FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00037146 48 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Jane N. NAME Date Received **ELECTRONICALLY FILED** 10/07/2024 NICKNAME LAST **SUFFIX** Bland CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Douglas S. NAME NICKNAME LAST **SUFFIX** Bland **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 758-2498 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 09/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Supreme Court Justice Place 6 Supreme Court Justice Place 6

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 48

13 C / OH NAME	Bland, Jane N. (The	Honorable)	14 Filer ID 00037146	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	M candidate / officeholder. These expenditures may have been made without the candidate's or or or consent. Candidates and officeholders are required to report this information only if they receives						
X Additional Pages	COMMITTEE TYPE COMMITTEE NAME						
	X GENERAL	Hays County Republican Party					
		COMMITTEE ADDRESS					
	SPECIFIC	6000 FM 150					
		PO Box 1806					
		Kyle, TX 78640					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Hennager, Guy					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		916 Mustang Lane					
		San Marcos, TX 78666					
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00			
	2. TOTAL POLIT	ICAL CONTRIBUTIONS		122 025 00			
		PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 132,925.00			
EXPENDITURE TOTALS							
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 43,186.04			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LASTRICE ${\sf CAST}$	AST DAY OF THE	\$ 535,582.01			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 0.00			
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.					
		The Hone	orable Jane N. Bland	d			
		Signature of	Candidate or Officehol	der			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
		ertify which, witness my hand and seal of office.					
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath			
Signature of Office	cer auministering oath	Finited name of onicer administering oath	rille of office	i auministening dath			

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM JC/OH ADDENDUM

Page 3 of 48

				F age 3 01 40		
C / OH NAME	Bland, Jane N. (The I	Honorable)	Filer ID 00037146	(Ethics Commission Filers)		
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to s been made without the candidate's or officeholder's d to report this information only if they receive notic	knowledge or co	onsent. Candidates and		
	COMMITTEE TYPE COMMITTEE NAME					
	X GENERAL	Texas Alliance for Life PAC				
	🖰	COMMITTEE ADDRESS				
	SPECIFIC	8000 Centre Park Drive Suite 380				
		Austin, TX 78754				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Shaw, James				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		4505 Corazon Cv				
		Round Rock, TX 78681				
NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to s been made without the candidate's or officeholder's d to report this information only if they receive notic	knowledge or co	onsent. Candidates and		
	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Texas REALTORS PAC				
		COMMITTEE ADDRESS				
	SPECIFIC	1115 San Jacinto Blvd, Ste 200				
		Austin, TX 78701				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Cantu, Leslie				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		PO Box 2246				
		Austin, TX 78768				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			CC	OVER SHEET PG 3 4 of 48
18 FILEF Bland	R NAM d, Jan	(Ethics Commission Filers)		
		SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 132,925.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$ 41,864.18
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		\$		
8.		\$		
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,321.86
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	w to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 1/27 Rpt: 5/48
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Bland, Jane	N. (The Honorable)			00037146
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/20/2024	09/20/2024 Akerman, Llp			\$2,500.00
	6 Contributor address; City;	State; Zip Code		
	Houston, TX 77056			
8 Contributor's F	Principal Occupation		9 Contributor's Job Title	
10 Contributor's e	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (i	f any)		
Date	Full name of contributor	out-of-state PAC (ID#:	`	Amount of Contribution (\$)
09/20/2024	Auld, Marianne	U out-of-state PAC (ID#.		\$2,500.00
09/20/2024	Contributor address; City;			\$2,500.00
Contributor's F	Fort Worth, TX 76102 Principal Occupation		Contributor's Job Title Managing Partner	
				nauga (if any)
	employer/law firm Hallman, LLP		Law firm of contributor's s	pouse (ii ariy)
	s a child, law firm of parent(s) (i	f any)		
ii contributor is	s a criliu, iaw iiiiii oi parerii(s) (i	i arry)		
Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
08/16/2024	Bailey, Mona	_		\$250.00
	Contributor address; City;	State; Zip Code		
	North Richland Hills, TX	76180		
Contributor's F	Principal Occupation		Contributor's Job Title	
Retired			Retired	
Contributor's e Retired	employer/law firm		Law firm of contributor's s	pouse (if any)
	s a child, law firm of parent(s) (i	f anv)		
	o a orma, tati mirror parorii(o) (i	,		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1		es Schedule A(J): 7 Rpt: 6/48	1:
2	FILER NAME	N. (The Honorable)			3	Filer ID 0003714	(Ethics Commiss	ion Filers)
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7			
	09/03/2024 Bannister, Ethan 6 Contributor address; City; State; Zip Code					\$100.00		
		San Antonio, TX 78245						
8		Principal Occupation		9 Contributor's Job Title				
10	Attorney	employer/law firm		Associate Attorney	nous	oo (if on a)		
10	Langley & B			11 Law firm of contributor's s	spous	se (ii ariy)		
12		s a child, law firm of parent(s) (i	f any)	<u> </u>				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount o	of Contribution (\$)	
	09/20/2024	Bruun, Lance	_					\$500.00
		Contributor address; City; Corpus Christi, TX 7840	·					
-	Contributor's I	Principal Occupation	· <u>-</u>	Contributor's Job Title				
	Attorney			Attorney				
	Contributor's	employer/law firm		Law firm of contributor's s	pous	se (if any)		
	Self Employ	ed						
	If contributor i	s a child, law firm of parent(s) (i	f any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount o	of Contribution (\$)	
	09/06/2024	Cantey Hanger LLP						\$2,500.00
		Contributor address; City; Fort Worth, TX 76102	State; Zip Code					
\vdash	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pous	se (if any)		
	If contributor i	s a child, law firm of parent(s) (i	f any)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 3/27 Rpt: 7/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	08/30/2024 Canyon Lake Republican Women 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$750.00		
		Canyon Lake, TX 78133	3			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	08/16/2024	Carter, E. Leon Contributor address; City;	<u> </u>			\$5,000.00
		Dallas, TX 75287				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Carter Arnet	employer/law firm +		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (i	f any)			
	ii contributor i	s a ciliu, iaw iiiii oi pareiii(s) (i	i airy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/17/2024	Cathey, Brian				\$1,000.00
		Contributor address; City; Houston, TX 77056	State; Zip Code			
-	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Wright Close	e & Barger LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 4/27 Rpt: 8/48		
2	FILER NAME Bland, Jane	ILER NAME Bland, Jane N. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00037146
4	Date 5 Full name of contributor out-of-state PAC (ID#:) O8/15/2024 Chalk, John Allen 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$250.00		
		Fort Worth, TX 76102			
8	Contributor's Lawyer	Principal Occupation		Contributor's Job Title Equity Member	
10		employer/law firm alk Swindle & Schwartz PLLC	,	11 Law firm of contributor's sp	oouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if a	any)	<u> </u>	
	Date Full name of contributor out-of-state PAC (ID#:) 09/06/2024 Clemons, Rebecca Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$250.00		
	O satrile da da	San Antonio, TX 78212		Contributed 1-b Tills	
	Director	Principal Occupation		Contributor's Job Title Director	
		employer/law firm Missions		Law firm of contributor's s	pouse (if any)
	-	s a child, law firm of parent(s) (if a	any)		
	Date 09/09/2024	Full name of contributor Cook, Derek Contributor address; City; S	out-of-state PAC (ID#:_		Amount of Contribution (\$) \$250.00
		Midland, TX 79701			
	Contributor's Attorney	Principal Occupation		Contributor's Job Title Shareholder	
	Lynch, Chap	employer/law firm opell & Alsup, P.C. s a child, law firm of parent(s) (if a	anv)	Law firm of contributor's sp	oouse (if any)
	Sommoutof I	S & Simo, Idiv mini oi pareinto) (ii c	~-7/		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/27 Rpt: 9/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 09/18/2024 Cook, Derek 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		Midland, TX 79701		_		
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Shareholder		
10		employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
L		opell & Alsup, P.C.				
12	2 If contributor is	s a child, law firm of parent(s) (i	tany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/13/2024	Corcoran, Kevin (Mr.) Contributor address; City;	<u> </u>			\$250.00
		Webster, TX 77598				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Spencer Far	ne				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/21/2024	Crosnoe, Wade	_	·		\$250.00
		Contributor address; City;	State; Zip Code			
		Austin, TX 78703				
		Principal Occupation		Contributor's Job Title		
	Attorney			Partner		Ct and
	Thompson C	employer/law firm		Law firm of contributor's sp	ous	e (II any)
	•	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBU	JTIC	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete t	this fo	orm.	1	Total pages Schedule A(J)1: Sch: 6/27 Rpt: 10/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date 5 Full name of contributor x out-of-state PAC (ID#: C00364133) 07/12/2024 DUANE MORRIS GOVERNMENT COMMITTEE 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00		
		PHILADELPHIA, PA 19103				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	ise (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date Full name of contributor				Amount of Contribution (\$) \$1,000.00	
	Contributor's I	PHILADELPHIA, PA 19103 Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	ise (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor ut-of-state PAG	C (ID#:_)		Amount of Contribution (\$)
	09/20/2024	Davis, Gerald & Cremer PC				\$2,500.00
		Contributor address; City; State; Zip Code Midland, TX 79701				
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	ise (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/27 Rpt: 11/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date O9/25/2024 5 Full name of contributor out-of-state PAC (ID#:) O9/25/2024 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$250.00		
		Midland, TX 79710				
8		Principal Occupation		9 Contributor's Job Title		
	Land Manag			Office Manager		
10	Contributor's e Purvis Opera	employer/law firm ating Co.		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (i	f any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	Т	Amount of Contribution (\$)
	09/20/2024	Duggins, Ralph Contributor address; City;	<u> </u>		•	\$5,000.00
	O antiile stanta la	Austin, TX 78701		Contributed 1-b Tills		
	Partner	Principal Occupation		Contributor's Job Title Partner		
H		employer/law firm		Law firm of contributor's sp	าดบร	se (if any)
	Cantey & Ha					
		s a child, law firm of parent(s) (i	f any)	1		
H	Date	Full name of contributor	D	\	<u> </u>	Amount of Contribution (\$)
	08/01/2024	Enoch, Craig	out-of-state PAC (ID#:)		\$500.00
		Contributor address; City; Austin, TX 78703	State; Zip Code		•	\$
-	Contributor's F	Principal Occupation		Contributor's Job Title	_	
	Attorney	iniopai Godapaion		Member		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Enoch Keve	r PLLC		Enoch Kever PLLC		
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 8/27 Rpt: 12/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date 09/20/2024 5 Full name of contributor out-of-state PAC (ID#:) Fasken Management LLC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$2,500.00		
		Midland, TX 79707				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	ī	Amount of Contribution (\$)
	09/13/2024	Fayette County Republic Contributor address; City;	can Women			\$500.00
		La Grange, TX 78945		T - "		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/03/2024	Finch, David	_			\$2,000.00
		Contributor address; City; Significant Contributor Con	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	-	
	Energy			Consultant		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self			Baker Wotring LLP		
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 9/27 Rpt: 13/48
2	FILER NAME Bland, Jane	R NAME nd, Jane N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	4 Date 09/13/2024 5 Full name of contributor out-of-state PAC (ID#:) Friedman, Walker (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00		
		Fort Worth, TX 76107				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm uder & Cooke		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/06/2024	Great State Republicans Contributor address; City; Hallettsville, TX 77964				\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor 3 i	molpai Occupation		Contributor 3 300 True		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/10/2024	Gregory, Bob Contributor address; City;	State; Zip Code			\$1,000.00
		Austin, TX 78747				
		Principal Occupation		Contributor's Job Title		
	Waste Mana			CEO		and the sun of
	Texas Dispo	employer/law firm		Law firm of contributor's sp	ous	se (II any)
		s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 10/27 Rpt: 14/48
2	FILER NAME	N. (The Henerable)			3	Filer ID (Ethics Commission Filers) 00037146
Ļ		N. (The Honorable)			Ļ	
4	Date 09/26/2024	5 Full name of contributor Hagans, William Fred (N6 Contributor address; City;				Amount of Contribution (\$) \$1,000.00
		Houston, TX 77006				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firmSelf - Hagans Law11 Law firm of contributor's sp			oous	e (if any)	
12		s a child, law firm of parent(s) (i	F any)			
12	. II COITHIBUTOR	s a ciliiu, iaw iiiiii oi pareiii(s) (i	ally)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/10/2024	Hayes, Steven		·		\$100.00
	Contributor address; City; State; Zip Code					
		Arlington, TX 76012				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		f Steven K. Hayes				
	If contributor is	s a child, law firm of parent(s) (i	fany)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/26/2024	Henry, Byron				\$1,000.00
		Contributor address; City;	State; Zip Code		1	
		Prosper, TX 75078				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Scheef Ston	e Llp				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
L						

MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 11/27 Rpt: 15/48
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Bland, Jane	N. (The Honorable)			00037146
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/26/2024	Henry, Paula			\$500.00
	6 Contributor address; City; S	State; Zip Code		
	Midland, TX 79703		1	
	Principal Occupation		9 Contributor's Job Title	
Retired			Retired	
10 Contributor's e	employer/law firm		11 Law firm of contributor's s	pouse (if any)
None				
12 If contributor is	s a child, law firm of parent(s) (if	any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/10/2024	09/10/2024 Hester, Conrad			\$5,000.00
Contributor address; City; State; Zip Code		·		
		·		
	Fort Worth, TX 76107			
Contributor's F	IPrincipal Occupation		Contributor's Job Title	<u> </u>
Attorney			Attorney	
	employer/law firm		Law firm of contributor's s	pouse (if any)
	Hester & Haynes		'	
	s a child, law firm of parent(s) (if	anv)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/29/2024	Holmes, James			\$250.00
	Contributor address; City; S	State; Zip Code		"
		·		
	Dallas, TX 75201			
Contributor's F	I Principal Occupation		Contributor's Job Title	
Partner			Partner	
Contributor's e	employer/law firm		Law firm of contributor's s	pouse (if any)
Holmes PLL			'	
If contributor is	s a child, law firm of parent(s) (if	any)		
		,,		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 12/27 Rpt: 16/48
2	FILER NAME	N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00037146
4	Date	5 Full name of contributor out-of-state PAC (ID#:	<u> </u>	7 Amount of Contribution (\$)
4	09/20/2024	Hunsaker M.D., Jerry 6 Contributor address; City; State; Zip Code	,	\$500.00
		Corpus Christi, TX 78411		
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
	Ophthalmolo	ogist	Ophthalmologist	
10		employer/law firm	11 Law firm of contributor's s	pouse (if any)
_	Self Employe			
12	! If contributor is	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/02/2024 Hunton Andrews Kurth Texas Pac Contributor address; City; State; Zip Code		,	\$5,000.00
	Contributor's I	Houston, TX 77002 Principal Occupation	Contributor's Job Title	
	Contributorio	popular a vilar firm	Low firm of contributorio	nauga (if any)
	Contributors	employer/law firm	Law firm of contributor's s	pouse (ii arry)
	If contributor is	s a child, law firm of parent(s) (if any)	ı	
_	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/02/2024	Hunton Andrews Kurth Texas Pac	,	\$5,000.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77002		
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Contributor's 6	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	L	

	MONET	ARY POLITICAL CO	NTRIBUTIO	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains how to	complete this f	form.	1	Total pages Schedule A(J)1: Sch: 13/27 Rpt: 17/48	
2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Bland, Jane	N. (The Honorable)				00037146	
4	Date 08/13/2024	5 Full name of contributor Jefferson, Lamont	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$1,000.00	
	30, 20, 202	6 Contributor address; City; State;	Zip Code			1 _,000.00	
		San Antonio, TX 78205					
8	Contributor's I Attorney	Principal Occupation		9 Contributor's Job Title Member			
10	Contributor's of Jefferson Ca	employer/law firm nno		11 Law firm of contributor's s	pou	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)					
_	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	07/08/2024	Johnson, Philip				\$300.00	
	Contributor address; City; State; Zip Code			1			
		Lubbock, TX 79412					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's s	pous	se (if any)	
	Self						
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:	C00236489	Τ	Amount of Contribution (\$)	
	09/26/2024	KOCH INDUSTRIES, INC. P				\$3,000.00	
		Contributor address; City; State;			Ϊ.		
		WICHITA, KS 67220		T			
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 14/27 Rpt: 18/48
2	FILER NAME Bland, Jane	N. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00037146
4	Date 09/25/2024	5 Full name of contributor Kruse, Layne6 Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$1,000.00
		Houston, TX 77010				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Partner					
10	Contributor's e Norton Rose	employer/law firm		11 Law firm of contributor's sp	oouse	e (if any)
12		s a child, law firm of parent(s) (i	f anv)			
	. Il contributor i	s a crima, law iiiii or parcria(s) (ii	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/05/2024 LeFlore, Byron Contributor address; City; State; Zip Code			\$250.00		
		San Antonio, TX 78209		1		
		Principal Occupation		Contributor's Job Title		
	Attorney	and a conflorer fines		Partner		(if any)
		employer/law firm puccio & Pullen LLP		Law firm of contributor's sp	Jouse	e (II arry)
_		s a child, law firm of parent(s) (if	f anv)			
	oonanaata		,			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/09/2024	Leonard, Kelly	_			\$150.00
		Contributor address; City; Houston, TX 77057	State; Zip Code		•	
	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Gray Reed			David Leonard, Gray R	eed	
	If contributor is	s a child, law firm of parent(s) (if	fany)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 15/27 Rpt: 19/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date 09/20/2024	5 Full name of contributor Mabee, Gayla6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$5,000.00
		Midland, TX 79705				
8	Contributor's Retired	tributor's Principal Occupation 9 Contributor's Job Title Retired				
10		employer/law firm		11 Law firm of contributor's sp	วดบร	se (if any)
	None				(,)	
12	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)
	09/20/2024	Mabee, John Contributor address; City; Midland, TX 79705	State; Zip Code			\$5,000.00
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Entrepreneu			Entrepreneur		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (i	f any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/06/2024	Macon, Jane Contributor address; City; San Antonio, TX 78205	State; Zip Code			\$1,000.00
Г	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Bracewell LI	-				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 16/27 Rpt: 20/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date 08/30/2024	5 Full name of contributor Martin, Brant6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Fort Worth, TX 76102				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Partner					
10	10 Contributor's employer/law firm Wick Phillips Gould & Martin, LLP			oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/17/2024 McCracken, Michael Contributor address; City; State; Zip Code			\$250.00		
		Fort Worth, TX 76109				
		Principal Occupation		Contributor's Job Title		
	Engineer			CEO		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Freedom En		£ 0.00.0			
	ii contributor i	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/28/2024	McLaughlin, Brian	_			\$250.00
		Contributor address; City; Midland, TX 79705	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	inicipal Cocapation		Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Kerr & McLa	ughlin PLLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTIO	DNS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.		ages Schedule A(J)1 7/27 Rpt: 21/48	:
2	FILER NAME					(Ethics Commission	on Filers)
	Bland, Jane	N. (The Honorable)			00037	146	
4 Date 5 Full name of contributor ☐ out-of-state PAC (I Meadows, Patricia 6 Contributor address; City; State; Zip Code		out-of-state PAC (ID#:_)	7 Amoun	t of Contribution (\$)	\$250.00	
		Fort Worth, TX 76102					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Partner			
10	10 Contributor's employer/law firm Kelly Hart & Hallman LLP			11 Law firm of contributor's s	pouse (if any	/)	
12	! If contributor i	s a child, law firm of parent(s) (i	f any)				
F	<u> </u>	T = 1			Τ.	· (0 · '' · ' (n)	
Date Full name of contributor out-of-state PAC (ID#: 09/17/2024 Miller, Jack Contributor address; City; State; Zip Code)	Amoun	t of Contribution (\$)	#200.00		
					\$200.00		
		Fort Worth, TX 76102					
_	Contributor's	I Principal Occupation		Contributor's Job Title			
	President	· ····o.pa. O o o a patrio · ·		President			
_		employer/law firm		Law firm of contributor's s	nouse (if any	<i>/</i>)	
	Haltom's Jev				,	,	
		s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amoun	t of Contribution (\$)	
	08/30/2024	Montgomery County Re	publican Women]		\$500.00
		Contributor address; City;	State; Zip Code				
		Conroe, TX 77305					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any	<i>y</i>)	
	If contributor i	s a child, law firm of parent(s) (i	f any)				

MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 18/27 Rpt: 22/48
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Bland, Jane	N. (The Honorable)			00037146
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/20/2024	Nye Law Office PLLC			\$4,000.00
	6 Contributor address; City;	State; Zip Code		
	Corpus Christi, TX 7841	11		
8 Contributor's F	Principal Occupation		9 Contributor's Job Title	
10 Contributor's employer/law firm 11 Law firm of contributor's			pouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (i	if any)		
Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
08/26/2024 Orsinger, Richard Contributor address; City; State; Zip Code)	\$1,000.00	
		\$1,000.00		
Contributor's F	San Antonio, TX 78205 Principal Occupation		Contributor's Job Title	
Attorney	ппсіраї Оссираноп		Senior Partner	
	employer/law firm		Law firm of contributor's s	nouse (if any)
	elson, Downing & Anderson			
If contributor is	s a child, law firm of parent(s) (i	if any)		
Date	Full name of contributor	out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
09/16/2024	Ortiz, Giana			\$250.00
		State; Zip Code		-
		. ,		
	Arlington, TX 76013			
	Principal Occupation		Contributor's Job Title	
Attorney			Attorney	
Contributor's e The Ortiz La	employer/law firm		Law firm of contributor's s	pouse (if any)
		if any)		
ii continuator is	s a child, law firm of parent(s) (i	ii aiiy)		

	MONET	ARY POLITICAL	CONTRIBUTIO	DNS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	orm.	1	ges Schedule A(J) /27 Rpt: 23/48	1:
2	FILER NAME Bland, Jane	N. (The Honorable)			3 Filer ID 000371	(Ethics Commiss	ion Filers)
4	Date 09/13/2024	5 Full name of contributorPink Elephant Committee6 Contributor address; City; S			7 Amount	of Contribution (\$)	\$1,500.00
		Midland, TX 79707					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	10 Contributor's employer/law firm 11 Law firm of contributor's s			oouse (if any)			
12	! If contributor is	s a child, law firm of parent(s) (if	any)				
	Date Full name of contributor out-of-state PAC (ID#:) 09/16/2024 Precella, Karen Contributor address; City; State; Zip Code		Amount (of Contribution (\$)	\$250.00		
		Fort Worth, TX 76102					
	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Senior Counsel			
_		employer/law firm		Law firm of contributor's sp	oouse (if anv)		
	Haynes and			·	` ',		
	If contributor is	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	09/06/2024	Prichard Young, Llp					\$1,000.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216						
	Contributor's I	Principal Occupation		Contributor's Job Title	1		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if	any)	ı			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.		otal pages Schedule A(J) Sch: 20/27 Rpt: 24/48	L:
2	FILER NAME					Filer ID (Ethics Commissi	on Filers)
	Bland, Jane	N. (The Honorable)			C	00037146	
4	Date 09/05/2024	Full name of contributor Raba, GaryContributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
		San Antonio, TX 78232					
8	Contributor's	Principal Occupation		9 Contributor's Job Title			
	Engineer			Chief Strategy Officer			
10	10 Contributor's employer/law firm Raba Kistner Inc			pouse	(if any)		
_							
12	t contributor i	s a child, law firm of parent(s) (i	it any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/06/2024 Republican Women Of Kerr County				()	\$750.00	
Contributor address; City; State; Zip Code					,		
		·					
		Kerrville, TX 78029					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse	(if any)	
	If contributor i	s a child, law firm of parent(s) (i	if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	T A	Amount of Contribution (\$)	
	09/24/2024	Roach, Robert	—			,	\$250.00
		Contributor address; City;	State: 7in Code				
		Continuation address, Gity,	oute, zip code				
		Houston, TX 77042					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Attorney			Partner			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse	(if any)	
	Roach Newt	on LLP					
	If contributor i	s a child, law firm of parent(s) (i	f any)	1			

MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instruc	ction Guide explains ho	1 Total pages Schedule A(J)1: Sch: 21/27 Rpt: 25/48		
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Bland, Jane I	N. (The Honorable)			00037146
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/26/2024	Rockwall Gop			\$1,000.00
	6 Contributor address; City;	State; Zip Code		
	Rockwall, TX 75087			
8 Contributor's P	Principal Occupation		9 Contributor's Job Title	
10 Contributor's e	mployer/law firm		11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if	any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/23/2024 San Angelo Republican Women			\$100.00	
	San Angelo, TX 76906			
Contributor's P	Principal Occupation		Contributor's Job Title	
Contributor's e	mployer/law firm		Law firm of contributor's s	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if	any)		
Doto	Full name of contributor	Day of state BAG (ID)		Amount of Contribution (\$)
Date 09/20/2024	Scott, Michael	out-of-state PAC (ID#:		\$2,000.00
03/20/2024		 Stata: 7in Coda		
		State, 2.p code		
0	Robstown, TX 78380		0	
Owner	Principal Occupation		Contributor's Job Title Owner	
	mployor/low firm			nouse (if any)
H&S Constru	mployer/law firm		Law firm of contributor's s	pouse (ii arry)
	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 22/27 Rpt: 26/48
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Bianu, Jane	N. (The Honorable)			00037146
4	Date 09/17/2024	5 Full name of contributor Shearer, Bennie6 Contributor address; City;	out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$100.00
		Haslet, TX 76052			
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)	
12		s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/06/2024	Shields, John			\$5,000.00
		Contributor address; City;	State; Zip Code		····
		Com Amtonio TV 70010			
		San Antonio, TX 78212		_	
		Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Self Employ	ed 			
	If contributor i	s a child, law firm of parent(s) (if any)		
_	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/19/2024	Shiels, Frank	_		\$25.00
		Contributor address; City;	State; Zip Code		····
		, ,,	, ,		
		Fort Worth, TX 76104			
	Contributor's	I Principal Occupation		Contributor's Job Title	
	Sr. Vp/Bank			Sr. Vp/Banker	
	•	employer/law firm		Law firm of contributor's s	spouse (if any)
	Frost Bank				
	If contributor i	s a child, law firm of parent(s) (if any)	<u> </u>	

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1					
	The Instru	ction Guide explains how to complete thi	s form.	1 Total pages Schedule A(J)1: Sch: 23/27 Rpt: 27/48					
2	FILER NAME Bland, Jane	N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00037146					
4	Date 07/19/2024	5 Full name of contributor out-of-state PAC (IE Sparks, Don L. (Mr.) 6 Contributor address; City; State; Zip Code Midland, TX 79705	D#:)	7 Amount of Contribution (\$) \$1,000.00					
8	Contributor's F	Principal Occupation	9 Contributor's Job Title						
	Oil and Gas	Operator/Engineer/Chairman	Oil and Gas Operator/E	Engineer/Chairman					
10		employer/law firm	pouse (if any)						
12	If contributor is	s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)					
	08/03/2024	Stewart, Emily Contributor address; City; State; Zip Code Houston, TX 77024		. \$1,500.00					
	Contributor's F	I Principal Occupation	Contributor's Job Title	<u> </u>					
	Retired	·	Retired						
	Contributor's e	employer/law firm	Law firm of contributor's s	Law firm of contributor's spouse (if any)					
	If contributor is	s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)					
	08/09/2024	Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701		. \$20,000.00					
	Contributor's I	I Principal Occupation	Contributor's Job Title						
	Contributor's	employer/law firm	Law firm of contributor's s	oouse (if any)					
	If contributor is	s a child, law firm of parent(s) (if any)							

	MONET	ARY POLITICAL	CONTRIBUTIO	DNS		S	CHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1		Schedule A(J)1 Rpt: 28/48	:
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (E	thics Commissi	on Filers)
4	Date 08/30/2024	5 Full name of contributor Thomson, Kristal 6 Contributor address; City;	out-of-state PAC (ID#:_)	7		Contribution (\$)	\$250.00
		San Antonio, TX 78218						
8	Contributor's I Attorney	Principal Occupation		9 Contributor's Job Title Shareholder				
10	Contributor's C	employer/law firm anack		11 Law firm of contributor's s	pous	se (if any)		
12		s a child, law firm of parent(s) (if	any)					
	Date 08/27/2024	Full name of contributor Torlincasi, Ricky Contributor address; City;	out-of-state PAC (ID#:_			Amount of C	Contribution (\$)	\$1,500.00
		Fort Worth, TX 76109						
		Principal Occupation		Contributor's Job Title				
	Attorney			General Counsel		<i>(</i> (,)		
		employer/law firm Operating, LLC		Law firm of contributor's s	pous	se (II any)		
		s a child, law firm of parent(s) (if	any)					
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of C	Contribution (\$)	
	08/02/2024	Trepac/Texas Association Contributor address; City;	on Of Realtors Pac					\$5,000.00
		Austin, TX 78768						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pous	se (if any)		
	If contributor i	s a child, law firm of parent(s) (if	any)					

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 25/27 Rpt: 29/48
2	FILER NAME	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date 08/26/2024	Full name of contributor Whitaker Chalk Swindle Contributor address; City; 9			7	Amount of Contribution (\$) \$1,000.00
		Fort Worth, TX 76102				
8	Contributor's I	Principal Occupation	9 Contributor's Job Title			
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	oou	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date 09/25/2024	Full name of contributor Whittle, Jeffrey Contributor address; City; \$			Amount of Contribution (\$) \$2,500.00	
	Contributorio	West University Place, T	Contributor's Job Title			
	Attorney	Principal Occupation		Partner		
	Contributor's e	employer/law firm nd Dickinson s a child, law firm of parent(s) (if	any)	Law firm of contributor's sp	oou	se (if any)
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/04/2024 Whyte, Lorien Contributor address; City; State; Zip Code San Antonio, TX 78217					\$500.00
		Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp	oou	se (if any)
	Whyte Appe	als, PLLC s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 26/27 Rpt: 30/48
2	FILER NAME Bland, Jane	N. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037146
4	Date 09/13/2024	5 Full name of contributor Williams, Modesta (Ms.)6 Contributor address; City; S)	7	Amount of Contribution (\$) \$5,000.00	
		Midland, TX 79705				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Investor/Oil	& Gas/Ranching		Investor/Oil & Gas/Ran	chir	ng
10		employer/law firm ams Companies, Inc.		11 Law firm of contributor's sp	ous	se (if any)
12	-	s a child, law firm of parent(s) (if	any)	<u> </u>		
			_		_	
	Date 08/23/2024	Full name of contributor Wilson County Republica Contributor address; City; S)		Amount of Contribution (\$) \$500.00
		Adkins, TX 78101				
Contributor's Principal Occupation Contributor's Job Title						
	Contributor's 6	employer/law firm	Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/24/2024 Wilson, Word Contributor address; City; State; Zip Code					\$1,000.00
		Midland, TX 79705				
		Principal Occupation		Contributor's Job Title		
	Oil and Gas			President		<i>(1)</i>
	Self	employer/law firm		Law firm of contributor's sp	oous	se (If any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1 Sch: 27/27 Rpt: 31/48	L:
2	FILER NAME Bland, Jane	N. (The Honorable)			3 Filer ID (Ethics Commissi 00037146	on Filers)
4	Date 08/21/2024	5 Full name of contributor Wozniak, Joseph	out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$100.00
		Richmond, TX 77406				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired		
10	Contributor's e	employer/law firm	11 Law firm of contributor's s	spouse (if any)		
12		s a child, law firm of parent(s) (i	if any)			
	Date 09/26/2024	Full name of contributor Wright Close & Barger, Contributor address; City;			Amount of Contribution (\$)	\$2,500.00
	Contributor's I	Houston, TX 77056 Principal Occupation		Contributor's Job Title		
	Commission of	ттора Сосарацоп		Continuator o cos Tride		
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)			
	Date 09/18/2024	Full name of contributor Wright, Tom Contributor address; City;	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77024				
	Contributor's I Lawyer	Principal Occupation		Contributor's Job Title Partner		
	Wright Close	employer/law firm e & Barger s a child, law firm of parent(s) (i	if any)	Law firm of contributor's s	spouse (if any)	
	ii contributor !	s a ciniu, iaw iirii oi pareni(s) (i	i airy)			

