# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commi 00083809		2 Total pages file 3	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
NAME	Mr.	Matthew R.			Date Received  ELECTRONICA	ALLY FILED
	NICKNAME	LAST Morgan		SUFFIX	10/07/2024	
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT / 503 FM 359 #264	SUITE#; CIT	Y;	ZIP CODE	Date Hand-delivered or Receipt #	Date Postmarked  Amount
ADDRESS  Change of Address	Suite 130 #226 Richmond, TX 77406				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	_ <u>L</u>	
TREASURER NAME	Mr.	Dave				
		LAST Vrshek		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO 503 FM 359 #264	BOX PLEASE);	AP.	「/SUITE#; CITY;	STA	TE; ZIP CODE
(Residence or Business)	Richmond, TX 77406					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (832) 520-9042	E NUMBER E	EXTENSION			
8 REPORT TYPE	January 15 X	30th day before		Runoff  Exceeded modified reporting limit	15th day after can appointment (office Final Report (Atta	eholder only)
				Teporting limit		
9 PERIOD COVERED	Month Day Year 07/01/2024	TH	IROUGH	Month Day 09/26/202	Year 24	
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		rimary eneral	ELECTION TYPE Runoff Special	Other	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT State Represent		
		GO T	O PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 31

13 C / OH NAME	14 Filer ID ( 00083809	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I 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 ADDRES	SS	
16 CONTRIBUTION TOTALS		L ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	<b>\$</b> 47,504.00
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 21,675.47
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 38,544.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 145,564.56
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Mr. N	latthew R. Morgan	
		Signature of	Candidate or Officehol	der
AFFIX NO	ΓARY STAMP / SEAL AΒ	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	eer administering	Printed name of officer administering	Title of officer	r administering oath

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

			C	OVER	SHEET PG 3 3 of 31
<b>18</b> FIL			19 Filer ID	(Ethics C	Commission Filers)
		Matthew R. (Mr.)	00083809		
		E SUBTOTALS SCHEDULE		SUI	BTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	47,504.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		\$			
4.		\$			
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	21,675.47
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	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 C	S		SCHEDUI	E A1	
	The Instruc	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 1/18 Rpt: 4/31	
2	FILER NAME Morgan, Mat	tthew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 09/24/2024	<ul><li>5 Full name of contributor Agents of Texas</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$250.00
_		Austin, TX 78768	1-		_		
8	Principal occu Pac	pation / Job title (See Instructions)	9	Employer (See Instructions Independent Insurance		ents of Texas	
	Date 09/18/2024	Full name of contributor Alghali, Omar S Contributor address; City; Sta		)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	Sugar Land, TX 77477 pation / Job title (See Instructions)		Employer (See Instructions	<u>s)</u>		
	Contractor			O&M Construction Servi		5	
	Date 09/24/2024	Full name of contributor Association Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu PAC	pation / Job title (See Instructions)		Employer (See Instructions Texas Apartment Assoc		on	
	Date 09/24/2024	Full name of contributor Association Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu PAC	pation / Job title (See Instructions)		Employer (See Instructions Houston Apartment Ass	•	ation	
	Date 07/24/2024	Full name of contributor Association PAC Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Self Employe	pation / Job title (See Instructions) ed		Employer (See Instructions	5)		
			,				

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to com	plete this for	n.	1	Total pages Schedule A1: Sch: 2/18 Rpt: 5/31	
2	FILER NAME Morgan, Mat	tthew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	n Filers)
4	Date 08/02/2024	Avera, Ashley	state PAC (ID#:	)	7	Amount of Contribution (\$)	\$250.00
_	Dringing aggr	Austin, TX 78701	lo.	Employer (See Instructions	<u></u>		
8		pation / Job title (See Instructions) al Affairs Consultant	9	Employer (See Instructions Avera Governmental Aff		s LLC	
	Date 09/17/2024	Barker, Kevin  Contributor address; City; State; Zip Co				Amount of Contribution (\$)	\$104.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Self Employed			Self			
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00	
		Whiting, NJ 08759					
	Principal occu Self Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Self	5)		
	Date Full name of contributor out-of-state PAC (II 09/12/2024 Beique, Jean					Amount of Contribution (\$)	\$50.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions) retired			
	Date 08/12/2024	Bevis, Blair	state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
			•				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 3/18 Rpt: 6/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	n Filers)
4	Date 09/20/2024	Biasetti, Greg	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$104.00
8	Principal occu	Katy, TX 77494 pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Engineer			Technip Energies			
	Date 09/23/2024	Boyer, Debbie  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$52.00
		Katy, TX 77450					
	Principal occupation / Job title (See Instructions) retired			Employer (See Instructions retired	)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:)  Bradley, Darrell  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Katy, TX 77494					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)		
	Date Full name of contributor out-of-state PAC (IE 09/24/2024 Bresnen, Amy		out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)		
	Date 08/24/2024	Full name of contributor Britton, William Contributor address; City; State; Katy, TX 77494	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)		
			<b>,</b>				

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 4/18 Rpt: 7/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 07/24/2024	6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code	)	7	Amount of Contribution (\$)	\$1,500.00
8	Principal occu Self Employe	Bellaire, TX 77401  pation / Job title (See Instructions) ed	9	Employer (See Instructions Self	<u> </u> s)		
	Date 09/03/2024	Full name of contributor  Casey Pac  Contributor address; City; Sta  Austin, TX 78701		)		Amount of Contribution (\$)	\$1,000.00
	Principal occupation / Job title (See Instructions) unemployed			Employer (See Instructions unemployed	<u>l</u> s)		
	Date 09/19/2024	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$104.00
		Katy, TX 77494 pation / Job title (See Instructions) tioner		Employer (See Instructions Lone star College Mont	′	nerv	
	09/17/2024 Chavez, Paula S		out-of-state PAC (ID#: tte; Zip Code	)		Amount of Contribution (\$)	\$52.00
	Principal occurretired	pation / Job title (See Instructions)		Employer (See Instructions retired	<u>I</u> S)		
	Date 09/24/2024	Full name of contributor  Contractors of TX  Contributor address; City; Sta  Austin, TX 78767	out-of-state PAC (ID#: tte; Zip Code	)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu PAC	pation / Job title (See Instructions)		Employer (See Instructions Associated Builders & C		tractors of TX	
			·				

	MONET	NETARY POLITICAL CONTRIBUTIONS					SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 5/18 Rpt: 8/31	
2	FILER NAME Morgan, Mat	tthew R. (Mr.)				3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 09/03/2024	6 Contributor address; City; St	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Cook Campa	Mansfield, TX 76063  pation / Job title (See Instructions aign	)	9	Employer (See Instructions	<u> </u> 5)		
	Date 08/27/2024	Full name of contributor Curtis, Ryan Contributor address; City; St			)		Amount of Contribution (\$)	\$250.00
	Principal occupation / Job title (See Instructions) Asset Manager				Employer (See Instructions Ironclad Environmental	<u> </u> 5)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:)  Daniel, Margaret  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00	
		Katy, TX 77494 pation / Job title (See Instructions	)		Employer (See Instructions retired	<u> </u> 5)		
	retired  Date Full name of contributor ou 09/17/2024 Daniel, Margaret  Contributor address; City; State; Zi		out-of-state PAC (ID#:ate; Zip Code		)		Amount of Contribution (\$)	\$104.00
	Principal occu	Katy, TX 77494 pation / Job title (See Instructions	)		Employer (See Instructions retired	<u> </u> 5)		
	Date Full name of contributor out-of-state PAC (ID#:)  09/17/2024 Daniel, Michelle  Contributor address; City; State; Zip Code  Katy, TX 77494				Amount of Contribution (\$)	\$104.00		
	Principal occu Accountant	pation / Job title (See Instructions			Employer (See Instructions BDO	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS	SCHEDULE A		
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/18 Rpt: 9/31	
	FILER NAME	tthew R. (Mr.)		3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 09/24/2024	5 Full name of contributor out-of-state PAC (ID#: Dealers Association  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu PAC	pation / Job title (See Instructions)	Employer (See Instructions TX Automobile Dealers	-	sociation	
	Date 09/24/2024	Full name of contributor	)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu President	upation / Job title (See Instructions)	Employer (See Instructions Wholesale Beer Distribu		rs of Texas	
	Date 08/20/2024	Full name of contributor out-of-state PAC (ID#: Douglass, Denny  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Richmond, TX 77406				
	Principal occu Self Employ	upation / Job title (See Instructions) ed	Employer (See Instructions Self	s)		
	Date 09/24/2024	Full name of contributor			Amount of Contribution (\$)	\$350.00
	Principal occu Self Employ	upation / Job title (See Instructions) ed	Employer (See Instructions Law Office of A. Craig E	-	nd PC	
	Date 09/24/2024	Full name of contributor out-of-state PAC (ID#: Electric Cooperatives Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701  upation / Job title (See Instructions)	Employer (See Instructions Rural Friends of Electric		ooperatives	

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 7/18 Rpt: 10/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	n Filers)
4	Date 09/24/2024	<ul> <li>5 Full name of contributor  or Evans, Linda</li> <li>6 Contributor address; City; State; Z</li> </ul>	ut-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Richmond, TX 77469 pation / Job title (See Instructions)		Employer (See Instructions	)		
•	retired	patient, cos title (cos motrodione)		retired	,		
	Date 07/25/2024	Full name of contributor of Contributor of Contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		San Antonio, TX 78209					
	Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions Furlow Law Firm	)		
	Date 08/20/2024	Full name of contributor	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		Richmond, TX 77469					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)		
	09/18/2024 Gremminger, Lois		ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$104.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)		
	Date 09/24/2024	Full name of contributor on Harms, Douglas  Contributor address; City; State; Z  Richmond, TX 77469	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	)		
			<b>'</b>				

	MONET	ARY POLITICAL C	IS		SCHEDUI	E A1	
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 8/18 Rpt: 11/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 09/03/2024	<ul><li>5 Full name of contributor [ Harper, Hal</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$35.00
8	Principal occu	Richmond, TX 77406 pation / Job title (See Instructions)	اه	Employer (See Instructions	·/		
0	retired	pation / Job title (See Instructions)	9	retired	)		
	Date 09/24/2024	Full name of contributor  Hart, Mark  Contributor address; City; Sta		)		Amount of Contribution (\$)	\$3,000.00
		Sugar Land, TX 77487					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Servpro of Sugarland	5)		
	Date 09/24/2024	Full name of contributor  Healthcare  Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Deinstead	Long Beach, CA 90802		Fandaga (Octobrità de	$\overline{\Gamma}$		
	Principal occu PAC	pation / Job title (See Instructions)		Employer (See Instructions Molina Healthcare	5)		
	Date 09/24/2024	Full name of contributor Hotze, Steve Contributor address; City; Sta Katy, TX 77450	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu Dr.	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
	Date 09/12/2024	Full name of contributor Hulse, Mark Contributor address; City; Sta	out-of-state PAC (ID#:te; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
			•				

	MONET	NETARY POLITICAL CONTRIBUTIONS					SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 9/18 Rpt: 12/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)				3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 07/24/2024	6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Self Employe	Houston, TX 77027 pation / Job title (See Instructions) ed	Ę		Employer (See Instructions Self	<u> </u> s)		
	Date 07/12/2024	Full name of contributor Infanger, William Contributor address; City; Sta			)		Amount of Contribution (\$)	\$30.00
	Principal occupation / Job title (See Instructions) Self Employed				Employer (See Instructions Self	<u>                                      </u>		
	Date 08/27/2024	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00	
	Principal occu	Richmond, TX 77469 pation / Job title (See Instructions)			Employer (See Instructions retired	<u> </u> s)		
	Date Full name of contributor out-of-state PAC (ID# 09/24/2024 Jones, Neal Contributor address; City; State; Zip Code		out-of-state PAC (ID#: te; Zip Code		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu retired	Austin, TX 78735 pation / Job title (See Instructions)			Employer (See Instructions retired	<u>I</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 07/24/2024 Jones, Neal  Contributor address; City; State; Zip Code  Austin, TX 78735			•	Amount of Contribution (\$)	\$1,000.00		
	Principal occu Self Employe	pation / Job title (See Instructions) ed			Employer (See Instructions Self	5)		
			•					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete tl	his for	m.	1	Total pages Schedule A1: Sch: 10/18 Rpt: 13/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 08/20/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$25.00
8		Katy, TX 77494 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Date Full name of contributor out-of-state PAC (ID#:)  07/12/2024 Kinley, Loretta  Contributor address; City; State; Zip Code  Fredericksburg, TX 78624			Amount of Contribution (\$)	\$25.00		
	Principal occupation / Job title (See Instructions)  Self Employed  Employer (See Instruction Self		<u>s)</u>				
Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$100.00		
	Principal occu	Richmond, TX 77407 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 09/24/2024	Full name of contributor out-of-state PAC Lawsuit Reform  Contributor address; City; State; Zip Code  Austin, TX 78701	`	Self		Amount of Contribution (\$)	\$5,000.00
	Principal occu Pac	pation / Job title (See Instructions)		Employer (See Instructions Texans For Lawsuit Ref		n	
	Date O7/24/2024  Full name of contributor out-of-state PAC (ID#:)  Lawyers Association PAC  Contributor address; City; State; Zip Code  Austin, TX 78701		•	Amount of Contribution (\$)	\$2,500.00		
	Principal occu Self Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Self	5)		
			•				

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	LE A1
	The Instru	ction Guide explains hov	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 11/18 Rpt: 14/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)				3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 07/22/2024			7	Amount of Contribution (\$)	\$500.00		
		Dallas, TX 75201						
8	Principal occu Attorney	pation / Job title (See Instructions	s) 		Employer (See Instructions Locke Lord LLP	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  09/19/2024 Mann, Mary  Contributor address; City; State; Zip Code  Katy, TX 77494			Amount of Contribution (\$)	\$52.00			
	Principal occupation / Job title (See Instructions)  retired  Employer (See Instruction retired		<u> </u> s)					
	Date Full name of contributor out-of-state PAC (ID#:)  09/24/2024 Marcell, Marvin  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00			
		Sugar Land, TX 77478  pation / Job title (See Instructionsed	s)		Employer (See Instructions Marvin Marcell	<u> </u> s)		
	Self Employed  Date  O9/25/2024  Full name of contributor  Marsh, Jon  Contributor address; City; State; Zip Code  Katy, TX 77494			•	Amount of Contribution (\$)	\$1,000.00		
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	5)		
	Date O7/23/2024 Full name of contributor out-of-state PAC (ID#:) Meyers, Lucas Contributor address; City; State; Zip Code  Austin, TX 78759		•	Amount of Contribution (\$)	\$250.00			
		pation / Job title (See Instructions al affairs consultant	(3)		Employer (See Instructions governmental affairs Ilc	5)		
			1					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	rm		1	Total pages Schedule A1: Sch: 12/18 Rpt: 15/31	
2	FILER NAME Morgan, Mat	thew R. (Mr.)				3	Filer ID (Ethics Commission 00083809	on Filers)
4	Date 07/24/2024	<ul><li>5 Full name of contributor Nease, Nelson</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: tte; Zip Code		)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9	) E	Employer (See Instructions	<u> </u>		
	Self Employe				Self	,		
	Date Full name of contributor out-of-state PAC (ID#:)  08/20/2024 Novosad, Carol  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00			
		Richmond, TX 77406	1					
	retired	pation / Job title (See Instructions)			Employer (See Instructions etired	;)		
	Date Full name of contributor out-of-state PAC (ID#:)  09/24/2024 Now PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00			
		Austin, TX 78704						
	Principal occu PAC	pation / Job title (See Instructions)			Employer (See Instructions Charter Schools Now	i)		
	Date Full name of contributor out-of-state PAC (ID#:) 07/12/2024 Olcott, Michael  Contributor address; City; State; Zip Code  Fort Worth, TX 76126			Amount of Contribution (\$)	\$500.00			
	Principal occu Self Employe	pation / Job title (See Instructions) ed			Employer (See Instructions Self	<u> </u>		
	Date Full name of contributor out-of-state PAC (ID#:) 07/12/2024 Optometric PAC Contributor address; City; State; Zip Code  Austin, TX 78705			Amount of Contribution (\$)	\$1,000.00			
	Principal occu Self Employe	pation / Job title (See Instructions) ed			Employer (See Instructions Self	5)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 13/18 Rpt: 16/31		
2	FILER NAME Morgan, Mat	thew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	on Filers)	
4	Date 07/24/2024	<ul><li>5 Full name of contributor PAC</li><li>6 Contributor address; City; Stat</li></ul>	out-of-state PAC (ID#: e; Zip Code	)	7	Amount of Contribution (\$)	\$2,000.00	
_	Deinsinal assu	Austin, TX 78767	I o		Ţ			
8	Self Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions Self	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  09/24/2024 Palmer, Lee  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00			
		Richmond, TX 77406			Ĺ			
				Employer (See Instructions Consolidated Home Hea		1		
Date Full name of contributor out-of-state PAC (ID#: 08/20/2024 Palumbis, Luke  Contributor address; City; State; Zip Code		out-of-state PAC (ID#:e; Zip Code		•	Amount of Contribution (\$)	\$100.00		
		Katy, TX 77450						
	Principal occu Self Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Self	s)			
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$25.00			
	Principal occu Self Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Self	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  09/26/2024 Perez, Kristine  Contributor address; City; State; Zip Code  Richmond, TX 77406			Amount of Contribution (\$)	\$18.00			
	Principal occu Unit Adminis	pation / Job title (See Instructions)		Employer (See Instructions Houston Methodist	5)			
			I					

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orr	m.	1	Total pages Schedule A1: Sch: 14/18 Rpt: 17/31			
2	FILER NAME Morgan, Mat	tthew R. (Mr.)				3	Filer ID (Ethics Commission 00083809	on Filers)		
4	Date 09/07/2024	5 Full name of contributor out-of-state PAC (ID#:) Perez, Victor  6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$500.00			
		Katy, TX 77494								
8	Principal occu retired	pation / Job title (See Instructions	(i)	9	Employer (See Instructions retired	5)				
	Date 08/27/2024	Full name of contributor Poynor, Lisa Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00		
	Richmond, TX 77406  Principal occupation / Job title (See Instructions)  Employer (See Instruction		<u> </u>							
	CEO alcohol and drug abuse prevention and treatment Fort Bend R					l on Substance Abuse, In	c.			
	Date Full name of contributor out-of-state PAC (ID#:) 07/24/2024 Reform PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00					
		Austin, TX 78701								
	Principal occu Self Employe	pation / Job title (See Instructions ed	(i)		Employer (See Instructions Self	5)				
	Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$500.00				
	Principal occu Self Employe	pation / Job title (See Instructions ed	)		Employer (See Instructions Sampson Public Affairs	s)				
	Date Full name of contributor out-of-state PAC (ID#:)  08/22/2024 Scott, Brandon  Contributor address; City; State; Zip Code  Richmond, TX 77406			Amount of Contribution (\$)	\$5.00					
	Principal occu Self Employe	pation / Job title (See Instructions ed	)		Employer (See Instructions Self	5)				

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 15/18 Rpt: 18/31		
2	FILER NAME Morgan, Mat	tthew R. (Mr.)				3	Filer ID (Ethics Commission 00083809	n Filers)	
4	Date 07/12/2024	<ul><li>5 Full name of contributor Shannon, Fred</li><li>6 Contributor address; City; S</li></ul>				7	Amount of Contribution (\$)	\$500.00	
		Austin, TX 78701							
8	8 Principal occupation / Job title (See Instructions) Self Employed Self		s) 						
	Date Full name of contributor out-of-state PAC (ID#:)  09/24/2024 Sheffield, Dixie  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00				
	Richmond, TX 77469  Principal occupation / Job title (See Instructions)  Employer (See Instructions)		<u> </u> s)						
	retired retired		retired						
	Date Full name of contributor out-of-state PAC (ID#:) 09/18/2024 Smith, Penny Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$52.00				
		Fulshear, TX 77441							
	Principal occu retired	pation / Job title (See Instructions	s)		Employer (See Instructions retired	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  O9/12/2024 Torina, Frank  Contributor address; City; State; Zip Code  Katy, TX 77494			•	Amount of Contribution (\$)	\$50.00			
	Principal occu Owner	pation / Job title (See Instructions	s)		Employer (See Instructions Torina's Pool Services	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  09/23/2024 Ureste, Shena  Contributor address; City; State; Zip Code  Sugar Land, TX 77479			Amount of Contribution (\$)	\$104.00				
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions Texana Center	5)			

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 16/18 Rpt: 19/31		
2	FILER NAME Morgan, Mat	thew R. (Mr.)				3	Filer ID (Ethics Commission 00083809	n Filers)	
4	Date 09/25/2024	<ul><li>5 Full name of contributor Vrshek, Kathy</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$104.00	
_	District	Richmond, TX 77469		_	Foundation (October to the street)				
8	retired	pation / Job title (See Instructions	5)	9	Employer (See Instructions retired	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  09/24/2024 WHITE, NALDA  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$52.00				
	Principal occu	Katy, TX 77494 pation / Job title (See Instructions	6)		Employer (See Instructions	<u> </u> 5)			
	retired				retired				
	Date Full name of contributor out-of-state PAC (ID#:  08/23/2024 Waldo, Kimberly  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$100.00			
		Richmond, TX 77406							
	Principal occu Elections wo	pation / Job title (See Instructions	s)		Employer (See Instructions Fort Bend County	5)			
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00			
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Self	<u>I</u> 5)			
	Date Full name of contributor out-of-state PAC (ID#:) 07/11/2024 Williams, Bach Contributor address; City; State; Zip Code  Katy, TX 77494			Amount of Contribution (\$)	\$100.00				
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	5)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	SCHEDULE A1	
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 17/18 Rpt: 20/31		
2	FILER NAME Morgan, Mat	thew R. (Mr.)			3	Filer ID (Ethics Commission 00083809	on Filers)	
4	Date 09/26/2024	6 Contributor address; City; Sta	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$18.00	
8	Principal occu	Katy, TX 77494 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)			
	Self Employe	ed		Self				
	Date Full name of contributor out-of-state PAC (ID#:)  09/18/2024 Yang, Wendy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$52.00			
		Missouri City, TX 77459						
	Principal occur Accountant	pation / Job title (See Instructions)		Employer (See Instructions Gao enterprise	s)			
	Date Full name of contributor out-of-state PAC (ID#:)  Vang, Xuemei  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00			
		Katy, TX 77494						
	Principal occu homemaker	pation / Job title (See Instructions)		Employer (See Instructions homemaker	s)			
	Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$50.00		
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 07/24/2024 of Texas  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00			
	Principal occu Self Employe	pation / Job title (See Instructions)		Employer (See Instructions Self	5)			
			-					

l	MONET	TARY POLITICAL CONTRIBUTION	\$	SCHEDULE A1	
-	Γhe Instru	ction Guide explains how to complete this	form.	1 Total pages Sch Sch: 18/18 Rp	
	FILER NAME	tthew R. (Mr.)		3 Filer ID (Ethics 00083809	s Commission Filers)
4 [	Date  5 Full name of contributor out-of-state PAC (ID#:)  white, susan  6 Contributor address; City; State; Zip Code			7 Amount of Conti	ribution (\$) \$104.00
	Katy, TX 77494				
	Principal occu etired	upation / Job title (See Instructions)	9 Employer (See Instruction retired	าร)	
	Date Full name of contributor out-of-state PAC (ID#:			Amount of Conti	ribution (\$) \$250.00
		Contributor address; City; State; Zip Code			
	Principal occu	Katy, TX 77494  upation / Job title (See Instructions)	Employer (See Instruction retired	ns)	

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		_
1	Sch: 1/10 Rpt: 22/31	Morgan, Matthew R. (Mr.)  Morgan, Matthew R. (Mr.)  O0083809	
4	Date	5 Payee name	
	08/19/2024	Central Fort Bend Chamber	
6	Amount (\$) \$120.00	7 Payee address; City; State; Zip Code 4120 Avenue H,	
		Rosenberg, TX 77471	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		event	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	=
	09/12/2024	Community Impact	
	Amount (\$)	Payee address; City; State; Zip Code	_
	` ,		
	\$1,169.89	16225 Impact Way	
		Pflugerville, TX 78660	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		ad	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	07/17/2024	Emaillistverify.com	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$604.39	811 Bratislava	
	400 1100	orr Brandava	
		Slovakia Slovakia	
	DUDDOOF	<u> </u>	_
	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 travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Email Verify	
		Linali veilly	
			_
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	7	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/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: 2/10 Rpt: 23/31	Morgan, Matthew R. (Mr.)
4	Date	5 Payee name
	09/10/2024	Fort Bend Herald
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1902 South Fourth Street
		Rosenberg, TX 77471
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		ad
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٥	expenditure to benefit C/O	
_	Data	
	Date	Payee name  Houston Sign Company
	09/05/2024	Houston Sign Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$154.15	5801 Chimney Rock Rd
		Houston, TX 77081
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
		Check if Austin, TX, officeholder living expense
		printing
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	·	
	Date	Payee name
	09/11/2024	Houston Sign Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$501.59	5801 Chimney Rock Rd
		Houston, TX 77081
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		printing
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 3/10 Rpt: 24/31	2 FILER NAME Morgan, Matthew R. (Mr.)  3 Filer ID (Ethics Commission Filers) 00083809
4	Date 08/09/2024	5 Payee name I306, LLC
6	Amount (\$) \$2,400.00	7 Payee address; City; State; Zip Code 2300 Clarendon Blvd Ste 800  Arlington, VA 22201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense overhead
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 08/13/2024	Payee name Katy Christian Chamber
	Amount (\$) \$20.00	Payee address; City; State; Zip Code 650 W Bough Ln  Houston, TX 77024
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 08/02/2024	Payee name Katy Womens
	Amount (\$) \$35.00	Payee address; City; State; Zip Code 705 South Fry
		Katy, TX 77450
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 4/10 Rpt: 25/31	Morgan, Matthew R. (Mr.)  00083809				
4	Date	5 Payee name				
	07/25/2024	Legislative Solutions				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$295.00	PO BOX 5643				
		Austin, TX 78763				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense				
	LAI LINDITORE	Check if Austin, TX, officeholder living expense				
		ad				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	experialitate to belieff crof	'				
	Date	Payee name				
	07/25/2024	Mailchimp				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$115.50	675 Ponce de Leon Ave NE				
		Suite 5000				
		Atlanta, GA 30308				
	PURPOSE					
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
	Ads					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1				
	Date	Payee name				
	08/19/2024	Mailchimp				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$172.20	675 Ponce de Leon Ave NE				
		Suite 5000				
		Atlanta, GA 30308				
	DUDDO05					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expanse  (b) Description  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		ads				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					

#### SCHEDULE F1

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

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

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

	Credit Card Payment  The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1: Sch: 5/10 Rpt: 26/31	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809					
4	Date 08/20/2024	5 Payee name Mailchimp	·					
	Amount (\$) \$3,311.70	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308						
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Advertising Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  ad					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date 09/10/2024	Payee name Mailchimp						
	Amount (\$) Payee address; City; State; Zip Code  \$2,986.20 675 Ponce de Leon Ave NE  Suite 5000  Atlanta, GA 30308							
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description Check if travel outside of Texas. Complete Sch								
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date 08/09/2024	Payee name Mammoth Marketing Group						
	Amount (\$) \$2,719.13	Payee address; City; State; Zip Code 4500 Bissonnet Street						
	Bellaire, TX 77401							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  consulting					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

#### 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 Wagnes/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/10 Rpt: 27/31	Morgan, Matthew R. (Mr.) 00083809
4	Date	5 Payee name
	08/14/2024	Mittera
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$860.66	7021 Portwest Drive Suite 190
		Houston, TX 77024
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		printing
		pintang
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
L		
	Date	Payee name
	08/07/2024	Phone.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$526.04	625 Brood Street
		Suite 240
		Newark, NJ 07102
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Crossing to the control of the con
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		phone
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	08/19/2024	Plantation Hardware
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.18	1221 Farm to Market 359
		Richmond, TX 77406
	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
		Materials Materials
	0 1. 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to belieff 6/01	•

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al 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	s)			
	Sch: 7/10 Rpt: 28/31	Morgan, Matthew R. (Mr.) 00083809				
4	Date	5 Payee name				
	09/10/2024	Plantation Hardware				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$77.85	1221 Farm to Market 359				
		Richmond, TX 77406				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense				
		Check if Austin, TX, officeholder living expense				
		supplies				
L						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	H				
	Date	Payee name				
L	09/18/2024	Plantation Hardware				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$194.63	1221 Farm to Market 359				
		Richmond, TX 77406				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF		Office Overhead/Rental Expense				
EXPENDITURE		Check if Austin, TX, officeholder living expense				
	supplies					
L						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	DH Control of the Con				
	Date	Payee name				
	09/06/2024	Republican Women's Club of Katy				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$35.00	9550 Spring Green Blvd., Ste 408-122				
	+55.50					
		Katy, TX 77494				
_	DUDDOCE					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Fyent Fynense  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		event				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	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: 8/10 Rpt: 29/31	Morgan, Matthew R. (Mr.) 00083809				
4	Date	5 Payee name				
	08/05/2024	SGL Consultants				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$1,425.00	PO Box 591015				
		Houston, TX 77059				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF Solicitation/Fundraising Expense  Check if travel outside of Texas. Complete Solicitation						
		Check if Austin, TX, officeholder living expense fundraising				
		in a constant of the constant				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
	Date	Payee name				
	08/19/2024	The Arc of Fort Bend				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$165.80	123 Brooks Street				
		Sugar Land, TX 77478				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Event Expense				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
event						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	<b>y</b>				
	Date	Payee name				
	09/13/2024	The Home Depot				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$191.22	6850 S Fry Rd				
	,					
		Katy, TX 77494				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		supplies				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 9/10 Rpt: 30/31	Morgan, Matthew R. (Mr.) 00083809				
4	Date	5 Payee name				
	07/08/2024	Traveluro				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$266.00	177 West Putnam				
		Greenwich, CT 06860				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE Travel Out of District Check if travel outside of Texas. Complete Schedule To Check if Austin, TX, officeholder living expense					
		Travel to Austin				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	<del>1</del>				
	Date	Payee name				
	08/30/2024	Universal Signs and Banners				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$2,165.00	7825 S Texas 6				
		Houston, TX 77083				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Printing Expense				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
printing						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
	Date	Payee name				
	09/16/2024	VistaPrint Corp				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$212.48	275 Wyman Street				
	, ———· · ·	<b>,</b>				
		Walton, MA 07102				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Printing Expense  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Printing				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				

#### SCHEDULE F1

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

Fees Office Overhead,
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Waces/

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expens Legal Services  The Instruction Guide expenses	Salaries/V	Vages	s/Contract Labor	Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Cobadula F1	12					Filor ID	(Ethics Commission Filers)
1	Total pages Schedule F1:	ı				3		(Lancs Commission Filers)
	Sch: 10/10 Rpt: 31/31		Morgan, Matthew R. (Mr.)				00083809	
4	Date	5	Payee name					
	07/25/2024		Wix.com					
6	Amount (\$)	7	Payee address; City;	State; Zip Co	ode			
	\$45.68		500 Terry A Francois Boulevard					
		ı	Sixth Floor					
		l	San Francisco, CA 94158					
_	DUDDOCE	⊢			/b\			
8	PURPOSE OF		Category (See Categories listed at the top of	f this schedule)	(a)	Description	ecido of Toyon Com	nlata Cahadula T
	EXPENDITURE		Advertising Expense			<b>=</b>	side of Texas. Com X, officeholder living	
						website	.,	
						•		
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht I		Office he	hld
ľ	expenditure to benefit C/O		variation of the control of the cont	Office 300	igiit		Onice ne	Jiu
<b>L</b>	Data							
	Date	ı	Payee name					
	08/20/2024		Wix.com					
	Amount (\$)		Payee address; City;	State; Zip Co	ode			
	\$45.68 500 Terry A Francois Boulevard							
			Sixth Floor					
			San Francisco, CA 94158					
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule)	(b)	Description		
OF			Office Overhead/Rental Expense					plete Schedule T.
EXPENDITURE			·			Check if Austin, T	X, officeholder living	expense
			overhead					
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ıght		Office he	eld
L	expenditure to benefit C/O	п						
	Date		Payee name					
	08/13/2024		Zoho					
	Amount (\$)	T	Payee address; City;	State; Zip Co	ode			
	\$304.50	ı	4141 Hacienda Drive					
			Pleasanton, CA 94588					
$\vdash$	PURPOSE	_		Additional (17)	(h)	Description		
	OF		Category (See Categories listed at the top of Office Overhead/Rental Expense		(3)		side of Texas. Com	plete Schedule T.
	EXPENDITURE		omoc overneau/Nentai Expense	,			X, officeholder living	
						overhead		
	Complete ONLY if direct		andidate/Officeholder name	Office sou	ight		Office he	eld
	expenditure to benefit C/OI	Н						