CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	on Guide explains how to complete	this form.	Filer ID (Ethics Commi 00088323		2 Total pages fi	led: .2
3 CANDIDATE /	MS / MRS / MR FI	IRST		MI		USE ONLY
OFFICEHOLDER	R Ms. н	elen D.				
NAME					Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME LA	AST		SUFFIX	10/07/2024	
	к	erwin				
4 CANDIDATE / OFFICEHOLDEF	ADDRESS / PO BOX; APT / S	UITE #; CITY;		ZIP CODE	Date Hand-delivered o	or Date Postmarked
MAILING	420 Grand Avenue					
ADDRESS					Receipt #	Amount
Change of Addres	³⁵ Glen Rose, TX 76043					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FI	RST		MI		
TREASURER		endy C.				
NAME	1015.	enuy C.				
		ST		SUFFIX		
	Hu	uggins				
6 CAMPAIGN	STREET ADDRESS (NO PO BC	X PLEASE);	AP	T / SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER ADDRESS	1214 Sandstone Drive					
ADDICESS						
(Residence or Busines	s) Cleburne, TX 76033					
7 CAMPAIGN	AREA CODE PHONE N	NUMBER EX	TENSION			
TREASURER	(325) 998-8632					
PHONE	(020) 000 0002					
8 REPORT						
TYPE	January 15 X	30th day before e	ection	Runoff	1 15th day after ca	mpaign treasurer
				L	appointment (offi	ceholder only)
	July 15	8th day before ele	ction	Exceeded modified	Final Report (Atta	ach C/OH-FR)
				reporting limit	-	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	THR	OUGH	09/26/2024	1	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Prin	nary	Runoff	Other	
	11/05/2024		oral	Special		
		X Ger	erdi	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
				State Representa	ative District 58	
	:					
	GO TO PAGE 2					
				•		
Forms provided by	Texas Ethics Commission	www.ethi	cs.state.tx.u	S	Vers	ion V4.1.0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of	12
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15 DOUB323 15 NOTICE FROM ADDRESS This box is for indicabulater. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures may have been made whom the candidates or officeholder's knowledge or insent: Candidates and officeholder. These expenditures of control is insent. Candidates or officeholder. These expenditures of control is insent. Candidates or officeholder's control is insent. Candidates or officeholder's control is insent. Candidates or officeholder. These expenditures of conditiones and information required to be reported by mediates or officeholder. 16 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD						
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Image: Second rates Texas Realiors Political Action Committee (TREPAC) Image: Second rates Second rates Image: Se	FROM POLITICAL	candidate / officeholder.	These expenditures may have been made without th	e candidate's or office	eholder's kn	owledge or
COMMITTEE ADDRESS SPECIFIC SPEC	Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
Image: Committee ADDRESS Image: Specific 1115 San Jacinto Bivd Ste 200 Austin, TX 78701 Committee CAMPAIGN TREASURER NAME Camul, Lessie Committee CAMPAIGN TREASURER ADDRESS PO Box 2246 Austin, TX 78768 Committee Committees of Loans), OR GUARANTEES OF LOANS), OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 42,660 Image: Contrained of the Than PLEOGES, LOANS, OR GUARANTEES OF LOANS), OR GUARANTEES OF LOANS,		X GENERAL	Texas Realtors Political Action Committee (TF	REPAC)		
Stellinic Stellinic Stellinic Stellinic Stellinic Austin, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME Cantu, Lesile Continuit Lesile Committee CAMPAIGN TREASURER ADDRESS PO Box 2246 Austin, TX 78768 Austin, TX 78768 Contraiteurions (OTHER THAN PLEDGES, LOANS) \$ 42,680 2 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS) \$ 42,680 2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS) \$ 42,680 2 TOTAL POLITICAL CONTRIBUTIONS (OR GUARANTEES OF LOANS) \$ 42,680 2 TOTAL POLITICAL CONTRIBUTIONS (OR GUARANTEES OF LOANS) \$ 42,680 2 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 43,890 0.0TSTANDING 6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 65,000 12 AFFIDAVIT Lswear, or affirm, under penalty of perjury, that the accompanying report is rune and correct and includes all information required to be reported by m under Title 15, Election Code. MS: Helen D. Kerwin			COMMITTEE ADDRESS			
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LOAN TOTALS OF THE REPORTING PERIOD \$ 65,000 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. Ms. Helen D. Kerwin Ms. Helen D. Kerwin				ST DAY OF THE	\$	43,896.20
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. Ms. Helen D. Kerwin Gignature of Candidate or Officeholder Sworn to and subscribed before me, by the said, this the, this the day of, zo, to certify which, witness my hand and seal of office. Signature of officer administering				OF THE LAST DAY	\$	65,000.00
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Signature of officer administering Printed name of officer administering Title of officer administering oath				, ulis ule		uay
	<u></u>	, _o, .o o.				
	Signature of offic	er administering	Printed name of officer administering	Title of office	r administeri	ng oath
Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da	Forms provided by Tex	xas Ethics Commission	www.ethics.state.tx.us		Version V	4.1.0.48da51f7

SUBTOTALS - C/OH	cc	FORM C/OH OVER SHEET PG 3 3 of 12		
18 FILER NAME Kerwin, Helen D. (Ms.)	19 Filer ID 00088323	(Ethics Commission Filers)		
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT			
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 42,680.0		
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4. SCHEDULE E: LOANS		\$		
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 449.5		
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			
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 CONTRIBUTIO	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 this	s form.	1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/12
PILER NAME Kerwin, Hele	n D. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088323
Date 09/26/2024			7 Amount of Contribution (\$) \$5,000.00
	Houston, TX 77027		
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)
Date 09/03/2024	Full name of contributor out-of-state PAC (IE Associated Builders & Contractors of TX PAC Contributor address; City; State; Zip Code	C	Amount of Contribution (\$) \$1,000.00
Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	Employer (See Instructions	;)
Date 09/26/2024	Full name of contributor out-of-state PAC (IE Focused Advocacy Political)#:)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code		
Principal occu	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occu	Contributor address; City; State; Zip Code	Employer (See Instructions	;)
Principal occu Date 09/26/2024	Contributor address; City; State; Zip Code Austin, TX 78746 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (IE Foster, Cornelia	Employer (See Instructions	Amount of Contribution (\$) \$2,000.00
Date 09/26/2024	Contributor address; City; State; Zip Code Austin, TX 78746 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (IE Foster, Cornelia Contributor address; City; State; Zip Code Grandview, TX 76050	Employer (See Instructions	Amount of Contribution (\$) \$2,000.00
Date 09/26/2024	Contributor address; City; State; Zip Code Austin, TX 78746 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (IE Foster, Cornelia Contributor address; City; State; Zip Code	Employer (See Instructions	Amount of Contribution (\$) \$2,000.00
Date 09/26/2024 Principal occu	Contributor address; City; State; Zip Code Austin, TX 78746 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (IE Foster, Cornelia Contributor address; City; State; Zip Code Grandview, TX 76050	Employer (See Instructions	Amount of Contribution (\$) \$2,000.00
Date 09/26/2024 Principal occu Retired Date	Contributor address; City; State; Zip Code Austin, TX 78746 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions	Amount of Contribution (\$) \$2,000.00 \$2,000.00

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/5 Rpt: 5/12 2 FILER NAME Filer ID (Ethics Commission Filers) 3 00088323 Kerwin, Helen D. (Ms.) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 08/31/2024 Hammer & Nails Club PAC \$1,000.00 6 Contributor address; City; State; Zip Code Fort Worth, TX 76102 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 07/16/2024 Hillco PAC \$5,000.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/09/2024 Kilen, Debbie \$104.10 Contributor address; City; State; Zip Code Joshua, TX 76058 Principal occupation / Job title (See Instructions) Employer (See Instructions) Antiques Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/26/2024 \$70.00 Lain, Kayla Contributor address; City; State; Zip Code Godley, TX 76044 Principal occupation / Job title (See Instructions) Employer (See Instructions) Trustee Godley ISD Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$5,000.00 09/26/2024 Lary III, Camm "Trey" Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Partner Allen Boone Humphries Robinson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

			·				
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/12	
2 FILER NAME				3	Filer ID (Ethics Commissi	ion Filers)	
	Kerwin, Hele					00088323	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 07/16/2024 Moak Casey PAC			7	Amount of Contribution (\$)	\$1,000.00	
		6 Contributor address; City; S	State; Zip Code		1		
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	\$)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/24/2024	Olson, Nova	<u> </u>				\$72.87
		Contributor address; City; S	State; Zip Code		1		
		Godley, TX 76044					
	-	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Registered N	√urse		SCA			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/23/2024	Parker, Robert					\$72.87
		Contributor address; City; S	tate; Zip Code				
		Burleson, TX 76028					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>-</u> ;)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/26/2024	Sampair, Nancy	_				\$100.00
		Contributor address; City; S	tate; Zip Code		1		
		St Paul, MN 55116					
	-	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	MHEFA			State of Minnesota			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	08/01/2024	Texans for Lawsuit Refor	m PAC				\$15,000.00
		Contributor address; City; S	tate; Zip Code	Ţ			
		Austin, TX 78701					
	Principal occu	Ipation / Job title (See Instructions	.c)	Employer (See Instructions			
	Гшора осса	pation / Job the (Joe mandelion	3)		<i></i> ,,		
				<u> </u>			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/5 Rpt: 7/12 2 FILER NAME Filer ID (Ethics Commission Filers) 3 00088323 Kerwin, Helen D. (Ms.) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/26/2024 **Texas Construction Association PAC** \$500.00 6 Contributor address; City; State; Zip Code Austin, TX 78701 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 07/01/2024 \$500.00 **Texas Dental Association** Contributor address; City; State; Zip Code Austin, TX 78704 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/23/2024 Trammell, Larry \$500.00 Contributor address; City; State; Zip Code Cleburne, TX 76031 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/10/2024 \$1,000.00 Vistra Employee PAC of Vistra Corp Contributor address; City; State; Zip Code Irving, TX 75039 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/24/2024 \$260.25 White, Tina Contributor address; City; State; Zip Code Alvarado, TX 76009 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Executive Recruiter** Self-Employed

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/12
2 FILER NAME Kerwin, Helen D. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088323
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 09/26/2024 Wholesale Beer Distributors of TX PAC 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$1,000.00
Austin, TX 78701	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	;)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 1/4 Rpt: 9/12	Kerwin, Helen D. (Ms.) 00088323			
4 Date	5 Payee name			
07/01/2024	First Financial Bank			
6 Amount (\$) \$5.00	 Payee address; City; State; Zip Code 400 NE Big Bend Trail Glen Rose, TX 76043 			
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Account Monthly Paper Fee 			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H			
Date	Payee name			
08/01/2024	First Financial Bank			
Amount (\$) \$5.00	Payee address; City; State; Zip Code 400 NE Big Bend Trail Glen Rose, TX 76043			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Account Monthly Paper Fee 			
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H			
Date	Payee name			
09/03/2024	First Financial Bank			
Amount (\$) \$5.00	Payee address; City; State; Zip Code 400 NE Big Bend Trail			
	Glen Rose, TX 76043			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Account Monthly Paper Fee 			
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	ILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 2/4 Rpt: 10/12	erwin, Helen D. (Ms.)		00088323	
4	Date	ayee name			
	07/10/2024	uggins, Wendy			
6	Amount (\$)	ayee address; City; State; Zip Co	ode		
	\$200.00	214 Sandstone Dr			
		leburne, TX 76033			
•	DUDDOSE				
8	PURPOSE OF	ategory (See Categories listed at the top of this schedule)	(b) Description	outside of Texas. Complete Schedule T.	
	EXPENDITURE	alaries/Wages/Contract Labor		, TX, officeholder living expense	
			Treasurer/Ad	min pay	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sou	ıght	Office held	
	Date	ayee name			
	08/15/2024	uggins, Wendy			
	Amount (\$)	ayee address; City; State; Zip Co	ode		
	\$100.00	214 Sandstone Dr			
		leburne, TX 76033			
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) alaries/Wages/Contract Labor		outside of Texas. Complete Schedule T. , TX, officeholder living expense min pay	
	Complete ONLY if direct	ndidate/Officeholder name Office sou	laht	Office held	
	expenditure to benefit C/OF		igin	Once neia	
	Data				
	Date 09/19/2024	ayee name uggins, Wendy			
	Amount (\$)	ayee address; City; State; Zip Co	ode		
	\$100.00	214 Sandstone Dr			
		leburne, TX 76033			
	PURPOSE	ategory (See Categories listed at the top of this schedule)	(b) Description		
	OF EXPENDITURE	alaries/Wages/Contract Labor		outside of Texas. Complete Schedule T.	
			Treasurer/Ad	, TX, officeholder living expense	
			i i easuiei/Au	ппп рау	
	Complete ONL V if direct	ndidate/Officeholder name Office sou	laht	Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		iyin	Onice held	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)		
	Sch: 3/4 Rpt: 11/12	Kerwin, Helen D. (Ms.)	00088323		
4	Date 09/23/2024	Payee name X Corp			
	Amount (\$) \$8.64	 Payee address; City; State; Zip Code 1355 Market St Ste 900 San Francisco, CA 94103 			
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	07/23/2024	X Corp			
	Amount (\$) \$8.64	Payee address; City; State; Zip Code 1355 Market St Ste 900 San Francisco, CA 94103			
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense posts		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	08/23/2024	X Corp			
	Amount (\$) \$8.64	Payee address; City; State; Zip Code 1355 Market St Ste 900 San Francisco, CA 94103			
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense posts		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
			1
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 4/4 Rpt: 12/12	Kerwin, Helen D. (Ms.)	00088323
4	Date 09/23/2024	5 Payee name X Corp	
6	Amount (\$) \$8.64	7 Payee address; City; State; Zip Code 1355 Market St Ste 900 San Francisco, CA 94103	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense rp posts
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held