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Le	tt/Awards/Memorials E gal Services ne Instruction Guid			ages	/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed ab	ove)
_	Tatal manus Oct 11 51	<u> </u>					.,	-	_	Files ID	(Ethics Os	ion Filers
1	Total pages Schedule F1: Sch: 1/14 Rpt: 32/48	2		I. (The Honoral	ole)				3	Filer ID 00037146	(Ethics Commiss	on Filers)
4	Date	5	Payee name					•				
	07/01/2024		Anedot, Inc.									
6	Amount (\$)	7	Payee address:	City;	Stato:	Zip Cod	40					
0	* *	 ′	•	-		Zip Cot	Je					
	\$8.30		1340 Poyuras	Street, Suite 1	.770							
			New Orleans,	LA 70112								
8	PURPOSE	(a)	Category (See	Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Accounting/Ba		•	´		Check if travel of	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		· ·	J				Check if Austin,	TX,	officeholder living	g expense	
								Credit Card M	1er	chant Fees		
9	Complete ONLY if direct		Candidate/Office	holder name	0	office soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
_	Date	Г	Payee name									
	07/02/2024		Anedot, Inc.									
		⊢		6''		7: 0						
	Amount (\$)		Payee address	•	•	Zip Coo	ae					
	\$1.30		1340 Poydras	Street, Suite 1	.770							
			New Orleans,	LA 70112								
	PURPOSE	(a)	Category (See	Categories listed at the	top of this sche	edule)	(b)	Description				
	OF		Accounting/Ba			,		Check if travel of	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		J	J				Check if Austin,	TX,	officeholder living	g expense	
								Credit Card M	1er	chant Fees		
	Complete ONLY if direct		Candidate/Office	holder name	0	office soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
H	Date		Payee name									
	07/11/2024		Anedot, Inc.									
		\vdash		City	Ctata	Zin Oct	40					
	Amount (\$)		Payee address	•		Zip Cod	ле					
	\$12.30		1340 Poydras	Street, Suite 1	.770							
			New Orleans,	LA 70112								
	PURPOSE	(a)	Category (See	Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Accounting/Ba			·			outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		•	•				ш		officeholder living	g expense	
								Credit Card M	1er	chant Fees		
L												
	Complete ONLY if direct		Candidate/Office	holder name	0	office soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		nmittee	Gift/Awards/Memorials Legal Services	s Expense	Printing Ex Salaries/W		e /Contract Labor		Travel Out of District OTHER (enter a category not listed above)			
L	Sicult Said Faymont			The Instruction G	uide explains	how to cor	nple	ete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Com	mission Filers)
	Sch: 2/14 Rpt: 33/48		Bland, Jane	N. (The Honor	able)					00037146	6	
4	Date	5	Payee name									
	08/06/2024		Anedot, Inc									
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$20.30		1340 Poydr	as Street, Suite	1770							
			New Orlean	s, LA 70112								
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	hedule)	(b)	Description				
	OF EXPENDITURE		Accounting/			,		Check if travel	outsi	de of Texas. Co	omplete Schedule	г.
	EXPENDITURE							Check if Austin				
								Credit Card N	/ler	chant Fee	S	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office	held	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	08/07/2024		Anedot, Inc									
	Amount (\$)		Payee addre	ss; City;	State	e; Zip Co	de					
	\$60.30		1340 Poydr	as Street, Suite	1770							
			-									
			New Orlean	s, LA 70112								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	hedule)	(b)	Description				
	OF EXPENDITURE		Accounting/					-			omplete Schedule	г.
								Cradit Card N				
								Credit Card N	ner	спапт нее:	5	
_												
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	(Office sou	ght			Office	neld	
L		_										
	Date		Payee name									
	08/13/2024		Anedot, Inc									
	Amount (\$)		Payee addre	•		; Zip Co	de					
	\$6.30		1340 Poydr	as Street, Suite	1770							
			New Orlean	s, LA 70112					_			
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	hedule)	(b)	Description				
	OF EXPENDITURE		Accounting/	Banking				므			omplete Schedule	г.
								Check if Austin				
								Credit Card N	/ier	cnant Fee	S	
	Commission ONU Wife allows	Ļ	Danalidet - 10 "			O#ing	la +			Ctt	h a l al	
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	(Office sou	ynt			Office	nela	
	The straight of the straight of the	•										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 3/14 Rpt: 34/48	Bland, Jane N. (The Honorable) 00037146	
4	Date	5 Payee name	
	08/16/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.30	1340 Poydras Street, Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, Complete Schedule T	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit Card Merchant Fees	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialiture to benefit C/Oi		
	Date	Payee name	
	08/20/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.60	1340 Poydras Street, Suite 1770	
		New Orleans, LA 70112	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit Card Merchant Fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	08/26/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.30	1340 Poydras Street, Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Credit Card Merchant Fees	
		Great Gard Merchant 1 665	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Salaries/\	xpens Vages	se s/Contract Labor		Travel in District Travel Out of Dist OTHER (enter a d	trict category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	Ē					Filer ID	(Ethics Commission Filers)
	Sch: 4/14 Rpt: 35/48	Bland, Jan	e N. (The Honorable)					00037146	
4	Date	5 Payee name							
	08/28/2024	Anedot, Inc							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode				
	\$80.60	1340 Poyd	ras Street, Suite 1770						
		New Orlea	ns, LA 70112						
8	PURPOSE	(a) Category (s	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting					outsic	de of Texas. Comp	olete Schedule T.
	EXPENDITORE	_	_			_		officeholder living	expense
						Credit Card M	/lerc	chant Fees	
9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ıght			Office he	ld
	Date	Payee name							
L	08/30/2024	Anedot, Inc	.						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$70.60	1340 Poyd	ras Street, Suite 1770						
		New Orlea	ns, LA 70112						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting		,				de of Texas. Comp	
	EXPENDITORE	_						officeholder living	expense
						Credit Card M	/lerc	chant Fees	
	0 1. 0			~	<u> </u>			- · ·	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sou	ıght			Office he	ld
	Date	Payee name							
	09/04/2024	Anedot, Inc							
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$60.90	1340 Poyd	ras Street, Suite 1770						
		New Orlea	ns, LA 70112						
	PURPOSE	(a) Category (s	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting		,		Check if travel of		de of Texas. Comp	
	THE LADITORE							officeholder living	expense
						Credit Card M	/iero	chant Fees	
_	Complete ONII V if allows:	Condidet - 10"	iooboldor := = == =	O#: c	10,64			Office I	Id
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ignt			Office he	ılu

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/14 Rpt: 36/48	Bland, Jane N. (The Honorable) 00037146
4	Date	5 Payee name
	09/05/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$84.60	1340 Poydras Street, Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/09/2024	Anedot, Inc.
_	Amount (\$)	Payee address; City; State; Zip Code
	\$50.90	1340 Poydras Street, Suite 1770
	Φ00.90	1340 Poyuras Street, Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit 6/01	•
	Date	Payee name
	09/11/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street, Suite 1770
	,	
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/14 Rpt: 37/48	Bland, Jane N. (The Honorable) 00037146
4	Date	5 Payee name
	09/13/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$244.90	1340 Poydras Street, Suite 1770
L		New Orleans, LA 70112
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
		Great out a Moronant 1 ccs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	09/19/2024	Anedot, Inc.
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.10	1340 Poydras Street, Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Merchant Fees
		Credit Card Welchart 1 ces
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
H	Date	Davida marra
	09/23/2024	Payee name
		Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.60	1340 Poydras Street, Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Merchant Fees
		Cledit Card Merchant Fees
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/14 Rpt: 38/48	Bland, Jane N. (The Honorable) 00037146
4	Date	5 Payee name
	09/25/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$14.60	1340 Poydras Street, Suite 1770
		New Orleans, LA 70112
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
		Ground State More thank 1 555
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payee name
	08/14/2024	Dallas Petroleum Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,806.02	1900 N Akard St, Ste 1400
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Fundraiser Food/Beverages
_	Compulate ONLY if direct	Condidate/Office helds name Office accepts
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/01/2024	Dudley Group LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	815-A Brazo Suite 701
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Services
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
_	Sch: 8/14 Rpt: 39/48	Bland, Jane N. (The Honorable) 00037146
4	Date	5 Payee name
	07/03/2024	Dudley Group LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$657.15	815-A Brazo Suite 701
	, , , ,	
		Austin, TX 78701
8	PURPOSE	
0	OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Printing Thank You Note Envelopes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/01/2024	Dudley Group LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	815-A Brazo Suite 701
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Services
	0 1: 01:17.7.1	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	09/02/2024	Dudley Group LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	815-A Brazo Suite 701
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Services
		Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

ı	Credit Card F dyment	Credit Card Payment The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 9/14 Rpt: 40/48	Bland, Jane N. (The Honorable)	00037146						
4	Date	5 Payee name	-						
	07/15/2024	Fairmont Dallas							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$237.20	1717 N Akard St							
		Dallas, TX 75201							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion						
	OF EXPENDITURE	Travel In District	if travel outside of Texas. Complete Schedule T.						
	LAFENDITORE		if Austin, TX, officeholder living expense						
		Consul	tant Lodging for Campaign Event						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
9	expenditure to benefit C/O		Office field						
_	Data								
	Date 07/15/2024	Payee name Lilly & Company							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$5,000.00	1005 Congress Ave., Ste. 400							
		Austin, TX 78701							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript							
	EXPENDITURE		if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense						
			ising Consulting						
	Complete ONLY if direct	0 11 10 10 11 11	Office held						
		Candidate/Officeholder name Office sought							
l	expenditure to benefit C/OF								
_	expenditure to benefit C/OPDate								
	Date	Payee name							
	Date 08/14/2024	Payee name Lilly & Company							
	Date 08/14/2024 Amount (\$)	Payee name Lilly & Company Payee address; City; State; Zip Code							
	Date 08/14/2024 Amount (\$)	Payee name Lilly & Company Payee address; City; State; Zip Code							
	Date 08/14/2024 Amount (\$)	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701	ion						
	Date 08/14/2024 Amount (\$) \$5,000.00 PURPOSE OF	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Check Check	if travel outside of Texas. Complete Schedule T.						
	Date 08/14/2024 Amount (\$) \$5,000.00	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Descript Check Check	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense						
	Date 08/14/2024 Amount (\$) \$5,000.00 PURPOSE OF	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Descript Check Check	if travel outside of Texas. Complete Schedule T.						
	Date 08/14/2024 Amount (\$) \$5,000.00 PURPOSE OF EXPENDITURE	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Descript Check Fundrai	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ising Consulting						
	Date 08/14/2024 Amount (\$) \$5,000.00 PURPOSE OF	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (Check Fundrai	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense						
	Date 08/14/2024 Amount (\$) \$5,000.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (Check Fundrai	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ising Consulting						
	Date 08/14/2024 Amount (\$) \$5,000.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Lilly & Company Payee address; City; State; Zip Code 1005 Congress Ave., Ste. 400 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (Check Fundrai	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ising Consulting						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/14 Rpt: 41/48 Bland, Jane N. (The Honorable) 00037146 4 Date Payee name 09/16/2024 Lilly & Company 6 Amount (\$) Payee address; City; State; Zip Code \$5,000.00 1005 Congress Ave., Ste. 400 Austin, TX 78701 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Fundraising Consulting** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/23/2024 Moncrief, Kit T. Amount (\$) Payee address; City; State; Zip Code \$2,000.00 4600 Broad Ave. Fort Worth, TX 76107 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Refund **EXPENDITURE** Check if Austin, TX, officeholder living expense Refund Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/23/2024 Moncrief, Richard W. Amount (\$) Payee address: City; State; Zip Code \$1,000.00 1900 Spanish Trail Fort Worth, TX 76107 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Refund **EXPENDITURE** Check if Austin, TX, officeholder living expense Refund Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 11/14 Rpt: 42/48	Bland, Jane N. (The Honorable) 00037146					
4	Date	5 Payee name					
	09/23/2024	Moncrief, Tom O.					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$2,000.00	420 Throckmorton St Ste 550					
		Fort Worth, TX 76102-3765					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Refund Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Refund Contribution					
		return contribution					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
J	expenditure to benefit C/O						
_	Date	Payee name					
	07/05/2024	RightSide Compliance					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$390.00	PO Box 341027					
		Austin, TX 78734					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITORE	Check if Austin, TX, officeholder living expense					
		Compliance Consulting					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/Ol						
	Date	Payee name					
	08/05/2024	RightSide Compliance					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,320.00	PO Box 341027					
	Ψ1,020.00	1 0 20% 041021					
		Austin, TX 78734					
	PURPOSE						
	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Compliance Consulting					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	experientare to beliefit C/O	<u> </u>					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/14 Rpt: 43/48	Bland, Jane N. (The Honorable) 00037146
4	Date	5 Payee name
	09/04/2024	RightSide Compliance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$360.00	PO Box 341027
		Austin, TX 78734
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Compliance Consulting
		Compilative Consulting
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	07/30/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$383.95	PO Box 36611
		Dallas, TX 75235
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Consultant Airfare for Campaign Event
		Consultant Amare for Campaign Event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	08/01/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$242.46	PO Box 36611
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Consultant Airfare for Campaign Event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to belieff 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 13/14 Rpt: 44/48	Bland, Jane N. (The Honorable) 00037146						
4	Date	5 Payee name						
	07/15/2024	Theresa Neal Graphics						
6	Amount (\$) \$86.60	7 Payee address; City; State; Zip Code 2204 Indian Trl Austin, TX 78701						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Consulting Expense						
	EXPENDITORE	Check if Austin, TX, officeholder living expense Graphics Design						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	08/14/2024	Theresa Neal Graphics						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$86.60 2204 Indian Trl							
	DUDDOG	Austin, TX 78701						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Graphics Design						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	09/16/2024	Theresa Neal Graphics						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$303.10	2204 Indian Trl						
		Austin, TX 78701						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Graphics Design						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 14/14 Rpt: 45/48	Bland, Jane N. (The Honorable)	00037146
4	Date	5 Payee name	
	07/22/2024	Truist	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$15.00	611 W 5th St FL 1 Fl 1	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
l			Bank Fee
Ļ			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	'		
l	Date	Payee name	
L	08/21/2024	Truist	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$15.00	611 W 5th St FL 1 Fl 1	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Bank Fee
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
H	Date	Payee name	
	09/23/2024	Truist	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	611 W 5th St FL 1 Fl 1	
l		Austin, TX 78701	
⊢	PURPOSE		Description
	OF	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	, loosanting, Danking	Check if Austin, TX, officeholder living expense
			Bank Fee
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experientare to benefit 6/01	•	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Polling - Gift/Awards/Memorials Expense Printin	Dvernead/Rental Expense Expense g Expense s/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
Credit Card Payment The Instruction Guide explains how to complete this form.						
1 Total pages Schedule G:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)			
Sch: 1/3 Rpt: 46/48	Bland, Jane N. (The Honorable)		00037146			
4 Date	5 Payee name	•				
09/19/2024	Avis					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$166.96	7020 Cedar Springs Rd.					
Reimbursement from						
x political contributions intended	Dallas, TX 75235					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(", " " "	check if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE	Travel In District		check if Austin, TX, officeholder living expense			
		Rental Car for Cam	paign Event			
			011111111111111111111111111111111111111			
9 Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held			
C/OH						
Date	Payee name					
09/16/2024	Enterprise					
Amount (\$)	Payee address; City; State; Zip	Code				
\$71.05	\$71.05 1000 International Blvd					
Reimbursement from						
x political contributions intended	Corpus Christi, TX 78406					
PURPOSE	Category (See Categories listed at the top of this schedule)	Description c	check if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE	Travel In District		check if Austin, TX, officeholder living expense			
		Rental Car for Cam	paign Event			
Complete ONLY & direct	Condidate/Officeholds	Office country	Office held			
expenditure to benefit	Candidate/Officeholder name	Office sought	Office held			
C/OH						
Date	Payee name					
09/19/2024	Residence Inn					
Amount (\$)	Payee address; City; State; Zip	Code				
\$216.87	5509 Deauville Blvd					
Reimbursement from political contributions						
political contributions intended	Midland, TX 79706					
PURPOSE	Category (See Categories listed at the top of this schedule)		check if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE	Travel In District		check if Austin, TX, officeholder living expense			
		Lodging for Campai	gn Event			
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held			
expenditure to benefit	Candidate/Onicendider name	Onice Sought	Office field			
C/OH						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpense Nages/Contract Labor		Travel in District Travel Out of District OTHER (enter a categ	gory not listed above)
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID (Ethics	s Commission Filers)
	Sch: 2/3 Rpt: 47/48		Bland, Jane	N. (The Honora	able)				00037146	
4	Date	5	Payee name							
	08/05/2024		Southwest A	Airlines						
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode			
	\$68.98		PO Box 366	611						
	Reimbursement from political contributions intended		Dallas, TX	75235						
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sche	edule)	(b) Description	=		Texas. Complete Schedule T.
	OF EXPENDITURE		Travel In Di	strict			L	_	eck if Austin, TX, office	eholder living expense
							Airfare for Camp	aigr	n Event	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officel	nolder name			Office sought		Office	e held
	Date		Payee name							
	08/07/2024		Southwest A	Airlines						
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode			
	\$197.96		PO Box 366	611						
	Reimbursement from									
	x political contributions intended		Dallas, TX	75235						
	PURPOSE	T	Category (Se	ee Categories listed at th	ne top of this sche	edule)	Description	Ch	eck if travel outside of	Texas. Complete Schedule T.
	OF EXPENDITURE		Travel In Di	strict				Ch	eck if Austin, TX, office	eholder living expense
	EXI ENDITORE						Airfare for Camp	aigr	n Event	
		Car	ndidate/Officel	nolder name			Office sought		Office	e held
	expenditure to benefit C/OH									
	D-4-	_	_							
	Date 09/14/2024		Payee name Southwest	1 irlinos						
						: -				
	Amount (\$)		Payee addre	-	State;	Zip Co	ode			
	\$282.98		PO BOX 300)11						
	X Reimbursement from political contributions intended		Dallas, TX	75235						
	PURPOSE		Category (Se	ee Categories listed at th	ne top of this sche	edule)	Description	=		Texas. Complete Schedule T.
	OF EXPENDITURE		Travel In Di	strict			L	_	eck if Austin, TX, office	eholder living expense
							Airfare for Camp	aıgr	ı ⊨vent	
	Complete ONU V & direct		adidata (Official				Office according		Ott	, b ald
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officel	noider name			Office sought		Office	e neid
l										

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 3/3 Rpt: 48/48 Bland, Jane N. (The Honorable) 00037146 Date Payee name 09/17/2024 Southwest Airlines Payee address; City; State; Zip Code PO Box 36611 \$298.98 Reimbursement from political contributions Х intended Dallas, TX 75235 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Travel In District **EXPENDITURE** Airfare for Campaign Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/16/2024 William P. Hobby Airport Amount (\$) Payee address; City; State; Zip Code

6 Amount (\$) 8 \$18.08 7800 Airport Blvd. Reimbursement from political contributions Χ Houston, TX 77061 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Travel In District **EXPENDITURE** Airport Parking Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH