

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | |
|---|---|---|---|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00080253 | 2 Total pages filed: 26 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Standard D. | MI MI | OFFICE USE ONLY |
| | NICKNAME Stan | LAST Lambert | SUFFIX | |
| ELECTRONICALLY FILED 10/06/2024 | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 3752 Abilene, TX 79604 | | | Date Hand-delivered or Date Postmarked |
| | | | | Receipt # Amount |
| | | | | Date Processed |
| | | | | Date Imaged |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mrs. | FIRST Becky | MI MI | |
| | NICKNAME | LAST Rentz | SUFFIX | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 18 Pinehurst Abilene, TX 79606 | | | |
| | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | |
| | (325) | 280-6407 | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | | | |
| | <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | |
| 9 PERIOD COVERED | Month Day Year 07/01/2024 | THROUGH | | Month Day Year 09/26/2024 |
| 10 ELECTION | ELECTION DATE Month Day Year 11/05/2024 | | ELECTION TYPE | |
| | | | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | |
| 11 OFFICE | OFFICE HELD (if any) State Representative District 71 | | 12 OFFICE SOUGHT (if known) State Representative District 71 | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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|--|---|
| 13 C / OH NAME Lambert, Standard D. (The Honorable) | 14 Filer ID (Ethics Commission Filers) 00080253 |
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| | | |
|---|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME Texas Alliance for Life PAC |
| | | COMMITTEE ADDRESS 8000 Centre Park Drive Ste. 380 Austin, TX 78754 |
| | | COMMITTEE CAMPAIGN TREASURER NAME Shaw, James |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS 4505 Corazon Cv Round Rock, TX 78681 |

| | | | |
|--------------------------------|---|----|-----------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 42,985.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 2,950.75 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 24,177.57 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 84,473.21 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFIDAVIT

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

 The Honorable Standard D. Lambert
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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|--|---|---|
| 18 FILER NAME Lambert, Standard D. (The Honorable) | | 19 Filer ID (Ethics Commission Filers) 00080253 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 42,985.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 23,101.31 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 538.13 |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 538.13 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/14 Rpt: 4/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kay (Mrs.) | 7 Amount of Contribution (\$) |
| | 6 Contributor address; City; State; Zip Code Abilene, TX 79606 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archibald, Norman (Mr.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79601 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batson, Mark (Mr.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79605 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Jane (Ms.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79604 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beer Alliance of Texas Political Action Committee | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/14 Rpt: 5/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Jennifer (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79601 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bessent, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birchum, Brad (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79606 | Amount of Contribution (\$) \$55.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackridge <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannan, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brest, Maegan (Ms.) 6 Contributor address; City; State; Zip Code Abilene, TX 79602 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruntmeyer, Eric (Mr.) Contributor address; City; State; Zip Code Abilene, TX 79698 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Ron (Mr.) Contributor address; City; State; Zip Code Abilene, TX 79606 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Randy (Mr.) Contributor address; City; State; Zip Code Austin, TX 78763 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cammack & Strong PC Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnohan, Kristen (Ms.) | 7 Amount of Contribution (\$) |
| | 6 Contributor address; City; State; Zip Code Abilene, TX 79606 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Larry (Mr.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79603 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coates, Neal (Mr.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79601 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comerica Incorporated Political Action Committee | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Dallas, TX 75201 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellinger, Joy (Mrs.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79602 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Focused Advocacy Political Action Committee <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulham, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubbs, Gary (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Denise (Mrs.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79606 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00236489) Koch Inc Political Action Committee <hr/> Contributor address; City; State; Zip Code Wichita, KS 67220 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Debbie (Mrs.) | 7 Amount of Contribution (\$) |
| | 6 Contributor address; City; State; Zip Code Abilene, TX 79605 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langston, Linda (Ms.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79601 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Joel Wilks PLLC | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79605 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Light, Karen (Mrs.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79606 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Gosselink Rochelle & Townsend PC | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longbow Consulting Partners LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Nathan (Mr.) <hr/> Contributor address; City; State; Zip Code Buffalo Gap, TX 79508 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matz and Company LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78703 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Pearl (Ms.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79603 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyers, Lucas (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey Political Action Committee <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) One Gas, Inc Political Action Committee <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74103 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00215384) Oneok Employees Political Action Committee <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74102 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Miles (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79604 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of the Independent Insurance Agents of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78768 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rentz, Jack (Mr.) | 7 Amount of Contribution (\$) |
| | 6 Contributor address; City; State; Zip Code Abilene, TX 79606 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Lewis & Associates | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sepehri, John (Mr.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Austin, TX 78731 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward (Mr.) | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Abilene, TX 79601 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern Glazer's Political Action Committee of Texas | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Statler, Charles (Mr.) | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code Abilene, TX 79605 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Emily (Ms.) | Amount of Contribution (\$) \$30.00 |
| Contributor address; City; State; Zip Code Abilene, TX 79605 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stovall, Steve (Mr.) | Amount of Contribution (\$) \$60.00 |
| Contributor address; City; State; Zip Code Abilene, TX 79605 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform Political Action Committee | Amount of Contribution (\$) \$10,000.00 |
| Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Aggregates & Concrete Assoc Political Action Committee | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Round Rock, TX 78681 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Alliance for Life Political Action Committee <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78754 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Crane Owners Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78716 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Chiropractic Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78703 | Amount of Contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/14 Rpt: 15/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 08/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Realtors Political Action Committee | 7 Amount of Contribution (\$) \$2,500.00 |
| 6 Contributor address; City; State; Zip Code Austin, TX 78768 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association Political Action Committee | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jamie (Mr.) | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code Abilene, TX 79606 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Union Pacific Corporation Fund for Effective Government | Amount of Contribution (\$) \$2,000.00 |
| Contributor address; City; State; Zip Code Washington, DC 20004 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wertheim, Paul (Mr.) | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Abilene, TX 79602 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/14 Rpt: 16/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Gwen (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79606 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Cameron (Mr.) <hr/> Contributor address; City; State; Zip Code Tuscola, TX 79562 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Allen (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wylie, Angie (Ms.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/14 Rpt: 17/26 |
| 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 09/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Tim (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79601 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/7 Rpt: 18/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
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|-----------------------------|-------------------------------|
| 4 Date 09/18/2024 | 5 Payee name Anedot |
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|---------------------------------|--|
| 6 Amount (\$) \$38.41 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Ste. 1770 New Orleans, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees (9/18/2024 - 9/24/2024) |
|---------------------------------|---|---|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|---|
| Date 07/18/2024 | Payee name Campaign Reporting Solutions, LLC |
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|---------------------------|--|
| Amount (\$) \$1,051.50 | Payee address; City; State; Zip Code 110 Carriage Drive Lufkin, TX 75904 |
|---------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign bookkeeping services |
|-------------------------------|---|---|

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

| | |
|--------------------|--|
| Date 07/08/2024 | Payee name Keepers Car Club of West Texas |
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|-------------------------|---|
| Amount (\$) \$300.00 | Payee address; City; State; Zip Code 522 Osborne Street Clyde, TX 79510 |
|-------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable donation |
|-------------------------------|---|---|

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 2/7 Rpt: 19/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
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|-----------------------------|------------------------------------|
| 4 Date 09/09/2024 | 5 Payee name Lamar Media |
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|------------------------------------|--|
| 6 Amount (\$) \$3,048.80 | 7 Payee address; City; State; Zip Code 5321 Corporate Blvd. Baton Rouge, LA 70808 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political advertising - billboards |
|---------------------------------|--|--|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|-----------------------------------|
| Date 07/03/2024 | Payee name Lambert, Stan (Mr.) |
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|-------------------------|--|
| Amount (\$) \$538.13 | Payee address; City; State; Zip Code P.O. Box 3752 Abilene, TX 79604 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for personal funds used for campaign. Properly reported on Sch G of current |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|-----------------------------------|
| Date 08/09/2024 | Payee name Lambert, Stan (Mr.) |
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|-------------------------|--|
| Amount (\$) \$275.00 | Payee address; City; State; Zip Code P.O. Box 3752 Abilene, TX 79604 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for personal funds used for campaign. Properly reported on Sch G of previous |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 3/7 Rpt: 20/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 07/20/2024 | 5 Payee name Lambert, Stan (Mr.) | |
| 6 Amount (\$) \$462.30 | 7 Payee address; City; State; Zip Code P.O. Box 3752 Abilene, TX 79604 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office (690m*.67).Not reimbursed by the state. |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/01/2024 | Payee name Lambert, Stan (Mr.) | |
| Amount (\$) \$845.54 | Payee address; City; State; Zip Code P.O. Box 3752 Abilene, TX 79604 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office (1262m*.67).Not reimbursed by the state. |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/21/2024 | Payee name Lambert, Stan (Mr.) | |
| Amount (\$) \$1,081.38 | Payee address; City; State; Zip Code P.O. Box 3752 Abilene, TX 79604 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office (1614m*.67).Not reimbursed by the state. |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 4/7 Rpt: 21/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
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| 4 Date 09/03/2024 | 5 Payee name Lambert, Wes (Mr.) |
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| 6 Amount (\$) \$920.00 | 7 Payee address; City; State; Zip Code 2301 Sylvan Drive Abilene, TX 79605 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|----------------------------------|
| Date 09/21/2024 | Payee name Lambert, Wes (Mr.) |
|--------------------|----------------------------------|

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| Amount (\$) \$450.00 | Payee address; City; State; Zip Code 2301 Sylvan Drive Abilene, TX 79605 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 07/01/2024 | Payee name McCall Property Management LLC |
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| Amount (\$) \$3,050.00 | Payee address; City; State; Zip Code PO Box 633 Spicewood, TX 78669 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin |
|------------------------|--|---|

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 5/7 Rpt: 22/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
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|-----------------------------|---|
| 4 Date 08/01/2024 | 5 Payee name McCall Property Management LLC |
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| 6 Amount (\$) \$3,050.00 | 7 Payee address; City; State; Zip Code PO Box 633 Spicewood, TX 78669 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin |
|---------------------------------|---|--|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--|
| Date 09/01/2024 | Payee name McCall Property Management LLC |
|--------------------|--|

| | |
|---------------------------|---|
| Amount (\$) \$3,050.00 | Payee address; City; State; Zip Code PO Box 633 Spicewood, TX 78669 |
|---------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|------------------------------------|
| Date 08/13/2024 | Payee name Rider, William (Mr.) |
|--------------------|------------------------------------|

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|-------------------------|--|
| Amount (\$) \$265.32 | Payee address; City; State; Zip Code 3816 South Lamar Blvd #1010 Austin, TX 78704 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office (396m*.67).Not reimbursed by the state. |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 6/7 Rpt: 23/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 07/01/2024 | 5 Payee name Wertheim, Robyn (Mrs.) | |
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 650 Cynthia Ct. Abilene, TX 79602 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/01/2024 | Payee name Wertheim, Robyn (Mrs.) | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 650 Cynthia Ct. Abilene, TX 79602 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/01/2024 | Payee name Wertheim, Robyn (Mrs.) | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 650 Cynthia Ct. Abilene, TX 79602 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 7/7 Rpt: 24/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
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|-----------------------------|---|
| 4 Date 09/19/2024 | 5 Payee name Wertheim, Robyn (Mrs.) |
|-----------------------------|---|

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|----------------------------------|---|
| 6 Amount (\$) \$104.92 | 7 Payee address; City; State; Zip Code 650 Cynthia Ct. Abilene, TX 79602 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office (156.6m*.67).Not reimbursed by the state. |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 08/13/2024 | Payee name Wertheim, Robyn (Mrs.) |
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|-------------------------|--|
| Amount (\$) \$119.26 | Payee address; City; State; Zip Code 650 Cynthia Ct. Abilene, TX 79602 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office (178m*.67).Not reimbursed by the state. |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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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

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

The Instruction Guide explains how to complete this form.

| | | | |
|--|---|----------------------------------|---|
| 1 Total pages Schedule F4: Sch: 1/1 Rpt: 25/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 CREDIT CARD ISSUER | Name of financial institution Chase Visa | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$538.13 | (b) Date of Charge 07/01/2024 | (c) Date(s) Credit Card Issuer Paid 07/24/2024 |
| 7 PAYEE | (a) Payee name Cypress Street Station | | (b) Payee address; City, State, Zip Code 158 Cypress Street Abilene, TX 79601 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description OH dinner meeting (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/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 G: Sch: 1/1 Rpt: 26/26 | 2 FILER NAME Lambert, Standard D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080253 |
| 4 Date 07/24/2024 | 5 Payee name Visa Cardmember Service | |
| 6 Amount (\$) \$538.13 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code PO Box 6294 Carol Stream, IL 60197 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sch F4 of current report |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |