CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	lete this form.	1 Filer ID (Ethics Comm 00088255		2 Total pages filed: 14
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	Mrs.	Hannah J.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	10/07/2024
	NICKNAIVIE	Bohm		SUFFIX	15/61/2621
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
MAILING	1005 Spanish Trail Dr.				Receipt # Amount
ADDRESS					Pariount
Change of Address	Granbury, TX 76048				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER NAME	Ms.	Mirian Spence	r		
	NICKNAME	LAST	•••••	SUFFIX	
		Morrison			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	5880 Hill City Highway				
(Residence or Business)	Tolar, TX 76476				
7 CAMPAIGN TREASURER		NE NUMBER E	EXTENSION		
PHONE	(915) 309-4610				
9 DEDODT					
8 REPORT TYPE	January 15	30th day before	election \square	Runoff	15th day after campaign treasurer
		Sour day belore		L	appointment (officeholder only)
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
				reporting innit	
9 PERIOD	Month Day Year			Month Day	Year
COVERED	07/01/2024	TH	IROUGH	09/26/202	4
		<u> </u>			
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Year 11/05/2024		rimary	Runoff	Other
	11/05/2024	ΧG	eneral	Special	
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT	(if known)
				State Represent	ative District 59
	.1			1	
		ദവ T	O PAGE 2		
		.	0.7.022		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	Bohm, Hannah J. (M	s.)	14 Filer ID (00088255	Ethics Commission Filer	's)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without in I officeholders are required to report this information	the candidate's or office	holder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRESS			П		
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME			\dashv		
					_		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.	.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 7,731.	.51		
EXPENDITURE TOTALS	TURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 1,759.	.89		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 20,563.	.27		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 200.	.00		
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		Mrs.	Hannah J. Bohm				
		Signature of	Candidate or Officehole	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	ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 of 14
	ER NAN		19 Filer ID	(Ethics C	ommission Filers)
		unnah J. (Mrs.) E SUBTOTALS	00088255	T	
		SCHEDULE		SUE	BTOTAL AMOUNT
1.	X	\$	7,631.51		
2.	X		\$	100.00	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	1,759.89	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
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 F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/14		
2	FILER NAME Bohm, Hann	ah J. (Mrs.)		3	Filer ID (Ethics Commission 00088255	n Filers)	
4	Date 08/13/2024	 Full name of contributor out-of-state PAC (I Alarid, Carilyn Contributor address; City; State; Zip Code 	7	Amount of Contribution (\$)	\$50.00		
8	Principal occu	Stephenville, TX 76401 pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
Ü	Retired	outon 7 300 title (See instituctions)	5 Employer (See Instructions	3)			
	Date 09/18/2024	Full name of contributor out-of-state PAC (I Back, Jon Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$220.00		
	Principal occu	Granbury, TX 76048 pation / Job title (See Instructions)	<u> </u> s)				
	Retired	· · · · · · · · · · · · · · · · · · ·		,			
	Date Full name of contributor out-of-state PAC (ID#:) 09/26/2024 Brown, Benny Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00		
		Granbury, TX 76048					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 09/18/2024				Amount of Contribution (\$)	\$250.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/13/2024 Butler, Roger Contributor address; City; State; Zip Code Granbury, TX 76049				Amount of Contribution (\$)	\$50.00	
	Principal occu Wine Stocke	pation / Job title (See Instructions)	Employer (See Instructions Glazer's	s)			
			•				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUI	_E A1	
	The Instru	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/14	
2	FILER NAME Bohm, Hann	ah J. (Mrs.)		3	Filer ID (Ethics Commission 00088255	on Filers)
4	Date 09/25/2024	 Full name of contributor	7	Amount of Contribution (\$)	\$100.00	
		Granbury, TX 76049				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Cato, Jim (Dr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00	
	Principal occu	Granbury, TX 76048 pation / Job title (See Instructions)	<u>()</u>			
	Retired		Employer (See Instructions	,		
	Date Full name of contributor out-of-state PAC (ID#:) 08/08/2024 Every State Blue - Texas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$566.51	
		Washington, DC 20001				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/25/2024				Amount of Contribution (\$)	\$40.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/26/2024 Heflin, Becky Contributor address; City; State; Zip Code Granbury, TX 76048				Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	 ;)		
			,			

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/14	
2	FILER NAME Bohm, Hann	ah J. (Mrs.)		3	Filer ID (Ethics Commission File 00088255	ers)
4	Date 09/26/2024	 Full name of contributor		7	Amount of Contribution (\$) \$1	00.00
_	Duinning Langu	Granbury, TX 76048	O Francisco (Con Instructions			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 07/13/2024	Full name of contributor out-of-state PAC (ID#:_ Ho, Mary Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1	00.00	
	Principal occu	Killeen, TX 76542 pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired					
Date O7/08/2024 Full name of contributor out-of-state PAC (ID#: International Association of Machinists and Aerospace Worker Contributor address; City; State; Zip Code		space Workers		Amount of Contribution (\$) \$2,5	00.00	
		Fort Worth, TX 76108				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/26/2024 Johnson, Pat Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1	00.00
	Principal occu Retired	Granbury, TX 76048 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/26/2024 Mastrangelo, Peter & Mary Contributor address; City; State; Zip Code Granbury, TX 76048			Amount of Contribution (\$) \$1	00.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/14	
2	FILER NAME Bohm, Hann	ah J. (Mrs.)		3	Filer ID (Ethics Commission 00088255	n Filers)
4	Date 09/18/2024	 Full name of contributor	7	Amount of Contribution (\$)	\$100.00	
_		Granbury, TX 76049	I			
8	Principal occur Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_Prilliman, Angela Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$65.00	
	Principal occu	Fort Worth, TX 76107 pation / Job title (See Instructions)	 s)			
	Entrepreneu	r	Self Employed			
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00	
		Granbury, TX 76048	T = 1 (2 1 1 1	Ĺ		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 08/26/2024			-	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>1 </u>		
	Date Full name of contributor out-of-state PAC (ID#:) 07/11/2024 Spencer Morrison, Mirian Contributor address; City; State; Zip Code Tolar, TX 76476			Amount of Contribution (\$)	\$300.00	
	Principal occu Sr. Planner	pation / Job title (See Instructions)	Employer (See Instructions City of Fort Worth	5)		
			1 2 9 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			

	MONET	ARY POLITICAL C		SCHEDULE A			
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/14	
2	FILER NAME Bohm, Hann	ah J. (Mrs.)			3	Filer ID (Ethics Commission 00088255	n Filers)
4	Date 08/31/2024	St.Clair, Amy Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
		Hamilton, TX 76531					
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 07/11/2024 Stewart, Margurite Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$150.00
	Principal occu	Stephenville, TX 76401 pation / Job title (See Instructions	<u> </u>				
	Customer Service Saint-Gobain Abrasive						
Date Full name of contributor out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$150.00		
		Hamilton, TX 76531					
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Yates Title Company	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/26/2024 Vaughn, Jane Contributor address; City; State; Zip Code Granbury, TX 76048			Amount of Contribution (\$)	\$100.00		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/25/2024 Whitworth, Susan Contributor address; City; State; Zip Code Granbury, TX 76049					Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	TARY POLITICAL CONTRIBUTI	ON	IS		SCHEDULE A1
	The Instru	ection Guide explains how to complete this	m.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/14	
2	FILER NAME Bohm, Hanr				3	Filer ID (Ethics Commission Filers) 00088255
4	Date 09/25/2024 5 Full name of contributor out-of-state PAC (ID#:) Wood, Grant 6 Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$1,100.0
	Dringing ogg	Granbury, TX 76049	l _o	Employer (See Instructions	<u>,,</u>	
8	Brewmaster	upation / Job title (See Instructions) /Owner	9	Employer (See Instructions Revolver Brewing	5)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/14 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bohm, Hannah J. (Mrs.) 00088255 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 08/20/2024 Blue Horizon Texas PAC \$100.00 I Strategy session, 7 Contributor address; City; State; Zip Code endorsement, social media, email promotion San Antonio, TX 78278 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 1/4 Rpt: 11/14	2 FILER NAME Bohm, Hannah J. (Mrs.) 3 Filer ID (Ethics Commission Filers) 00088255
4	Date 09/26/2024	5 Payee name ActBlue Technical Services
6	Amount (\$) \$37.40	7 Payee address; City; State; Zip Code 366 Summer St
8	PURPOSE OF EXPENDITURE	Somerville, TX 02144-3132 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ActBlue Processing Fee
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 08/05/2024	Payee name Bohm, Hannah
	Amount (\$) \$215.00	Payee address; City; State; Zip Code 1005 Spanish Trail Dr.
	PURPOSE OF EXPENDITURE	Granbury, TX 76048 (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texas Democratic Party State Convention Reimbursement
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 08/31/2024	Payee name CEFCO
	Amount (\$) \$39.49	Payee address; City; State; Zip Code 312 N Rice
		Hamilton, TX 76531
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
	Complete ONLY if direct expenditure to benefit C/OI	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 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	y - al Coi	mmittee	Legal Se		•		/ages	e /Contract Labor ete this form.		Travel O		strict category not listed above)	
_	Total pages Cab - dula 54	1-	EII ED MANAS		u	oxpiuiis				<u> </u>	Files IP		(Ethios Commission Ellers)	_
	Total pages Schedule F1:				(Mro.)					3			(Ethics Commission Filers)	
	Sch: 2/4 Rpt: 12/14	$oxed{oxed}$	Bohm, Han	nan J.	(IVITS.)						00088	∠55		
4	Date	5	Payee name											
	09/23/2024		Campaign \	Verify										
6	Amount (\$)	7	Payee addre	ss;	City;	State	; Zip Co	de						
	\$95.00		1215 31st S	St NW										
		1	PO BOX 35	554										
			Washingtor		0007									
8	PURPOSE	(2)						(h)	Docorintian					
ľ	OF	رما	Category (S	ee Catego	ries listed at th	e top of this sch	nedule)	(D)	Description Check if travel	outsi	ide of Texa	ıs Com	plete Schedule T.	
	EXPENDITURE		Fees						Check if Austin					
									Campaign Ve					
9	Complete ONLY if direct		Candidate/Offi	iceholde	er name	(Office sou	ght			Off	fice he	eld	
	expenditure to benefit C/OI	Н												
H	Date	Π	Payee name											
	09/20/2024		Dr. Don's B											
\vdash	Amount (\$)	\vdash	Payee addre		City;	State	; Zip Co	de						
	\$144.95		3906 W. Mo	•	-	Olale	,p 00	40						
	Ψ144.33		COOC VV. IVIC	JIIOVV L	···									
			Olamatete A	7.050	20									
		$oxed{oxed}$	Glendale, A					_						
	PURPOSE OF	(a)	Category (S		ries listed at th	e top of this sch	nedule)	(b)	Description		:	- 6	and the Color dute T	
	EXPENDITURE		Printing Exp	oense					Check if travel				plete Schedule T.	
									Campaign St			CI IIVIIIg	у ехрепас	
									Janpaigii Ot	510	J. J			
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offi	iceholde	er name	(Office sou	aht			Off	fice he	eld	
	expenditure to benefit C/OI					·	, 2 000	J .•			5 11			
\vdash	Date		Dayoe name											_
	09/24/2024		Payee name		on Signs									
		\vdash	Edwards &				· -							
	Amount (\$)		Payee addre		City;	State	; Zip Co	de						
	\$481.24		203 S Belt I	Line Ro	d.									
L		L	Irvin, TX 75	060										
	PURPOSE	(a)	Category (S	ee Catego	ries listed at th	e top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Printing Exp	oense					=				plete Schedule T.	
	-	1							Check if Austin	, TX	, officehold	er living	g expense	
									Signs					
	Complete ONLY if alice of	Ц	Condidate Off	ioobeld	or name		Office ==:	ab+			0"	fine b	ald	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	icenoide	я паше	(Office sou	ynt			Off	fice he	tiu	
	•													

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 3/4 Rpt: 13/14	Bohm, Hannah J. (Mrs.) 00088255
4	Date	5 Payee name
	08/31/2024	El Jardin Restaurant
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.96	200 N Bell St
		Hamilton, TX 76531
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Hamilton County HQ Kick-off
		rialimon county rig rook on
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Power name
	09/14/2024	Payee name Sabar BBQ
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.65	194 Bryan Ave
		Fort Worth, TX 76104
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense TDW of Tarrant County Meeting Meal
		15W of Farrant County Weeting Wear
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	08/28/2024	Texas Democratic Party
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$650.00	PO Box 15707
		Austin, TX 78761
	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
		VAN Access Fee
		7,117,100000 1 00
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	mmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Guid	xpense		nse es/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2	FILER NAN	ИЕ				3	Filer ID	(Ethics Commission Filers)
	Sch: 4/4 Rpt: 14/14			ınnah J. (Mrs.)					00088255	
4	Date	5	Payee nam	ne						
	08/30/2024		USPS							
6	Amount (\$)	7	Payee addı	ress; City;	State;	Zip Code	<u> </u>			
	\$29.20		530 N. Cr		,	•				
				, TX 76048						
8	PURPOSE OF	(a)		(See Categories listed at the	top of this sch	edule) (k) Description			
	EXPENDITURE		Postage				_		ide of Texas. Comp , officeholder living	
							_		nk you cards	oxponed
							•		,	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/O	officeholder name	C	Office sough	t		Office he	ld