# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

	Guide explains how to comp	olete this form.	1 Filer ID (Ethics Commis 00088189	ssion Filers)	2 Total pages fil	ed: :3		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY		
NAME	Mr.	Allan Dwain			Date Received  ELECTRONICA	ALLY FILED		
	NICKNAME	LAST Handley		SUFFIX	10/07/2024			
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked		
OFFICEHOLDER MAILING ADDRESS	P.O. Box 1181				Receipt #	Amount		
Change of Address	Burnet, TX 78611				Date Processed			
					Date Imaged			
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	•			
TREASURER NAME	Mr.	Rodney						
	NICKNAME	LAST		SUFFIX				
		Wing						
6 CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);	APT	/ SUITE #; CITY	'; STA	ATE; ZIP CODE		
TREASURER ADDRESS	103 E. Johnson St.							
(Residence or Business)	Burnet, TX 78611							
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO (512) 756-4543	NE NUMBER E	EXTENSION					
8 REPORT TYPE	January 15	X 30th day before	election	Runoff	15th day after car appointment (office			
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)		
9 PERIOD COVERED	Month Day Year			Month Day	Year			
COVERED	07/01/2024	TH	IROUGH	09/26/20	24			
10 ELECTION	ELECTION DATE			ELECTION TYPE	C Out			
	Month Day Year 11/05/2024		rimary	Runoff	Other			
	11/03/2024	XG	eneral	Special				
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGH	T (if known)			
	State Representative Dis	strict 19 Burnet		State Represen	tative District 19			
	•			•				
	GO TO PAGE 2							

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 33

13 C / OH NAME	14 Filer ID 00088189	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 78.00
	S)	\$ 14,104.00		
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC		<b>\$</b> 11,806.09	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	AST DAY OF THE	\$ 8,837.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 1,150.00
<b>17</b> AFFIDAVIT		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.		
		Mr. A	llan Dwain Handley	
		Signature o	f Candidate or Officeho	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to co	rtify which, witness my hand and seal of office.		
Signature of office	er administering	Printed name of officer administering	Title of office	r administering oath

### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

				3 of 33
<b>18</b> FILER NAM Handley,	ME Allan Dwain (Mr.)	<b>19</b> Filer ID 00088189	(Ethics Commiss	sion Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL	. AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	9,864.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	4,240.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	10,367.59
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	207.06
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,231.44
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 I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 1/15 Rpt: 4/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commissio 00088189	n Filers)
4	Date 08/26/2024	<ul> <li>Full name of contributor  out-of-state PA Abernethy, Robert (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Boerne, TX 78006 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Project Mana			AECOM	,		
	Date 07/21/2024	Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$20.00
	Principal occu	Fredericksburg, TX 78624 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Teacher			FISD			
	Date 07/28/2024	Full name of contributor out-of-state PA Barber, Wendy (Ms.)  Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$200.00
		Blanco, TX 78606					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 08/11/2024	Full name of contributor out-of-state PA Bentch, Sue (Ms.)  Contributor address; City; State; Zip Code  Fredericksburg, TX 78624		)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 07/18/2024	Full name of contributor out-of-state PABlumhorst, Susan (Ms.)  Contributor address; City; State; Zip Code  Alamo Heights, TX 78209	AC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Insurance	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
			'				

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	·m.	1	Total pages Schedule A1: Sch: 2/15 Rpt: 5/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 08/30/2024	<ul><li>5 Full name of contributor [ Boerne Area Democrats</li><li>6 Contributor address; City; Sta</li></ul>		)	7	Amount of Contribution (\$)	\$250.00
_	Deinsinal	Boerne, TX 78006	- Io	Fundamen (On a londonation			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 07/02/2024	Full name of contributor Bray, Laura (Mrs.)  Contributor address; City; Sta				Amount of Contribution (\$)	\$500.00
	Principal occu	Boerne, TX 78006 pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Retired	pation 7 300 title (See instructions)		Employer (See manucuona	P)		
	Date 08/22/2024	Full name of contributor  Breedlove, Karen (Ms.)  Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Briarcliff, TX 78669					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 07/27/2024	Full name of contributor  Brown, Gloria Campos (Mr.  Contributor address; City; Sta  Blanco, TX 78606		)		Amount of Contribution (\$)	\$125.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/07/2024	Full name of contributor  Brown, Gloria Campos (Mr.  Contributor address; City; Sta  Blanco, TX 78606		)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTR	IBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to compl	ete this for	m.	1	Total pages Schedule A1: Sch: 3/15 Rpt: 6/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 09/26/2024	Brown, Gloria Campos (Mrs.)	te PAC (ID#:	)	7	Amount of Contribution (\$)	\$100.00
_	<u> </u>	Blanco, TX 78606		5 1 (0 1 1 1			
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	S)		
	Date 09/23/2024	Cain, Elizabeth (Ms.)  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Not Employe	ed		Not Employed			
	Date 07/28/2024	Full name of contributor out-of-sta  Casparis, Terry  Contributor address; City; State; Zip Code	te PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Austin, TX 78736					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/28/2024	Casparis, Terry		)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/21/2024	Full name of contributor out-of-sta Crosby, Sandy (Ms.)  Contributor address; City; State; Zip Code	te PAC (ID#:	)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			1				

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 4/15 Rpt: 7/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)				3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 09/07/2024	<ul><li>5 Full name of contributor</li><li>Diamant, Alice (Ms.)</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		)	7	Amount of Contribution (\$)	\$50.00
_	Deireirel	Castroville, TX 78009		_	Foundation (October to the street)			
8	Manager	pation / Job title (See Instruction	5)	9	Employer (See Instructions FitWell	5)		
	Date 07/20/2024	Full name of contributor Dollar, Susan (Dr.) Contributor address; City; S			)	•	Amount of Contribution (\$)	\$50.00
	Principal occu	Boerne, TX 78006 pation / Job title (See Instruction:	s)		Employer (See Instructions	<u>;)</u>		
	Retired	patient, cos title (coe metracion	-,		Employer (Geo moradone)	-,		
	Date 08/01/2024	Full name of contributor  Dunning, Elizabeth (Ms.)  Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code		)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78752						
	Principal occu Not Employe	pation / Job title (See Instructional	s)		Employer (See Instructions Not Employed	5)		
	Date 08/04/2024	Full name of contributor Fuentes, R A (Mr.)  Contributor address; City; S  Boerne, TX 78006			)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instruction	5)		Employer (See Instructions	5)		
	Date 07/29/2024	Full name of contributor Goodman, Margaret (Ms. Contributor address; City; S Blanco, TX 78606					Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instruction	5)		Employer (See Instructions Not Employed	s)		
			l					

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 5/15 Rpt: 8/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 09/10/2024	<ul><li>5 Full name of contributor [Goodwin, Vikki (Ms.)</li><li>6 Contributor address; City; Star</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
_		Austin, TX 78739	1				
8	Principal occu Real Estate	pation / Job title (See Instructions)	9	Employer (See Instructions Self: Goodwin & Goodw		Real Estate	
	Date 07/12/2024	Full name of contributor [ Greathouse, Rebecca (Ms. Contributor address; City; Star	·	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Blanco, TX 78606 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Retired	,		Retired			
	Date 07/28/2024	Full name of contributor [ Green, Michael (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Blanco, TX 78606					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions None	5)		
	Date 07/28/2024	Full name of contributor  Guin, Kristi (Ms.)  Contributor address; City; State  Bellevue, WA 98008	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$200.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>(</u>		
	Date 07/28/2024	Full name of contributor  Hamm, Susan (Ms.)  Contributor address; City; Star  Johnson City, TX 78636	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to	o complete this forn	1.	1	Total pages Schedule A1: Sch: 6/15 Rpt: 9/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commission 00088189	on Filers)
4	Date 09/26/2024	6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$20.00
8		Johnson City, TX 78636 pation / Job title (See Instructions)		Employer (See Instructions Risa Ranch	)		
	Panch Mana Date 08/04/2024	Full name of contributor  Henning, Kevin (Mr.)  Contributor address; City; State	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$150.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 08/30/2024	Full name of contributor Highland Lakes Democratic Contributor address; City; State		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Marble Falls, TX 78654 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/28/2024	Full name of contributor laci, Michelle (Ms.)  Contributor address; City; State  Round Rock, TX 78681				Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Date 08/10/2024	Full name of contributor Imler, Robert (Mr.) Contributor address; City; State Boerne, TX 78006	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 7/15 Rpt: 10/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)		3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 09/19/2024	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#: Jackson, Jenny (Ms.)</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Marble Falls, TX 78654 pation / Job title (See Instructions)	9 Employer (See Instructions	<i>s)</i>		
	Retired	sation, our title (see instructions)	2 Employer (See moraduloris	"		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_Keller, Kathleen (Ms.)  Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$100.00
	Princinal occu	Kerrville, TX 78028 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Retired	sation, our title (occ manactions)	Employer (See mondener	"		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#: Kish, Bette (Mrs.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$35.00
		Burnet, TX 78611				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/01/2024	Full name of contributor out-of-state PAC (ID#:_Langfeld, Chris  Contributor address; City; State; Zip Code  Dripping Springs, TX 78620			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions) d	Employer (See Instructions Not Employed	5)		
	Date 07/28/2024	Full name of contributor out-of-state PAC (ID#:_Langford, Randy (Mr.)  Contributor address; City; State; Zip Code  Austin, TX 78744			Amount of Contribution (\$)	\$200.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/15 Rpt: 11/33	
2	FILER NAME Handley, Alla	n Dwain (Mr.)		3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 09/19/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$200.00
_		Burmet, TX 78611	10 = 1 (0 1 1 1			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/20/2024	Full name of contributor out-of-state PAC (ID#:_ Layton, Peg (Mrs.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringing agg	Boerne, TX 78006	Employer (Coo Instructions	<u></u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 07/08/2024	Full name of contributor out-of-state PAC (ID#:_Luck, G. Thomas (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Frederickburg, TX 78624	_			
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_Luck, G. Thomas (Mr.)  Contributor address; City; State; Zip Code  Frederickburg, TX 78624			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/08/2024	Full name of contributor out-of-state PAC (ID#:_Luck, G. Thomas (Mr.)  Contributor address; City; State; Zip Code  Frederickburg, TX 78624			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 9/15 Rpt: 12/33	
2	FILER NAME Handley, Alla	ın Dwain (Mr.)		3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 09/20/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
_		Bertram, TX 78605				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/27/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$40.00
	Principal occur	Dallas, TX 75204 pation / Job title (See Instructions)	Employer (See Instructions	·/		
	Artist	oution / Job title (See manuchons)	Self	')		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		Spicewood, TX 78669				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$500.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#: Mohan, Karen (Mrs.)  Contributor address; City; State; Zip Code  Burnet, TX 78611	)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	 ;)		

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1	E <b>A1</b>	
	The Instruction Guide explains how to complete this form.				Schedule A1: Rpt: 13/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)		3 Filer ID (E 00088189	thics Commission Filers)	
4	Date 07/02/2024  5 Full name of contributor  out-of-state PAC (ID#:) North Shore Democrats  6 Contributor address; City; State; Zip Code		7 Amount of C	Contribution (\$) \$126	.00	
8	Principal occu	Lago Vista, TX 78645 pation / Job title (See Instructions)	9 Employer (See Instructions	15)		
•	i iliopai occa	saudity dos une (doe mondono)	• Employer (eee modudation			
	Date 07/21/2024	Full name of contributor out-of-state PAC (II Ochoa, Lora Anne (Ms.) Contributor address; City; State; Zip Code	D#:)	Amount of C	Contribution (\$) \$20	.00
		Lago Vista, TX 78645				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	าร)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (II Ochoa, Lora Anne (Ms.)  Contributor address; City; State; Zip Code	D#:)	Amount of C	Contribution (\$) \$20	.00
		Lago Vista, TX 78645				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 09/21/2024	Full name of contributor out-of-state PAC (II Ochoa, Lora Anne (Ms.)  Contributor address; City; State; Zip Code  Lago Vista, TX 78645	D#:)	Amount of C	Contribution (\$) \$20	.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (II Overton, David (Mr.)  Contributor address; City; State; Zip Code  Austin, TX 78723	D#:)	Amount of C	Contribution (\$) \$100	.00
	Principal occu Partner	pation / Job title (See Instructions)	Employer (See Instructions Opus Faveo Innovation			
			1 .			

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUL	_E <b>A1</b>	
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 11/15 Rpt: 14/33			
2	FILER NAME Handley, Alla	an Dwain (Mr.)				3	Filer ID (Ethics Commission 00088189	n Filers)	
4	The Date of Contributor out-of-state PAC (ID#:)  Patton, Amanda (Ms.)  Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00					
8	Principal occu	Cottonwood Shores, TX pation / Job title (See Instruction		ο	Employer (See Instructions				
•	Director		5)		Third Stage Consulting	·)			
	Date 09/17/2024	Full name of contributor Perez, Donna (Ms.) Contributor address; City; S			)		Amount of Contribution (\$)	\$100.00	
	Boerne, TX 78006  Principal occupation / Job title (See Instructions)  Employer (See Instruction					()			
	Retired	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,			
	Date 09/06/2024	Full name of contributor Peugh, Bobby (Mr.)  Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00	
		Boerne, TX 78006							
	Principal occu Not Employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions Not Employed	5)			
	Date 07/20/2024	Full name of contributor Pyle, Suanne (Ms.)  Contributor address; City; S  Boerne, TX 78006			)		Amount of Contribution (\$)	\$50.00	
	Principal occu Not Employe	pation / Job title (See Instruction: ed	5)		Employer (See Instructions Not Employed	i)			
	Date Full name of contributor out-of-state PAC (ID#:)  Pyle, Suanne (Ms.)  Contributor address; City; State; Zip Code  Boerne, TX 78006			Amount of Contribution (\$)	\$50.00				
	Principal occu Not Employe	pation / Job title (See Instruction: ed	5)		Employer (See Instructions Not Employed	i)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E <b>A1</b>	
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 12/15 Rpt: 15/33		
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commissio 00088189	n Filers)	
4	Date 08/05/2024  Rob, Lilieholm (Mr.)  6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$75.00				
8	Principal occu	Hampden, ME 04444 pation / Job title (See Instructions)	١٥	Employer (See Instructions	<u>''</u>			
•	Professor	pation / Job title (See Instructions)	٩	University of Maine	·)			
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID Saval, Maureen (Ms.)  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$50.00	
	Dringing agg	Leander, TX 78641	_	Employer (Co. Instructions	<u></u>			
	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	o)			
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID Shell & Associates, Attorneys  Contributor address; City; State; Zip Code	#:		•	Amount of Contribution (\$)	\$500.00	
		Marble Falls, TX 78654						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 07/28/2024	Full name of contributor out-of-state PAC (ID Smith, Carole (Ms.)  Contributor address; City; State; Zip Code  Johnson City, TX 78636				Amount of Contribution (\$)	\$100.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 09/13/2024	Full name of contributor out-of-state PAC (ID Staerkel, Mark (Mr.)  Contributor address; City; State; Zip Code  Leander, TX 78641	#:	)		Amount of Contribution (\$)	\$50.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			
	. tot Employe							

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 13/15 Rpt: 16/33		
2	FILER NAME Handley, Alla	n Dwain (Mr.)			3	Filer ID (Ethics Commissio 00088189	n Filers)	
4	Date 08/04/2024  5 Full name of contributor out-of-state PAC (ID#:) Stevens, Sheree (Ms.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$75.00			
_		Boerne, TX 78006						
8	Principal occu Retired	pation / Job title (See Instructions)	<b>9</b> Em	ployer (See Instructions	)			
	Date 09/20/2024	Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$40.00	
	Bertram, TX 78605  Principal occupation / Job title (See Instructions)  Attorney  Employer (See Instruction				)			
	Date 07/08/2024	Full name of contributor out-of-state P Sumrall, Paul (Mr.)  Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$250.00	
	Principal occu	Johnson City, TX 78636  pation / Job title (See Instructions)	Em	ployer (See Instructions	)			
	Home Builde	r	НС	DB LLC				
Date Full name of contributor out-of-state PAC (ID#:) 07/28/2024 Sumrall, Paul (Mr.)  Contributor address; City; State; Zip Code		,		Amount of Contribution (\$)	\$500.00			
	Principal occu Home Builde	Johnson City, TX 78636  pation / Job title (See Instructions)		nployer (See Instructions	)			
	Date O7/28/2024 Full name of contributor out-of-state PAC (ID#:) Thomas, Brenda (Ms.) Contributor address; City; State; Zip Code  Johnson City, TX 78636			Amount of Contribution (\$)	\$100.00			
	Principal occu Retired	oation / Job title (See Instructions)	Em	nployer (See Instructions	)			
			•					

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 14/15 Rpt: 17/33	
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commission 00088189	n Filers)
4	Date 08/12/2024  5 Full name of contributor out-of-state PAC (ID#:) Thornton, Roseann (Ms.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00		
_	<u> </u>	Marble Falls, TX 78654		5 1 (2 1 1 1			
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 07/16/2024	Full name of contributor Tucker, Byron (Mr.) Contributor address; City; State				Amount of Contribution (\$)	\$100.00
	Marble Falls, TX 78654  Principal occupation / Job title (See Instructions) Employer (See Instruction				<u> </u>		
Not Employed Not Employed		Not Employed					
Date Full name of contributor out-of-state PAC (ID#:)  07/27/2024 Voelker, Kevin (Mr.)  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$50.00		
		Spring Branch, TX 78070					
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions UT Health San Antonio	5)		
	Date 07/21/2024	Full name of contributor  Wakil, Sammie (Ms.)  Contributor address; City; State  Leander, TX 78641				Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Date  O8/05/2024  Full name of contributor out-of-state PAC (ID#:)  Watts, Billie (Ms.)  Contributor address; City; State; Zip Code  Boerne, TX 78006			Amount of Contribution (\$)	\$500.00		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			·				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E <b>A1</b>	
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 15/15 Rpt: 18/33		
2	FILER NAME Handley, Alla	an Dwain (Mr.)			3	Filer ID (Ethics Commission 00088189	n Filers)	
4	Date 08/05/2024  S Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$500.00				
8	Principal occur	Boerne, TX 78006 pation / Job title (See Instructions)	la	Employer (See Instructions	·/			
0	Not Employe			Not Employed	)			
	Date 07/22/2024	Full name of contributor  Wells, Meghan (Ms.)  Contributor address; City; State;		)		Amount of Contribution (\$)	\$25.00	
	Deinsinal assu	Austin, TX 78723		Frankrian (Cookarationa	<u></u>			
	Principal occupation / Job title (See Instructions) Employer (See Instructions  Arts Manager City of Austin		5)					
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$50.00			
		Chicago, IL 60647						
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Conduent	s)			
Date Full name of contributor out-of-state PAC (ID#:)  07/20/2024 Wine, Andy (Mr.)  Contributor address; City; State; Zip Code  Boerne, TX 78006		,		Amount of Contribution (\$)	\$100.00			
	•	pation / Job title (See Instructions) ud Consultant/Engineer		Employer (See Instructions Trace3 Inc	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  09/22/2024 Wolfard, Eileen (Ms.)  Contributor address; City; State; Zip Code  Lago Vista, TX 78645			Amount of Contribution (\$)	\$25.00			
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

Tla a las adams	estion Cuide combine bounts commiste this f	1 Total pages Schedule A2:				
i ne instru	iction Guide explains how to complete this f	Sch: 1/1 Rpt: 19/33				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
Handley, All	lan Dwain (Mr.)		00088189			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution			
09/17/2024	Blue Horizon Texas		contribution (\$) description			
	7 Contributor address; City; State; Zip Code		\$100.00   Strategy session, endorsement, social			
			media, email promotion	I		
			:			
	San Antonio, TX 78278		Check if travel outside of Texas. Complete Schedul	e T.		
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-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 contributo	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			-		
10 ii contributor	is a clinia, law little of parchi(s) (if any) (i of coopies, i.e.)					
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description			
09/18/2024	Texas Hill Country Democrats		contribution (\$) description \$4,140.00   BEM Productions taping	a		
	Contributor address; City; State; Zip Code		of Field Orientation	9		
			Session at:			
	Spinowood TV 79660		i Pecan Street Brewing			
Dringinal occu	Spicewood, TX 78669  upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	L Check if travel outside of Texas. Complete Schedul -JUDICIAL) (See instructions)	e T.		
Principal occi	Apadion 7 300 title (FOR NON-30DICIAL) (See instituctions)	Employer (FOR NON	-JODICIAL) (See Institutions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)				
Contributorio	employed from (FOD HIDICIAL)	Low firm of contribute	orlo anguas (if any) (FOR HIDICIAL)			
Contributors	employer/law firm (FOR JUDICIAL)	Law IIIII of Contribute	n's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
				$\dashv$		

#### SCHEDULE F1

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

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/9 Rpt: 20/33	Handley, Allan Dwain (Mr.)	00088189
4 Date	5 Payee name	-
07/05/2024	Ace Printing	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$2,008.04		
	Austin, TX 78745	
8 PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Yard signs
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/C	JH	
Date	Payee name	
07/31/2024	ActBlue	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$75.74		
, -		
	Somerville, MA 02144	
DUDDOCE	1	100
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
		July Service fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/C	ЭН	
Date	Payee name	
08/31/2024	ActBlue	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$63.86		Suc .
Ψ00.00	1000044140	
	Compresillo MA 02144	
	Somerville, MA 02144	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		August Service fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/C		

#### 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

	Credit Card Payment	The Instruction Guide explains how to comp	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/9 Rpt: 21/33	Handley, Allan Dwain (Mr.)		00088189
4	Date	5 Payee name		•
	09/26/2024	ActBlue		
6	Amount (\$)	7 Payee address; City; State; Zip Code	e	
	\$68.99	PO Box 44146		
		Somerville, MA 02144		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Fees	ļ	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				September Service fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
9	expenditure to benefit C/OI		ııı	Office field
	Date	Burner		
	08/04/2024	Payee name Boerne Area Democrats		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$40.00	PO Box 2133		
		D TV 70000		
		Boerne, TX 78006		
	PURPOSE OF		b) '	Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Political contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	08/31/2024	Bumper Active		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$237.54	1045 A.Reinli St		
		Austin, TX 78723		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE			Check if Austin, TX, officeholder living expense
				Bumper stickers
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	IL	Office field
_				

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

Credit Card Payment	The Instruction Guide explains how to c	·	ete this form.
1 Total pages Schedule F1:	•		3 Filer ID (Ethics Commission Filers)
Sch: 3/9 Rpt: 22/33	Handley, Allan Dwain (Mr.)	00088189	
4 Date	5 Payee name		<u> </u>
08/12/2024	FedEx Office		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$139.64	7900 Legacy Dr		
	Plano, TX 75024		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE			Check if Austin, TX, officeholder living expense
			Map for Johnson City, TX event
O Complete ONLY if direct	Condidate/Officeholder reves		Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so OH	ugnt	Office held
Date	Payee name		
08/31/2024	J&M Productions		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$1,268.00	PO Box 1181		
	Burnet, TX 78611		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE			Check if Austin, TX, officeholder living expense
			Sound system setup for September 9, 2024 meeting
Complete ONLY if divest	Condidate/Officeholder reves		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so OH	ugnt	Office held
Date	Payee name		
09/10/2024	McClanahan, Tom (Mr.)		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$585.00	15091 Dorothy Dr		
	Austin, TX 78734		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE			Check if Austin, TX, officeholder living expense
			Installing political signs in Lake Travis area
Operation Children	Our distance (Office healthour		0#
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ugnt	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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┰	Total pages Schedule F1:	
1	Sch: 4/9 Rpt: 23/33	2 FILER NAME Handley, Allan Dwain (Mr.)  3 Filer ID (Ethics Commission Filers) 00088189
4	Date	5 Payee name
	07/02/2024	Office Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$68.71	1311 Mormon Mill Rd
		Marble Falls, TX 78654
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Stamps, paper
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Davies name
		Payee name
	09/05/2024	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$166.55	1311 Mormon Mill Rd
		Marble Falls, TX 78654
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Easel, totes, clipboards
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	09/09/2024	Pecan Street Brewing
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,286.39	106 W Pecan
		Johnson City, TX 78636
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Strategy presentation Jonson City, TX
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorare to benefit C/OI	1

#### 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 Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
۰	T.1 6111=:	1
1	Total pages Schedule F1:	
	Sch: 5/9 Rpt: 24/33	Handley, Allan Dwain (Mr.) 00088189
4	Date	5 Payee name
	09/16/2024	Progress Texas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	PO Box 132162
		Dallas, TX 75313
8	PURPOSE	1
°	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made Ry  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
H	Date	Payee name
	07/01/2024	Simon, Arthur (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	210 Suttles Ave
		San Marcos, TX 78666
	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
		Field Manager Invoice #1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	07/17/2024	Simon, Arthur (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	210 Suttles Ave
		San Marcos, TX 78666
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Field Manager Invoice #2
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorale to belief C/Of	1

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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/Officenoider/Politica 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: 6/9 Rpt: 25/33	Handley, Allan Dwain (Mr.) 00088189						
4	Date	5 Payee name						
	07/17/2024	Simon, Arthur (Mr.)						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$200.00	210 Suttles Ave						
		San Marcos, TX 78666						
8	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						
		Field Manager						
		Invoice #3						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
_	Date	Payee name						
	08/02/2024	Simon, Arthur (Mr.)						
Amount (\$) Payee address; City; State; Zip Code								
	\$400.00 210 Suttles Ave							
		San Marcos, TX 78666						
	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						
		Field Manager						
		Invoice #4						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·						
-	Date	Daves name						
	09/16/2024	Payee name Simon, Arthur (Mr.)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$400.00	210 Suttles Ave						
		San Marcos, TX 78666						
	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						
		Field Manager						
		Invoice #5						
	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 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 Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:							
	Sch: 7/9 Rpt: 26/33	Handley, Allan Dwain (Mr.)						
4	Date	5 Payee name						
	09/16/2024	Simon, Arthur (Mr.)						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$800.00	210 Suttles Ave						
		San Marcos, TX 78666						
8	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						
		Field Manager						
		Invoice #6						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
_	Date	Payee name						
	09/22/2024	Simon, Arthur (Mr.)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$400.00	210 Suttles Ave						
	4-00.00 Zio Sulles / We							
		San Marcos, TX 78666						
	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 Field Manager								
		Invoice #7						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
	Date	Payee name						
	07/06/2024	Summer Moon						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$11.52	15511 W State Hwy 71						
		Austin, TX 78738						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense  Meeting with Arthur Simon						
		Wiccumg With Aurun Simon						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/9 Rpt: 27/33	Handley, Allan Dwain (Mr.) 00088189
4	Date	5 Payee name
	07/19/2024	Synchrony Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$285.06	PO Box 71711
		Philadelphia, PA 19176
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Credit Card Payment Credit Card Payment
		Check if Austin, TX, officeholder living expense  Payment of credit card bill
		ayment of credit card bill
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Data	David and the second se
	Date	Payee name
	09/03/2024	Synchrony Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$649.36	PO Box 71711
		Philadelphia, PA 19176
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Credit Card Payment Credit Card Payment
		Check if Austin, TX, officeholder living expense  Payment of credit card bill
		Fayment of credit card bill
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	09/24/2024	Synchrony Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$677.43	PO Box 71711
		Philadelphia, PA 19176
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payment of credit card bill
		rayment of cledit card bill
_	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
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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 9/9 Rpt: 28/33	Handley, Allan Dwain (Mr.)		00088189
4	Date	5 Payee name		<u> </u>
	09/26/2024	Untamed Wine Estate		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$17.88	202 RR 1320		
		Johnson City, TX 78636		
8	PURPOSE		(h)	Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(0)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Deverage Expense		Check if Austin, TX, officeholder living expense
				Blanco County Meet and Greet
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	4		
	Date	Payee name		
	09/26/2024	Untamed Wine Estate		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$17.88	202 RR 1320		
	<b>4</b> 200			
		Johnson City, TX 78636		
	DUDDOOF		(I-)	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(a)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
				Blanco County Meet and Greet
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	1		
ı				

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 1/2 Rpt: 29/33	Handley, Allan Dwa	ain (Mr.)	00088189					
4 CREDIT CARD ISSUER	Name of fina Synchro	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	r Paid			
	\$31.39	09/05/2024						
7 PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code	
	Synchrony Bank		PO Box 71	.711				
			<u> </u>	ia, PA 19176				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti					
X Political	Fees	or the contocally	Septembe	r interest expen	se			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issue	r Paid			
	\$41.00	08/28/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	Synchrony Bank	PO Box 71	711					
	( ) 2 .		<u> </u>	ia, PA 19176				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	(b) Description Late fee						
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH			_					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	r Paid			
	\$36.79	07/05/2024						
PAYEE	(a) Payee name	ı	(b) Payee a	ddress;	City,	State,	Zip Code	
		PO Box 71711						
	Synchrony Bank							
			Philadelph	ia, PA 19176				
PURPOSE OF	(b) Descripti	on st expense						
	EXPENDITURE (See Categories listed at the top of this schedule)  Fees							
X Political								
Non-Political	(C) Check if travel outside		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
	1							

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (E	3 Filer ID (Ethics Commission Filers)					
Sch: 2/2 Rpt: 30/33	Handley, Allan Dwa	ain (Mr.)		00088189				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	<b> </b> \$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
	\$33.92	08/05/2024						
7 PAYEE	(a) Payee name Synchrony Bank		(b) Payee address; PO Box 71711	City,	State,	Zip Code		
			Philadelphia, PA 1917	76				
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description					
EXPENDITURE	Fees	of this schedule)	August interest expen	ise				
X Political								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
	\$31.98	08/12/2024						
PAYEE	(a) Payee name	l .	(b) Payee address;	City,	State,	Zip Code		
	SMPT.com		2 Gurdwara Rd Suite 300 Ottawa Ontario K2E1	A2 Canada				
PURPOSE OF	(a) Category		(b) Description	AZ Canada				
EXPENDITURE	(See Categories listed at the top		E-mail service					
X Political	Office Overhead/Rent	tal Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
	\$31.98	07/11/2024						
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code		
			2 Gurdwara Rd					
	SMPT.com		Suite 300					
			Ottawa Ontario K2E1	A2 Canada				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	E-mail service					
X Political	- Cinoc Overnoud/Nem	LA EXPONSO						
Non-Political	(c) Check if travel outside	Check if Austi	n, TX, officeholder living	expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held					

### 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		nmittee	Legal Service				expense Wages/Contract Labor  complete this form.		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME						3	Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 31/33		Handley, Al	lan Dwair	(Mr.)					00088189
4	Date	5	Payee name							
	07/28/2024		Bluehost							
6	Amount (\$)	7	Payee addre	ss; City	y;	State;	Zip Co	ode		
	\$2.69		5335 Gate I	⊃kwy.						
	Reimbursement from political contributions intended	,	Jacksonville	e, FL 3225	56					
8	PURPOSE	(a)	Category (Se	ee Categories	listed at the to	p of this sche	edule)	(b) Description		Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	'	Web hosting	g					С	Check if Austin, TX, officeholder living expense
								Web hosting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Officel	nolder nam	e			Office sought		Office held
	Date		Payee name							
	08/28/2024		Bluehost							
	Amount (\$)		Payee addre	ss; City	y;	State;	Zip Co	ode		
	\$2.69		5335 Gate I	Pkwy.						
	Reimbursement from			-						
	political contributions intended		Jacksonville	e, FL 3225	56					
	PURPOSE		Category (Se	ee Categories	listed at the to	p of this sche	edule)	Description		Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	'	Web hosting	g					Шс	Check if Austin, TX, officeholder living expense
								Web hosting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	<u>l</u> Can	didate/Officel	nolder nam	e			Office sought		Office held
	Date		Payee name							
	07/20/2024	ı	Burnet Cou	nty Demo	cratic Par	ty				
H	Amount (\$)	⊢	Payee addre				Zip Co	nde		
	\$25.00	ı	PO Box 171		,	,				
	Reimbursement from			-						
	political contributions intended		Marble Falls	s, TX 786	54					
	PURPOSE		Category (Se	ee Categories	listed at the to	p of this sche	edule)	Description	_	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Contribution			•			ш	Check if Austin, TX, officeholder living expense
			Candidate/0	icehold	er/Politica	ıı Comm	ittee	Political contribu	utior	n
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Officel	nolder nam	e			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/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
-	Sch: 2/3 Rpt: 32/33	Handley, Allan Dwain (Mr.)	00088189
4	Date	5 Payee name	
	08/20/2024	Burnet County Democratic Party	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$25.00	PO Box 171	
	Reimbursement from political contributions intended	Marble Falls, TX 78654	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense
	EXPENDITURE	Candidate/Officeholder/Political Committee Political contribu	tion
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/20/2024	Burnet County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	PO Box 171	
	Reimbursement from political contributions intended	Marble Falls, TX 78654	
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Political contribu	Check if Austin, TX, officeholder living expense
	Operation ONLY if all and	One distribute (Office Includes a second	Office healt
	expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Γ	Date	Payee name	
	07/31/2024	Handley, Allan Dwain (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$473.69	PO Box 1181	
	Reimbursement from political contributions intended	Burnet, TX 78611	
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel In District	Check if Austin, TX, officeholder living expense
		Mileage, 707 mil	es@\$.67
	Complete <u>ONLY</u> 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 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: 33/33 Handley, Allan Dwain (Mr.) 00088189 Date Payee name 08/31/2024 Handley, Allan Dwain (Mr.) 6 Amount (\$) Payee address; City; State; Zip Code PO Box 1181 \$219.09 Reimbursement from political contributions intended Х Burnet, TX 78611 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (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** Mileage, 327 miles@\$.67 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/26/2024 Handley, Allan Dwain (Mr.) Amount (\$) Payee address; City; State; Zip Code \$458.28 PO Box 1181 Reimbursement from political contributions Χ Burnet, TX 78611 intended PURPOSE Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Travel In District **EXPENDITURE** Mileage, 684 miles@\$.67 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH