                                                                                                    | 11 Employer (FOR NON-JUDICIAL) (See instructions)<br>Brazoria County |                                                                                    |
| 12 Contributor's principal occupation (FOR JUDICIAL)                                             |                                                                                                    | 13 Contributor's job title (FOR JUDICIAL) (See instructions)         |                                                                                    |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                                |                                                                                                    | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)          |                                                                                    |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                      |                                                                                                    |                                                                      |                                                                                    |
| Date<br>09/22/2024                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Chavarria, Mona | Amount of contribution (\$)<br>\$350.00                              | In-kind contribution description<br>Donation Item for Campaign Fundraising Event   |
|                                                                                                  | Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                               |                                                                      |                                                                                    |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Owner                  |                                                                                                    | Employer (FOR NON-JUDICIAL) (See instructions)<br>AA Cleaning        |                                                                                    |
| Contributor's principal occupation (FOR JUDICIAL)                                                |                                                                                                    | Contributor's job title (FOR JUDICIAL) (See instructions)            |                                                                                    |
| Contributor's employer/law firm (FOR JUDICIAL)                                                   |                                                                                                    | Law firm of contributor's spouse (if any) (FOR JUDICIAL)             |                                                                                    |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                         |                                                                                                    |                                                                      |                                                                                    |
| Date<br>09/22/2024                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, Dan      | Amount of contribution (\$)<br>\$150.00                              | In-kind contribution description<br>Donation Item for Campaign Fundraising Event   |
|                                                                                                  | Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578                                 |                                                                      |                                                                                    |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)                           |                                                                                                    | Employer (FOR NON-JUDICIAL) (See instructions)                       |                                                                                    |
| Contributor's principal occupation (FOR JUDICIAL)                                                |                                                                                                    | Contributor's job title (FOR JUDICIAL) (See instructions)            |                                                                                    |
| Contributor's employer/law firm (FOR JUDICIAL)                                                   |                                                                                                    | Law firm of contributor's spouse (if any) (FOR JUDICIAL)             |                                                                                    |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                         |                                                                                                    |                                                                      |                                                                                    |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|                                                                             |                                                                                                     |                                                                                 |                                                                                    |
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| <b>The Instruction Guide explains how to complete this form.</b>            |                                                                                                     | 1 Total pages Schedule A2:<br>Sch: 3/6 Rpt: 27/38                               |                                                                                    |
| 2 FILER NAME<br>Barry , Jeffrey M.                                          |                                                                                                     | 3 Filer ID (Ethics Commission Filers)<br>00087985                               |                                                                                    |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |                                                                                                     | \$                                                                              |                                                                                    |
| 5 Date<br>09/11/2024                                                        | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Grohman, Tammy | 8 Amount of contribution (\$)<br>\$225.00                                       | 9 In-kind contribution description<br>Donation Item for Campaign Fundraising Event |
|                                                                             | 7 Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                              | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                    |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |                                                                                                     | 11 Employer (FOR NON-JUDICIAL) (See instructions)                               |                                                                                    |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                                     | 13 Contributor's job title (FOR JUDICIAL) (See instructions)                    |                                                                                    |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                                     | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                                                    |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                                     |                                                                                 |                                                                                    |
| Date<br>09/22/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hehn, Lorraine   | Amount of contribution (\$)<br>\$400.00                                         | In-kind contribution description<br>Donation Item for Campaign Fundraising Event   |
|                                                                             | Contributor address; City; State; Zip Code<br><br>Manvel, TX 77578                                  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                    |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |                                                                                                     | Employer (FOR NON-JUDICIAL) (See instructions)                                  |                                                                                    |
| Contributor's principal occupation (FOR JUDICIAL)                           |                                                                                                     | Contributor's job title (FOR JUDICIAL) (See instructions)                       |                                                                                    |
| Contributor's employer/law firm (FOR JUDICIAL)                              |                                                                                                     | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                                                    |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |                                                                                                     |                                                                                 |                                                                                    |
| Date<br>09/22/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hill, Amy        | Amount of contribution (\$)<br>\$700.00                                         | In-kind contribution description<br>Food for Campaign Event                        |
|                                                                             | Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                                | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                    |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |                                                                                                     | Employer (FOR NON-JUDICIAL) (See instructions)                                  |                                                                                    |
| Contributor's principal occupation (FOR JUDICIAL)                           |                                                                                                     | Contributor's job title (FOR JUDICIAL) (See instructions)                       |                                                                                    |
| Contributor's employer/law firm (FOR JUDICIAL)                              |                                                                                                     | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                                                    |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |                                                                                                     |                                                                                 |                                                                                    |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|                                                                             |                                                                                                    |                                                                                 |                                                                                    |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>            |                                                                                                    | 1 Total pages Schedule A2:<br>Sch: 4/6 Rpt: 28/38                               |                                                                                    |
| 2 FILER NAME<br>Barry , Jeffrey M.                                          |                                                                                                    | 3 Filer ID (Ethics Commission Filers)<br>00087985                               |                                                                                    |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |                                                                                                    | \$                                                                              |                                                                                    |
| 5 Date<br>09/22/2024                                                        | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hoffman, Lela | 8 Amount of contribution (\$)<br>\$75.00                                        | 9 In-kind contribution description<br>Donation Item for Campaign Fundraising Event |
|                                                                             | 7 Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511                                | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                    |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |                                                                                                    | 11 Employer (FOR NON-JUDICIAL) (See instructions)                               |                                                                                    |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                                    | 13 Contributor's job title (FOR JUDICIAL) (See instructions)                    |                                                                                    |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                                    | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |                                                                                    |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                                    |                                                                                 |                                                                                    |
| Date<br>09/22/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Knappe, Ryan    | Amount of contribution (\$)<br>\$100.00                                         | In-kind contribution description<br>Food for Campaign Event                        |
|                                                                             | Contributor address; City; State; Zip Code<br><br>Alvin, TX 77511                                  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                    |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |                                                                                                    | Employer (FOR NON-JUDICIAL) (See instructions)                                  |                                                                                    |
| Contributor's principal occupation (FOR JUDICIAL)                           |                                                                                                    | Contributor's job title (FOR JUDICIAL) (See instructions)                       |                                                                                    |
| Contributor's employer/law firm (FOR JUDICIAL)                              |                                                                                                    | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                                                    |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |                                                                                                    |                                                                                 |                                                                                    |
| Date<br>08/01/2024                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pearson, Gary   | Amount of contribution (\$)<br>\$250.00                                         | In-kind contribution description<br>Donation Items for Campaign Fundraising Event  |
|                                                                             | Contributor address; City; State; Zip Code<br><br>Houston, TX 77027                                | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                    |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |                                                                                                    | Employer (FOR NON-JUDICIAL) (See instructions)                                  |                                                                                    |
| Contributor's principal occupation (FOR JUDICIAL)                           |                                                                                                    | Contributor's job title (FOR JUDICIAL) (See instructions)                       |                                                                                    |
| Contributor's employer/law firm (FOR JUDICIAL)                              |                                                                                                    | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                                                                    |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |                                                                                                    |                                                                                 |                                                                                    |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|                                                                                    |                                                                                                            |                                                                     |                                                                                          |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                   |                                                                                                            | <b>1</b> Total pages Schedule A2:<br>Sch: 5/6 Rpt: 29/38            |                                                                                          |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                          |                                                                                                            | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985            |                                                                                          |
| <b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |                                                                                                            | \$                                                                  |                                                                                          |
| <b>5</b> Date<br>09/22/2024                                                        | <b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sandin, Teresa | <b>8</b> Amount of contribution (\$)<br>\$500.00                    | <b>9</b> In-kind contribution description<br>Supplies for Campaign Event                 |
|                                                                                    | <b>7</b> Contributor address; City; State; Zip Code<br><br>Lake Jackson, TX 77566                          |                                                                     |                                                                                          |
| <b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |                                                                                                            | <b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)            |                                                                                          |
| <b>12</b> Contributor's principal occupation (FOR JUDICIAL)                        |                                                                                                            | <b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions) |                                                                                          |
| <b>14</b> Contributor's employer/law firm (FOR JUDICIAL)                           |                                                                                                            | <b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)  |                                                                                          |
| <b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |                                                                                                            |                                                                     |                                                                                          |
| <b>Date</b><br>09/10/2024                                                          | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sheffield, Lisa  | <b>Amount of contribution (\$)</b><br>\$375.00                      | <b>In-kind contribution description</b><br>Donation Items for Campaign Fundraising Event |
|                                                                                    | <b>Contributor address; City; State; Zip Code</b><br><br>Pearland, TX 77581                                |                                                                     |                                                                                          |
| <b>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</b>      |                                                                                                            | <b>Employer (FOR NON-JUDICIAL) (See instructions)</b>               |                                                                                          |
| <b>Contributor's principal occupation (FOR JUDICIAL)</b>                           |                                                                                                            | <b>Contributor's job title (FOR JUDICIAL) (See instructions)</b>    |                                                                                          |
| <b>Contributor's employer/law firm (FOR JUDICIAL)</b>                              |                                                                                                            | <b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>     |                                                                                          |
| <b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>    |                                                                                                            |                                                                     |                                                                                          |
| <b>Date</b><br>09/22/2024                                                          | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stickler, Nancy  | <b>Amount of contribution (\$)</b><br>\$650.00                      | <b>In-kind contribution description</b><br>Donation Items for Campaign Fundraising Event |
|                                                                                    | <b>Contributor address; City; State; Zip Code</b><br><br>Alvin, TX 77511                                   |                                                                     |                                                                                          |
| <b>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</b>      |                                                                                                            | <b>Employer (FOR NON-JUDICIAL) (See instructions)</b>               |                                                                                          |
| <b>Contributor's principal occupation (FOR JUDICIAL)</b>                           |                                                                                                            | <b>Contributor's job title (FOR JUDICIAL) (See instructions)</b>    |                                                                                          |
| <b>Contributor's employer/law firm (FOR JUDICIAL)</b>                              |                                                                                                            | <b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>     |                                                                                          |
| <b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>    |                                                                                                            |                                                                     |                                                                                          |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|                                                                                              |                                                                                                               |                                                                                 |                                                                                          |
|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                             |                                                                                                               | <b>1</b> Total pages Schedule A2:<br>Sch: 6/6 Rpt: 30/38                        |                                                                                          |
| <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                                    |                                                                                                               | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                        |                                                                                          |
| <b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                                 |                                                                                                               | <b>\$</b>                                                                       |                                                                                          |
| <b>5</b> Date<br>09/22/2024                                                                  | <b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Waguespack, Julie | <b>8</b> Amount of contribution (\$)<br>\$50.00                                 | <b>9</b> In-kind contribution description<br>Food for Campaign Event                     |
|                                                                                              | <b>7</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                                 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                          |
| <b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)             |                                                                                                               | <b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)                        |                                                                                          |
| <b>12</b> Contributor's principal occupation (FOR JUDICIAL)                                  |                                                                                                               | <b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)             |                                                                                          |
| <b>14</b> Contributor's employer/law firm (FOR JUDICIAL)                                     |                                                                                                               | <b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)              |                                                                                          |
| <b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)           |                                                                                                               |                                                                                 |                                                                                          |
| <b>Date</b><br>09/22/2024                                                                    | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>van Sant, Jon       | <b>Amount of contribution (\$)</b><br>\$2,500.00                                | <b>In-kind contribution description</b><br>Donation Items for Campaign Fundraising Event |
|                                                                                              | <b>Contributor address; City; State; Zip Code</b><br><br>Pearland, TX 77584                                   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                                                                          |
| <b>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</b><br>Landscaping |                                                                                                               | <b>Employer (FOR NON-JUDICIAL) (See instructions)</b><br>Self                   |                                                                                          |
| <b>Contributor's principal occupation (FOR JUDICIAL)</b>                                     |                                                                                                               | <b>Contributor's job title (FOR JUDICIAL) (See instructions)</b>                |                                                                                          |
| <b>Contributor's employer/law firm (FOR JUDICIAL)</b>                                        |                                                                                                               | <b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>                 |                                                                                          |
| <b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>              |                                                                                                               |                                                                                 |                                                                                          |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

|                                                              |                                                                                                          |                                                                                                                                                                                                                        |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/4 Rpt: 31/38     | <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                                                                                                                                                               |
| <b>4</b> Date<br>08/23/2024                                  | <b>5</b> Payee name<br>Alvin Sun Advertiser                                                              |                                                                                                                                                                                                                        |
| <b>6</b> Amount (\$)<br>\$350.00                             | <b>7</b> Payee address; City; State; Zip Code<br>570 Dula St<br><br>Alvin, TX 77511                      |                                                                                                                                                                                                                        |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Advertising Expense |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                              |
| Date<br>09/26/2024                                           | Payee name<br>Alvin Sun Advertiser                                                                       |                                                                                                                                                                                                                        |
| Amount (\$)<br>\$96.00                                       | Payee address; City; State; Zip Code<br>570 Dula St<br><br>Alvin, TX 77511                               |                                                                                                                                                                                                                        |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Advertising Expense |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                              |
| Date<br>09/09/2024                                           | Payee name<br>Ditta, Brittany                                                                            |                                                                                                                                                                                                                        |
| Amount (\$)<br>\$1,000.00                                    | Payee address; City; State; Zip Code<br>6019 Vineyard Bend Dr.<br><br>Pearland, TX 77581                 |                                                                                                                                                                                                                        |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Contract Labor      |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                              |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

|                                                              |                                                                                                |                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/4 Rpt: 32/38     | <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                                                                                                                                                                                                                     |
| <b>4</b> Date<br>09/09/2024                                  | <b>5</b> Payee name<br>Murphy Nasica                                                           |                                                                                                                                                                                                                                                                              |
| <b>6</b> Amount (\$)<br>\$306.81                             | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1648<br><br>Austin, TX 78767           |                                                                                                                                                                                                                                                                              |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Design and Production of Campaign Materials                                        |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                                                                                    |
| Date<br>08/19/2024                                           | Payee name<br>Murphy Nasica                                                                    |                                                                                                                                                                                                                                                                              |
| Amount (\$)<br>\$88.11                                       | Payee address; City; State; Zip Code<br>PO Box 1648<br><br>Austin, TX 78767                    |                                                                                                                                                                                                                                                                              |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Email Marketing                                                           |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                                                                                    |
| Date<br>07/02/2024                                           | Payee name<br>Murphy Nasica                                                                    |                                                                                                                                                                                                                                                                              |
| Amount (\$)<br>\$1,357.65                                    | Payee address; City; State; Zip Code<br>PO Box 1648<br><br>Austin, TX 78767                    |                                                                                                                                                                                                                                                                              |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Design, Data and Production of Campaign Mail Advertisements - Rptd on Prior Sch F2 |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                                                                                    |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

|                                                              |                                                                                                |                                                                                                                                                                                                                                              |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/4 Rpt: 33/38     | <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                                                                                                                                                                                     |
| <b>4</b> Date<br>09/12/2024                                  | <b>5</b> Payee name<br>Murphy Nasica                                                           |                                                                                                                                                                                                                                              |
| <b>6</b> Amount (\$)<br>\$22,903.00                          | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1648<br><br>Austin, TX 78767           |                                                                                                                                                                                                                                              |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Consulting Fee - Reported on Prior Sch F2 |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                                                    |
| Date<br>08/12/2024                                           | Payee name<br>Pearland Lady Lions In Service                                                   |                                                                                                                                                                                                                                              |
| Amount (\$)<br>\$350.00                                      | Payee address; City; State; Zip Code<br>2800 Broadway St Ste C 104<br><br>Pearland, TX 77581   |                                                                                                                                                                                                                                              |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Sponsorship/Advertisement for Fundraiser Event     |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                                                    |
| Date<br>09/20/2024                                           | Payee name<br>TX GOP Store                                                                     |                                                                                                                                                                                                                                              |
| Amount (\$)<br>\$876.35                                      | Payee address; City; State; Zip Code<br>404 IH-45<br><br>Huntsville, TX 77488                  |                                                                                                                                                                                                                                              |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Sign Expense                              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                                                    |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

|                                                          |                                           |                                                          |
|----------------------------------------------------------|-------------------------------------------|----------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/4 Rpt: 34/38 | <b>2</b> FILER NAME<br>Barry , Jeffrey M. | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985 |
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|                             |                                                     |
|-----------------------------|-----------------------------------------------------|
| <b>4</b> Date<br>07/02/2024 | <b>5</b> Payee name<br>United States Postal Service |
|-----------------------------|-----------------------------------------------------|

|                                    |                                                                                                    |
|------------------------------------|----------------------------------------------------------------------------------------------------|
| <b>6</b> Amount (\$)<br>\$7,037.91 | <b>7</b> Payee address; City; State; Zip Code<br>475 L'Enfant Plaza SW<br><br>Washington, DC 20260 |
|------------------------------------|----------------------------------------------------------------------------------------------------|

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| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Postage for Campaign Mail Advertisements (Paid via Murphy Nasica) - Rptd on Prior Sch F2 |
|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|                    |                      |
|--------------------|----------------------|
| Date<br>08/07/2024 | Payee name<br>WinRed |
|--------------------|----------------------|

|                         |                                                                                                |
|-------------------------|------------------------------------------------------------------------------------------------|
| Amount (\$)<br>\$995.62 | Payee address; City; State; Zip Code<br>1776 Wilson Blvd, Suite 530<br><br>Arlington, VA 22209 |
|-------------------------|------------------------------------------------------------------------------------------------|

|                               |                                                                                 |                                                                                                                                                                                                                                                             |
|-------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Processing Fees for Online Campaign Contributions Aug 7 - Sept 26 |
|-------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

|                                                                                                                                 |                                                                                               |                                                                                                                                                                                                                     |
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| <b>1</b> Total pages Schedule G:<br>Sch: 1/4 Rpt: 35/38                                                                         | <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                                     | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                                                                                                                                                            |
| <b>4</b> Date<br>09/04/2024                                                                                                     | <b>5</b> Payee name<br>Academy Sports and Outdoors                                            |                                                                                                                                                                                                                     |
| <b>6</b> Amount (\$)<br>\$346.35<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>2550 Pearland Pkwy<br><br>Pearland, TX 77581 |                                                                                                                                                                                                                     |
| <b>8</b> PURPOSE OF EXPENDITURE                                                                                                 | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense      | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Supplies for Campaign Event  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                                                                    | Candidate/Officeholder name                                                                   | Office sought                      Office held                                                                                                                                                                      |
| Date<br>08/28/2024                                                                                                              | Payee name<br>Envelopes.com                                                                   |                                                                                                                                                                                                                     |
| Amount (\$)<br>\$539.62<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>185 Legrande Ave<br><br>Northvale, NJ 07647           |                                                                                                                                                                                                                     |
| PURPOSE OF EXPENDITURE                                                                                                          | Category (See Categories listed at the top of this schedule)<br>Printing Expense              | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Printing Expense for Campaign Materials |
| Complete ONLY if direct expenditure to benefit C/OH                                                                             | Candidate/Officeholder name                                                                   | Office sought                      Office held                                                                                                                                                                      |
| Date<br>09/21/2024                                                                                                              | Payee name<br>Hobby Lobby                                                                     |                                                                                                                                                                                                                     |
| Amount (\$)<br>\$102.74<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>2450 Pearland Pkwy<br><br>Pearland, TX 77581          |                                                                                                                                                                                                                     |
| PURPOSE OF EXPENDITURE                                                                                                          | Category (See Categories listed at the top of this schedule)<br>Event Expense                 | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Supplies for Campaign Event             |
| Complete ONLY if direct expenditure to benefit C/OH                                                                             | Candidate/Officeholder name                                                                   | Office sought                      Office held                                                                                                                                                                      |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

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| <b>1</b> Total pages Schedule G:<br>Sch: 2/4 Rpt: 36/38                                                                        | <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                                                             | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                                                                                                                                                            |
| <b>4</b> Date<br>09/21/2024                                                                                                    | <b>5</b> Payee name<br>Home Goods                                                                                     |                                                                                                                                                                                                                     |
| <b>6</b> Amount (\$)<br>\$76.38<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>2650 Pearland Pkwy #110<br><br>Pearland, TX 77581                    |                                                                                                                                                                                                                     |
| <b>8</b> PURPOSE OF EXPENDITURE                                                                                                | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense                              | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Supplies for Campaign Event  |
|                                                                                                                                | <b>9</b> Complete ONLY if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |                                                                                                                                                                                                                     |
| Date<br>08/21/2024                                                                                                             | Payee name<br>Koza's Inc                                                                                              |                                                                                                                                                                                                                     |
| Amount (\$)<br>\$1,080.79<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended       | Payee address; City; State; Zip Code<br>2910 S Main St<br><br>Pearland, TX 77581                                      |                                                                                                                                                                                                                     |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                  | Category (See Categories listed at the top of this schedule)<br>Printing Expense                                      | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Printing Expense for Campaign Materials |
|                                                                                                                                | <b>9</b> Complete ONLY if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |                                                                                                                                                                                                                     |
| Date<br>08/24/2024                                                                                                             | Payee name<br>Lowe's Home Improvement                                                                                 |                                                                                                                                                                                                                     |
| Amount (\$)<br>\$33.36<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>2741 E Broadway St.<br><br>Pearland, TX 77581                                 |                                                                                                                                                                                                                     |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense                                   | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Supplies for Campaign Sign Installation |
|                                                                                                                                | <b>9</b> Complete ONLY if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |                                                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

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| <b>1</b> Total pages Schedule G:<br>Sch: 3/4 Rpt: 37/38                                                                         | <b>2</b> FILER NAME<br>Barry , Jeffrey M.                                                          | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985                                                                                                                                                                       |
| <b>4</b> Date<br>09/08/2024                                                                                                     | <b>5</b> Payee name<br>Moo Print                                                                   |                                                                                                                                                                                                                                |
| <b>6</b> Amount (\$)<br>\$101.25<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>25 Fairmount Ave<br><br>East Providence, RI 02914 |                                                                                                                                                                                                                                |
| <b>8</b> PURPOSE OF EXPENDITURE                                                                                                 | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense        | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Printing Expense for Campaign Materials |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                                                                    | Candidate/Officeholder name                                                                        | Office sought                      Office held                                                                                                                                                                                 |
| Date<br>09/07/2024                                                                                                              | Payee name<br>My Stitching & Printing                                                              |                                                                                                                                                                                                                                |
| Amount (\$)<br>\$209.27<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>3325 S Main St<br><br>Pearland, TX 77581                   |                                                                                                                                                                                                                                |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                   | Category (See Categories listed at the top of this schedule)<br>Advertising Expense                | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Expense for Campaign Shirts                        |
| Complete ONLY if direct expenditure to benefit C/OH                                                                             | Candidate/Officeholder name                                                                        | Office sought                      Office held                                                                                                                                                                                 |
| Date<br>08/13/2024                                                                                                              | Payee name<br>Pearland Golf Club                                                                   |                                                                                                                                                                                                                                |
| Amount (\$)<br>\$300.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>3123 Flower Field Lane<br><br>Pearland, TX 77584           |                                                                                                                                                                                                                                |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                   | Category (See Categories listed at the top of this schedule)<br>Event Expense                      | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Deposit for Venue for Campaign Event               |
| Complete ONLY if direct expenditure to benefit C/OH                                                                             | Candidate/Officeholder name                                                                        | Office sought                      Office held                                                                                                                                                                                 |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**EXPENDITURE CATEGORIES 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 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)

The Instruction Guide explains how to complete this form.

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|---------------------------------------------------------|-------------------------------------------|----------------------------------------------------------|
| <b>1</b> Total pages Schedule G:<br>Sch: 4/4 Rpt: 38/38 | <b>2</b> FILER NAME<br>Barry , Jeffrey M. | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087985 |
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| <b>4</b> Date<br>08/26/2024 | <b>5</b> Payee name<br>Pearland HS Dug Out Club |
|-----------------------------|-------------------------------------------------|

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| <b>6</b> Amount (\$)<br><br>\$125.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>3775 S Main St<br><br>Pearland, TX 77581 |
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| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Sponsorship/Ad for HS Baseball Fundraiser |
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| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date<br>08/21/2024 | Payee name<br>Texas Young Republican Federation |
|--------------------|-------------------------------------------------|

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| Amount (\$)<br><br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br>2604 Bright Brock Lane<br><br>Conroe, TX 77304 |
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| <b>PURPOSE OF EXPENDITURE</b> | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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