# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comple		1 Filer ID (Ethics Comm 00031197		2 Total pages filed: 13
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
NAME	The Honorable	Richard D.			Date Received ELECTRONICALLY FILED
	NICKNAME	LAST Hayes		SUFFIX	10/07/2024
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT 1225 Sycamore Bend Rd.	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked  Receipt # Amount
Change of Address	Hickory Creek, TX 75065				
					Date Processed
					Date Imaged
5 CAMPAIGN TREASURER		FIRST		MI	
NAME	Mr.	Tracy			
	NICKNAME	LAST		SUFFIX	
		Murphree			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY	; STATE; ZIP CODE
ADDRESS	411 Ridgecrest Place				
(Residence or Business)	Sanger, TX 76266				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (940) 368-4430	E NUMBER E	EXTENSION		
8 REPORT TYPE	January 15 X	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 07/01/2024	TH	IROUGH	Month Day 09/26/20	
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 SOUGH	
	State Representative Distr	ict 57 Denton		State Represer	ntative District 57
		GO Т	O PAGE 2		

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 13

13 C / OH NAME	Hayes, Richard D. (T	ne Honorable)	<b>14</b> Filer ID 00031197	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made withou I officeholders are required to report this informati	it the candidate's or office	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE							
_	GENERAL							
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAI	NS)	\$ 2,700.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 22,182.33				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 23,153.82				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	<b>\$</b> 67,000.00				
<b>17</b> AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required t					
		The Hon	orable Richard D. Hay	res				
		Signature	of Candidate or Officehol	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	er administering	Printed name of officer administering	Title of office	r administering oath				

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

## FORM C/OH COVER SHEET PG 3

			C	OVER SHE	ET PG 3 3 of 13
	LER NA ayes, F	(Ethics Commis	ssion Filers)		
	CHEDU	SUBTOTA	L AMOUNT		
IN	AME OF	SCHEDULE			
1	X	\$	2,700.00		
2		\$			
3		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4	Х	SCHEDULE E: LOANS		\$	20,000.00
5	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	9,353.85
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	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	12,828.48
1	D. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
1	l. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
1	2.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/13	
2	FILER NAME Hayes, Rich	ard D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00031197	_
4	Date 09/25/2024	Full name of contributor	7 Amount of Contribution (\$) \$100.0	0	
8	Dringing agg	Denton, TX 76201  upation / Job title (See Instructions)	9 Employer (See Instructions	no)	
٥	Attorney	pation / Job title (See Instructions)	Hayes, Berry, White & \		
	Date 09/24/2024	Full name of contributor out-of-state PAC (ID#:_ Hayes, Richard (Rep.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	0
	Principal occu	Denton, TX 76201 upation / Job title (See Instructions)	Employer (See Instructions Hayes, Berry, White & \		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#: TREPAC Contributor address; City; State; Zip Code Austin, TX 78768-2246	)	Amount of Contribution (\$) \$2,500.0	0
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ns)	

			SCHEDULE E				
on Guide explains how to complete this	form.	ges Schedule E: 1 Rpt: 5/13					
D. (The Honorable)		3 Filer ID 000311	(Ethics Commission Filers) 97				
NITEMIZED LOANS			\$				
7 Name of lender Out-of-state PA Hayes, Richard (Rep.)	AC (ID#:	9 Loan Amount (\$) \$20,000.00					
8 Lender address; City; State;	Zip Code		10 Interest Rate				
No Hickory Creek, TX 75065							
ion / Job title (See Instructions)	13 Employer (See Instructions)						
	Hayes, Berry, White & \	/anzant LLF					
llateral	15 Check if personal funds we	ere deposited	into political account (See Instructions)				
17 Name of guarantor	•		19 Amount Guaranteed (\$)				
18 Guarantor address; City; State;	Zip Code						
ion	21 Employer (See Instructions	5)					
	D. (The Honorable)  NITEMIZED LOANS  7 Name of lender	NITEMIZED LOANS  7 Name of lender	D. (The Honorable)  7 Name of lender				

## 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		Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide			ense ages/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1:	2 FILER NAM	1E				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/5 Rpt: 6/13		chard D. (The Honor	rable)				00031197	
4	Date	5 Payee nam	•				<u> </u>		
	09/25/2024	,	Copies and Printing						
6	Amount (\$)	<b>7</b> Payee addr		State:	Zip Cod	le.			
ľ	\$287.95	1014 Dalla	•	otate,	21p 000				
	Ψ201.00	1011 Dane	20 21.						
		Denton, T	X 76205						
8	PURPOSE	(a) Category	See Categories listed at the to	op of this sche	dule)	b) Description			
	OF EXPENDITURE	Printing Ex				=			nplete Schedule T.
						#11 Envelop		officeholder living	g expense
						#II LIIVEIUP	U.S		
9	Complete ONLY if direct	Candidate/O	fficeholder name	0:	ffice soug	ht		Office he	eld
_	expenditure to benefit C/OI		mocholder Haille		moe souy				
	Date	Payee nam	e						
	09/25/2024	GII Ad Gro	oup						
	Amount (\$)	Payee addr	ess; City;	State;	Zip Cod	е			
	\$1,000.00	909 8th St	Ste 301						
		Wichita Fa	alls, TX 76301						
	PURPOSE	(a) Category	See Categories listed at the to	op of this sche	dule)	b) Description			
	OF EXPENDITURE	Advertisin				<u> </u>			plete Schedule T.
						Check if Austir Invitations	n, TX,	officeholder living	g expense
						iiivitations			
$\vdash$	Complete ONLY if direct	Candidate/O	fficeholder name	0:	ffice soug	ht		Office he	eld
	expenditure to benefit C/O		mocholaci flame	O	mee soug			Office III	Ciu
$\vdash$	Data								
	Date	Payee nam							
	09/07/2024	GII Ad Gro	-						
	Amount (\$)	Payee addr		State;	Zip Cod	e			
	\$500.00	909 8th St	Ste 301						
		Wichita Fa	alls, TX 76301						
	PURPOSE OF		See Categories listed at the to	op of this sche	dule)	b) Description			
	EXPENDITURE	Advertising	g Expense			ш		de of Texas. Com officeholder living	plete Schedule T.
									- Notepads for Mayors
						Only event			: 12 p 2 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 1
	Complete ONLY if direct	Candidate/O	fficeholder name	O	ffice soug	ht		Office he	eld
	expenditure to benefit C/OI				9				

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/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: 2/5 Rpt: 7/13	Hayes, Richard D. (The Honorable) 00031197	
4	Date	5 Payee name	
	07/15/2024	Hernandez, David (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$2,500.00	253 East Round Grove Road	
		Lewiswville, TX 75067	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
		Check if Austin, TX, officeholder living expense  Contract Labor - signs	
		Contract Labor Signs	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
ľ	expenditure to benefit C/O		
F	Date	Payee name	_
	07/16/2024	Independent Financial Bank	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.90	400 N Carroll Blvd	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Denton, TX 76201	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Bank Fees	
		Danki ees	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	<b>y</b>	
H	Date	Payee name	_
	08/22/2024	Lake Cities Chamber of Commerce	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$225.00	3101 Garrison Rd	
		Corinth, TX 76210	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Annual Membership Fees	
		, unidat membership i ees	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
H			

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

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

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

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)

07/11/2024 Lake Dallas City Hall	ilers)
4 Date 07/11/2024 5 Payee name Lake Dallas City Hall  6 Amount (\$) 7 Payee address; City; State; Zip Code 212 Main Street	
07/11/2024 Lake Dallas City Hall  6 Amount (\$) 7 Payee address; City; State; Zip Code \$10.00 \$10.00	
07/11/2024 Lake Dallas City Hall  6 Amount (\$) 7 Payee address; City; State; Zip Code \$10.00 \$10.00	
\$10.00 212 Main Street	
Lake Dallas, TX 75065	
Lake Dallas, TX 75065	
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.	
Check if Austin, 1X, officenolder living expense	
Parade Entry Fee	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
· · · · · · · · · · · · · · · · · · ·	
Date Payee name	
07/22/2024 Moore, Brandon (Mr.)	
Amount (\$) Payee address; City; State; Zip Code	
\$2,000.00 12716 Sky Harbor Dr	
Del Valle, TX 78617	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description	
OF EXPENDITURE  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense  Contract Labor	
Som act East.	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
Date Payee name 09/21/2024 Mrs. Lively's	
09/21/2024 Mrs. Lively's	
09/21/2024 Mrs. Lively's  Amount (\$) Payee address; City; State; Zip Code	
09/21/2024 Mrs. Lively's	
09/21/2024 Mrs. Lively's  Amount (\$) Payee address; City; State; Zip Code  \$974.25 721 E Hundley Drive	
09/21/2024 Mrs. Lively's  Amount (\$) Payee address; City; State; Zip Code 721 E Hundley Drive  Lake Dallas, TX 75065	
O9/21/2024 Mrs. Lively's  Amount (\$) Payee address; City; State; Zip Code  721 E Hundley Drive  Lake Dallas, TX 75065  PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description	
09/21/2024 Mrs. Lively's  Amount (\$) Payee address; City; State; Zip Code  721 E Hundley Drive  Lake Dallas, TX 75065  PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
O9/21/2024 Mrs. Lively's  Amount (\$) Payee address; City; State; Zip Code  \$974.25 721 E Hundley Drive  Lake Dallas, TX 75065  PURPOSE OF FOOd/Beverage Expense (b) Description  Check if travel outside of Texas. Complete Schedule T.	
O9/21/2024  Mrs. Lively's  Amount (\$)  \$974.25  Payee address; City; State; Zip Code  721 E Hundley Drive  Lake Dallas, TX 75065  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Amount (\$)  Payee address; City; State; Zip Code  \$974.25  Purpose  Lake Dallas, TX 75065  Purpose  Of  EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Catering  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	
O9/21/2024  Amount (\$)  Payee address; City; State; Zip Code  721 E Hundley Drive  Lake Dallas, TX 75065  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense catering	
Amount (\$)  Payee address; City; State; Zip Code  \$974.25  Purpose  Lake Dallas, TX 75065  Purpose  Of  EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Catering  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 4/5 Rpt: 9/13	Hayes, Richard D. (The Honorable) 00031197								
4	Date	5 Payee name								
	09/22/2024	PayPal								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$3.38	2211 North First Street								
		San Jose, CA 95131								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense								
		Fees								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	1								
	Date	Payee name								
	08/21/2024	Robert Huff Designs								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$285.00	P O Box 280595								
		Memphis, TN 38168								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Gift/Awards/Memorials Expense								
	LA LABITORE	Check if Austin, TX, officeholder living expense  Personalized Texas House Seal								
		reisonalized Texas House Seal								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	<b>U</b>								
	Date	Payee name								
	08/14/2024	TDCJ								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$530.43	P O Box 4013								
		Huntsville, TX 77342-4013								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		Tray, Coasters, Rocking Horse, Desktop Gavel Holder								
	Complete ONLY if direct									
	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
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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ee Le	t/Awards/Memoria gal Services ne Instruction (	S Expense		ages	Contract Labor		Travel Out of D OTHER (enter	a category not listed	above)
_	Tatal as a constitute Edu	la ===							<u> </u>	Ell ID	/Eth: 0	: =::
1	Total pages Schedule F1: Sch: 5/5 Rpt: 10/13	l		d D. (The H	onorable)				ı	Filer ID 00031197	(Ethics Commi	ssion Filers)
4	Date	5 Pav	ree name						_			
_	09/24/2024			tion of Repu	blican Wome	en						
6	Amount (\$)	<b>7</b> Pay	ee address;	City;	State:	; Zip Co	de					
	\$1,000.00	137	740 N Hlgh	way 183, St	e J4							
		l Aus	stin, TX 78	750-1832								
8	PURPOSE				the top of this sch	andula)	(b)	Description				
ľ	OF		ent Expens		tne top of this sch	ledule)	(~)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE	"	THE EXPENS	C						officeholder livin		
								Sponsorship/	/Tic	kets Tribute	e to Women	
9	Complete ONLY if direct		lidate/Office	nolder name	(	Office sou	ght			Office h	ield	
	expenditure to benefit C/O	Н										
	Date	Pay	ee name									
	09/24/2024	Wir	nRed									
	Amount (\$)	Pay	ee address;	City;	State:	; Zip Co	de					
	\$3.94			Blvd. Ste. 53		•						
	, , , ,											
		A rli	naton \/A	22200								
		ļ., —	ngton, VA	22209		1						
	PURPOSE OF	( <b>a)</b> Cat	(	Categories listed at	the top of this sch	nedule)	(b)	Description				
	EXPENDITURE	Fee	es							de of Texas. Cor officeholder livin	nplete Schedule T.	
								Fees	i, i A,	onicendidei iiviii	ig experise	
								1 003				
	Complete ONLY if direct	Cand	lidate/Office	nolder name		Office sou	aht			Office h	neld	
	expenditure to benefit C/O			10.00. 110.110		J00 00u,	9			000	.0.0	
$\vdash$												

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

## **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printing I Legal Services Salaries/ The Instruction Guide explains how to c	Expense Wages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 11/13		Hayes, Richard D. (The Honorable)			00031197
4	Date	5	Payee name			
	07/23/2024		Houston Sign Company			
6	Amount (\$)	7	Payee address; City; State; Zip C	ode		
	\$8,929.38		5801 Chimney Rock Road			
	Reimbursement from political contributions intended		Houston, TX 77081			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	С	check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		С	check if Austin, TX, officeholder living expense
				Yard Signs with	Sta	lkes and Grommets
9	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name	Office sought		Office held
H	Date		Payee name		_	
	07/13/2024		Lake Cities Chamber of Commerce			
⊢	Amount (\$)	H	Payee address; City; State; Zip C	nde		
	\$140.00		3101 Garrison Rd	ouc		
			JIJI Gallison Nu			
	X Reimbursement from political contributions intended		Corinth, TX 76210			
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	c	check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Food/Beverage Expense		С	check if Austin, TX, officeholder living expense
	EXI ENDITORE			Monthly Lunched	วทร	- June-December
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name	Office sought		Office held
Г	Date		Payee name			
	09/21/2024		PayPal			
⊢	Amount (\$)	$\vdash$	Payee address; City; State; Zip C	ode:	_	
	\$211.09		2211 North First Street			
	X Reimbursement from political contributions intended		San Jose, CA 95131			
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	=	check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Gift/Awards/Memorials Expense	L	_lc	check if Austin, TX, officeholder living expense
l				Merchandise		
L		L				
	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name	Office sought		Office held
$\vdash$					—	

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

#### **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		Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services The Instruction Guide explains		xpense Vages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 2/3 Rpt: 12/13	2 FILER NAM	E hard D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00031197	-
_	•	_	<u> </u>			00001137	_
4	Date 08/31/2024	5 Payee name Print Place					
6	Amount (\$)	<b>7</b> Payee addre	ess; City; State	; Zip Co	ode		
	\$101.21	1130 Ave	H East				
	Reimbursement from political contributions intended	Arlington, 1	ΓX 76011				
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	nedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Printing Ex	pense			Check if Austin, TX, officeholder living expense	
	LAI LINDITORE				Invitations		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held	
	Date	Payee name	)				
	08/31/2024	Print Place					
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode		-
	\$48.72	1130 Ave	H East				
	Reimbursement from						
	X political contributions intended	Arlington, 7	ΓX 76011				
	PURPOSE	Category (s	See Categories listed at the top of this sch	nedule)	Description	Check if travel outside of Texas. Complete Schedule T.	-
	OF EXPENDITURE	Printing Ex	pense			Check if Austin, TX, officeholder living expense	
	LAI LINDITORE				Invitations		
	Complete ONLY if direct expenditure to benefit	Candidate/Office	eholder name		Office sought	Office held	
	C/OH						
	Date	Payoo namo	<u> </u>				=
	08/25/2024	Payee name Stevens, M					
	Amount (\$)	Payee addre		; Zip Co	nde		_
	\$3,100.00	1 1	na Ave Box 292	, <u>L</u> .p oc	,40		
	Reimbursement from						
	x political contributions intended	Lubbock, T	X 79413				
	PURPOSE	Category (S	See Categories listed at the top of this sch	nedule)	Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Consulting	Expense		L	Check if Austin, TX, officeholder living expense	
					Consulting		
	Complete ONII V if allow	Condidate /Off	halden name		Office	Office hald	_
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	enoider name		Office sought	Office held	
	C/OH						_

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule G: FILER NAME (Ethics Commission Filers) Sch: 3/3 Rpt: 13/13 Hayes, Richard D. (The Honorable) 00031197 Date Payee name 09/26/2024 **USPS** Postmaster 6 Amount (\$) Payee address; City; State; Zip Code \$219.00 823 Congress Ave. Ste 150 Reimbursement from political contributions Х intended Austin, TX 78701 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Postage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/31/2024 Uline Amount (\$) Payee address; City; State; Zip Code \$79.08 P O Box 88741 Reimbursement from political contributions Χ Chicago, IL 60680-1741 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Gift/Awards/Memorials Expense **EXPENDITURE Envelopes** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH