CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

| | ` | cs Commission Filers) | 2 Total pages filed: | | | OFFICE U | SE ONLY |
|---|------------------------|---|------------------------------|--|-------------------|--------------------------|-----------------------------------|
| | 00088220 | | 24 | | | Date Received | |
| | CANDIDATE / | MS / MRS / MR | FIRST | | MI | ELECTRONICA | LLY FILED |
| | OFFICEHOLDER NAME | Mr. | Tony | | | 10/07/2024 | |
| | | NICKNAME | LAST | | SUFFIX | 1 | |
| | | | Adams | | | Date Hand-delivered or I | Date Postmarked |
| | ORIGINAL | January 15 | Runoff | Other (s | specify) | 1 | |
| | REPORT TYPE | July 15 | Exceeded modified r | eporting limit | | Receipt # | Amount |
| | | X 30th day before election | 15th day after campa | | | | |
| | | 8th day before election | appointment (officeh | • • • | | Date Processed | |
| 5 | ORIGINAL PERIOD | Month Day Yea | <u> </u> | Month Day | Year | | |
| | COVERED | 07/01/2024 | THROUGH | 09/26/2024 | i cai | Date Imaged | |
| 6 | EXPLANATION OF C | | | | | | |
| | | ormat as per https://www.et | hice state tv us/data/filir | aginfo/HowToImportC | `ontributions And | Evnenditures ndf | |
| | Only lixed the Date to | iiiiai as pei iiiips.//www.ei | ilics.state.tx.us/uata/iliii | gillio/How Folliporte | OHUBUUOISAHU | Experiultures.pur | |
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| | | | | | | | |
| | AEEID AV // T | | | | | | |
| ′ | AFFIDAVIT | | I swe | ar, or affirm, under p | enalty of perjury | , that this corrected | report is true |
| | | | | correct. | , , , , | | • |
| | | | Chec | k the box next to any | and all applicat | ole statements: | |
| | | | | , | | | |
| | | | | Semiannual reports | | | |
| | | | | was made in good fa misrepresent the info | | | or to |
| | | | | | | | |
| | | | X | Other reports: 18 | | | |
| | | | | report not later than that the report as ori | the 14th busines | ss day after the date | l learned |
| | | | | swear, or affirm, that | | | |
| | | | | filed was made in go | | | |
| | | | | | | | |
| | | | | | Mr. Tony As | dame | |
| | | | | | Mr. Tony Ad | | |
| | 4551V NOTABY OT | 414B / 0EAL ABOVE | | Signatu | ire of Candidate | or Officeholder | |
| | AFFIX NOTARY ST | AMP / SEAL ABOVE | | | | | |
| | Sworn to and subset | rihad hafara ma by the sai | d | | thic th | 10 | day |
| | of | ribed before me, by the sai , 20, to cer | utify which witness my h | and and soal of office | , tills tf | ıc | day |
| | UI | , 20, to cer | ary writers, withess my fi | and and Seal Of UIIICE | ٠. | | |
| | | | | | | | |
| | | | | | | | |
| | Signature of office | er administering oath | Printed name of off | icer administering oa | th T | Title of officer admini | stering oath |
| | | | | | - | | · · · · · · · · · · · · · · · · · |

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction (| Guide explains how to complete this t | form. 1 Filer ID (Ethics Commission 00088220 | | 2 Total pages filed: 24 |
|-------------------------|---------------------------------------|--|------------------|--|
| 3 CANDIDATE / | MS / MRS / MR FIRST | | MI | OFFICE USE ONLY |
| OFFICEHOLDER NAME | Mr. Tony | | | Date Received |
| | | | | ELECTRONICALLY FILED |
| | NICKAAME | | CHEEN | 10/07/2024 |
| | NICKNAME LAST Adams | _ | SUFFIX | 10/01/2024 |
| | | | | |
| 4 CANDIDATE / | ADDRESS / PO BOX; APT / SUITE | #; CITY; | ZIP CODE | Date Hand-delivered or Date Postmarked |
| OFFICEHOLDER MAILING | 7548 Preston Rd. | | | |
| ADDRESS | Ste. 141 #220 | | | Receipt # Amount |
| Change of Address | Frisco, TX 75034 | | | |
| 🗀 | | | | Date Processed |
| | | | | Date Imaged |
| | | | | Date illiageu |
| 5 CAMPAIGN | MS / MRS / MR FIRST | | MI | |
| TREASURER | Ms. Karla | | 1411 | |
| NAME | IVIS. Kana | | | |
| | | | | |
| | NICKNAME LAST | | SUFFIX | |
| | Masse | у | | |
| | | | | |
| 6 CAMPAIGN TREASURER | STREET ADDRESS (NO PO BOX PL | EASE); APT / | SUITE #; CITY; | STATE; ZIP CODE |
| ADDRESS | 2159 Spencer Ln. | | | |
| (Residence or Business) | | | | |
| (| Carrollton, TX 75010 | | | |
| | | | | |
| | | | | |
| 7 CAMPAIGN TREASURER | AREA CODE PHONE NUME | BER EXTENSION | | |
| PHONE | (214) 780-8680 | | | |
| | | | | |
| 8 REPORT TYPE | January 15 X 30th o | day before election R | unoff | 15th day after campaign treasurer |
| | January 15 X 30th o | day before election Rt | | appointment (officeholder only) |
| | July 15 8th da | | ceeded modified | Final Report (Attach C/OH-FR) |
| | | — re | porting limit | • |
| 9 PERIOD | Month Day Year | | Month Day | Year |
| COVERED | 07/01/2024 | THROUGH | 09/26/2024 | 1 |
| | | | | |
| 10 ELECTION | ELECTION DATE | | ELECTION TYPE | |
| | Month Day Year | Primary | Runoff | Other |
| | 11/05/2024 | X General | Special | _ |
| | | X General | Бресіаі | |
| 11 055105 | OFFICE LIFL D (#) | i . | OFFICE COLLOCAT | (if I are a) |
| 11 OFFICE | OFFICE HELD (if any) | 1 | L2 OFFICE SOUGHT | |
| | | | State Representa | tilve District 61 |
| | | | | |
| | | | | |
| | | | | |
| | | GO TO PAGE 2 | | |
| I | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 24

| 13 C / OH NAME | Adams, Tony (Mr.) | | 14 Filer ID (00088220 | Ethics Commission Filers) | | | | | | |
|--|--|--|-------------------------------|---------------------------|--|--|--|--|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | political contributions accepted or political expenditures may have been made without to officeholders are required to report this information | the candidate's or office | holder's knowledge or | | | | | | |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | | | | | | | |
| | X GENERAL | Blue Horizon Texas PAC | | | | | | | | |
| | | COMMITTEE ADDRESS | | | | | | | | |
| | SPECIFIC | PO Box 780162 | | | | | | | | |
| | | San Antonio, TX 78278 | | | | | | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | | | | | | | |
| | | Barnett, Claire | | | | | | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRES | SS | | | | | | | |
| | | TX | | | | | | | | |
| 16 CONTRIBUTION TOTALS | N PLEDGES, LOANS, CTRONICALLY) | \$ 100.00 | | | | | | | | |
| | | CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS | 5) | \$ 2,286.50 | | | | | | |
| EXPENDITURE TOTALS | | \$ 0.00 | | | | | | | | |
| | 4. TOTAL POLITIC | CAL EXPENDITURES | | \$ 723.83 | | | | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE L ERIOD | AST DAY OF THE | \$ 2,286.00 | | | | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIF OF THE REPOR | PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD | OF THE LAST DAY | \$ 0.00 | | | | | | |
| 17 AFFIDAVIT | | I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code. | | | | | | | | |
| | | | r. Tony Adams | | | | | | | |
| | | Signature of | Candidate or Officehole | der | | | | | | |
| AFFIX NO | TARY STAMP / SEAL AB | OVE | | | | | | | | |
| | | aid | , this the | day | | | | | | |
| of | , 20, to c | ertify which, witness my hand and seal of office. | | | | | | | | |
| Signature of office | Signature of officer administering Printed name of officer administering Title of officer administering oath | | | | | | | | | |

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

| | | | | J V L. | 4 of 24 |
|----|--------|--|-----------------------------|---------|----------------------|
| | ER NAN | ME ony (Mr.) | 19 Filer ID 00088220 | (Ethics | s Commission Filers) |
| | | E SUBTOTALS SCHEDULE | | S | SUBTOTAL AMOUNT |
| 1. | X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 2,186.50 |
| 2. | X | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 100.00 |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4. | | SCHEDULE E: LOANS | | \$ | |
| 5. | X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | 3 | \$ | 723.83 |
| 6. | | \$ | | | |
| 7. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | DNS | \$ | |
| 8. | | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 9. | | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ | |
| 10 | . 🔲 | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (| OF C/OH | \$ | |
| 11 | . 🔲 | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | DNS | \$ | |
| 12 | . 🔲 | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER | RETURNED | \$ | |
| | | | | | |
| ĺ | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | IONS | | SCHEDULE | A1 |
|--|---------------------------|---|--|----------------|---|-----------|
| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 1/15 Rpt: 5/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | 3 | Filer ID (Ethics Commission 00088220 | Filers) |
| 4 | Date 07/06/2024 | Full name of contributor |)#:) | 7 | Amount of Contribution (\$) | \$3.00 |
| 8 | Principal occu | Nashua, NH 03062 pation / Job title (See Instructions) | 9 Employer (See Instructions | e) | | |
| _ | None | pation 7 300 title (See Instructions) | None None | s) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID Bertan, Michael (Mr.) Contributor address; City; State; Zip Code Grass Lake, MI 49240 | | | Amount of Contribution (\$) | \$2.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | None | | None | | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID Bishop, Michael (Mr.) Contributor address; City; State; Zip Code |)····································· | | Amount of Contribution (\$) | \$6.00 |
| | | Houston, TX 77094 | | | | |
| | Principal occu None | pation / Job title (See Instructions) | Employer (See Instructions None | s) | | |
| 08/25/2024 Black, Linda (Mrs.) Contributor address; City; State; Zip Code | | - ` | | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu None | pation / Job title (See Instructions) | Employer (See Instructions None | <u>l</u> s) | | |
| | Date 08/13/2024 | Full name of contributor out-of-state PAC (IDBlack, Mary (Mrs.) Contributor address; City; State; Zip Code Austin, TX 78756 |)#:) | | Amount of Contribution (\$) | \$8.00 |
| | Principal occu None | pation / Job title (See Instructions) | Employer (See Instructions None | s) | | |
| | | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDULE | A1 |
|---|---|---|--|-----|---------------------------------|----------------|---|---------|
| | The Instruc | ction Guide explains how | to complete this fo | orr | n. | 1 | Total pages Schedule A1: Sch: 2/15 Rpt: 6/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | | 3 | Filer ID (Ethics Commission 00088220 | Filers) |
| 4 | Date 08/15/2024 | 5 Full name of contributor Black, Mary Ellen (Mrs.)6 Contributor address; City; St | out-of-state PAC (ID#:_ | |) | 7 | Amount of Contribution (\$) | \$4.00 |
| _ | | Austin, TX 78756 | . 1 | _ | | _ | | |
| 8 | Principal occu None | pation / Job title (See Instructions | i) | 9 | Employer (See Instructions None | 5) | | |
| | Date 07/18/2024 | Full name of contributor Brodsky, Nina (Mrs.) Contributor address; City; Si | | |) | | Amount of Contribution (\$) | \$2.00 |
| | Principal occu | Austin, TX 78731 pation / Job title (See Instructions | s) | | Employer (See Instructions | <u> </u> s) | | |
| | None | | | | None | | | |
| | Date 09/24/2024 | Full name of contributor Brodsky, Nina (Mrs.) Contributor address; City; Si | out-of-state PAC (ID#:_ ate; Zip Code | |) | | Amount of Contribution (\$) | \$2.50 |
| | | Austin, TX 78731 | | | | | | |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | <u>I</u> S) | | |
| | Date Full name of contributor out-of-state PAC (ID#: 08/12/2024 Brown, Mark (Mr.) | | | |) | | Amount of Contribution (\$) | \$20.00 |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | <u>I</u> S) | | |
| | Date 07/14/2024 | Full name of contributor Carranzza, Suzanna (Mrs Contributor address; City; St Austin, TX 78701 | | |) | | Amount of Contribution (\$) | \$5.00 |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | s) | | |
| | | | , | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | IS | | SCHEDUL | E A1 |
|-----------------|---------------------------|---|--|---------------------------------|----------------|---|-----------|
| | The Instruc | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 3/15 Rpt: 7/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | n Filers) |
| 4 | Date 08/15/2024 | 5 Full name of contributor [Carranzza, Suzanna (Mrs.)6 Contributor address; City; Sta | | | 7 | Amount of Contribution (\$) | \$5.00 |
| | | Austin, TX 78701 | | | | | |
| 8 | Principal occu None | pation / Job title (See Instructions) | 9 | Employer (See Instructions None | 5) | | |
| | Date 07/08/2024 | Full name of contributor [Cobb, Stephen (Mr.) Contributor address; City; Sta | |) | | Amount of Contribution (\$) | \$4.00 |
| | Principal occu | Austin, TX 78731 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> s) | | |
| | None | | | None | | | |
| | Date 08/15/2024 | Full name of contributor [Colina, Hazel (Mrs.) Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code | | • | Amount of Contribution (\$) | \$8.00 |
| | | Buda, TX 78610 | | | | | |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| Date 08/13/2024 | | Full name of contributor Dems Club Contributor address; City; Sta Frisco, TX 75036 | Full name of contributor out-of-state PAC (ID#:) | | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | <u>l</u> s) | | |
| | Date 09/24/2024 | Full name of contributor Diehl, Chris (Mr.) Contributor address; City; Sta Mercer Island, WA 98040 | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | Ν | IS | | SCHEDULE | ■ A1 |
|---|---------------------------|---|-----|---------------------------------|-----------|---|-------------|
| | The Instru | ction Guide explains how to complete this | for | m. | 1 | Total pages Schedule A1: Sch: 4/15 Rpt: 8/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | Filers) |
| 4 | Date 09/24/2024 | 5 Full name of contributor out-of-state PAC (ID#: Diehl, Chris (Mr.) 6 Contributor address; City; State; Zip Code | | | 7 | Amount of Contribution (\$) | \$10.00 |
| _ | Deinsinal | Mercer Island, WA 98040 | 1. | Frankrije (Ozakastian | | | |
| 8 | None | pation / Job title (See Instructions) | 9 | Employer (See Instructions None | 5) | | |
| | Date 08/24/2024 | Full name of contributor out-of-state PAC (ID#: Dudley, Sandra (Mrs.) Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$6.00 |
| | Principal occu | Forks, WA 98331 | _ | Employer (See Instructions | ·/- | | |
| | None | pation / Job title (See Instructions) | | Employer (See Instructions None | ·) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#: EileenMcCusker, Eileen (Mrs.) Contributor address; City; State; Zip Code | |) | • | Amount of Contribution (\$) | \$1.00 |
| | | Morgantown, WV 26508 | | | | | |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | s) | | |
| | Date 08/14/2024 | Full name of contributor out-of-state PAC (ID#:_ Engine LLC Contributor address; City; State; Zip Code Washington, DC 20001 | |) | • | Amount of Contribution (\$) | \$9.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | <u>s)</u> | | |
| | Date 09/25/2024 | Full name of contributor out-of-state PAC (ID#: Engine LLC Contributor address; City; State; Zip Code Washington, DC 20001 | | | • | Amount of Contribution (\$) | \$36.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | IS | | SCHEDUL | E A1 |
|---|---------------------------|--|--|---------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 5/15 Rpt: 9/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | n Filers) |
| 4 | Date 09/25/2024 | 5 Full name of contributor [Engine LLC6 Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code | | 7 | Amount of Contribution (\$) | \$247.00 |
| | | Washington, DC 20001 | | | | | |
| 8 | Principal occu None | pation / Job title (See Instructions) | 9 | Employer (See Instructions None | 5) | | |
| | Date 07/11/2024 | Full name of contributor Fine, Mary Ellen (Mrs.) Contributor address; City; Sta | | | | Amount of Contribution (\$) | \$4.00 |
| | Principal occu | Austin, TX 78745 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> s) | | |
| | None | | | None | | | |
| | Date 08/03/2024 | Full name of contributor Fine, Mary Ellen (Mrs.) Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$4.00 |
| | | Austin, TX 78745 | | | | | |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| | Date 09/01/2024 | Full name of contributor Fine, Mary Ellen (Mrs.) Contributor address; City; Sta Austin, TX 78745 | |) | | Amount of Contribution (\$) | \$4.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | <u>I</u> S) | | |
| | Date 08/15/2024 | Full name of contributor Georges, Chris (Mrs.) Contributor address; City; Sta Los Angeles, CA 90049 | out-of-state PAC (ID#: | | • | Amount of Contribution (\$) | \$2.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | S) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | N | IS | | SCHEDULE | A1 |
|--|---------------------------|--|----------|---------------------------------|----------------|--|-----------|
| | The Instruc | ction Guide explains how to complete this f | or | m. | 1 | Total pages Schedule A1: Sch: 6/15 Rpt: 10/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | Filers) |
| 4 | Date 08/27/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$8.00 |
| _ | 5 | Sherman Oaks, CA 91403 | <u> </u> | | | | |
| 8 | None | pation / Job title (See Instructions) | 9 | Employer (See Instructions None | S) | | |
| | Date 07/12/2024 | Contributor address; City; State; Zip Code | |) | • | Amount of Contribution (\$) | \$4.00 |
| | Principal occu None | Austin, TX 78757 pation / Job title (See Instructions) | | Employer (See Instructions None | <u> </u> s) | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID#: Johnston, Benjamin (Mr.) Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$9.00 |
| | Principal occu None | Austin, TX 78705 pation / Job title (See Instructions) | | Employer (See Instructions None | <u> </u> s) | | |
| Date Full name of contributor out-of-sta 08/27/2024 Keysor, Georgina (Mrs.) | | Keysor, Georgina (Mrs.) Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$8.00 |
| | Principal occu None | Austin, TX 78757 pation / Job title (See Instructions) | | Employer (See Instructions None | <u> </u> s) | | |
| | Date 07/19/2024 | Full name of contributor out-of-state PAC (ID#:_Laine, Marsha (Mrs.) Contributor address; City; State; Zip Code Austin, TX 78745 | |) | | Amount of Contribution (\$) | \$2.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTION | S | | SCHEDULE | A1 |
|---|---------------------------|---|------------------------------------|---------------------------------|----------|--|---------|
| | The Instruc | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 7/15 Rpt: 11/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | Filers) |
| 4 | Date 08/25/2024 | Lankford, Nancy (Mrs.) | out-of-state PAC (ID#: Zip Code | | 7 | Amount of Contribution (\$) | \$1.00 |
| _ | | Houston, TX 77098 | T- | | | | |
| 8 | None | pation / Job title (See Instructions) | 9 | Employer (See Instructions None | 5) | | |
| | Date 07/14/2024 | Full name of contributor LeClercq, Terri (Mrs.) Contributor address; City; State; | | | | Amount of Contribution (\$) | \$4.00 |
| | Principal occu | Austin, TX 78751 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | None | , | | None | , | | |
| | Date 07/14/2024 | Full name of contributor LeClercq, Terri (Mrs.) Contributor address; City; State; | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$4.00 |
| | | Austin, TX 78751 | | | | | |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None |) | | |
| | Date 07/06/2024 | Full name of contributor Lemmond, Byron (Mr.) Contributor address; City; State; Katy, TX 77449 | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$5.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| | Date 08/02/2024 | Full name of contributor Lemmond, Byron (Mr.) Contributor address; City; State; Katy, TX 77449 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$5.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | () | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | ION | IS | | SCHEDULE | A1 |
|-----------------|---------------------------|--|-------|---------------------------------|----------------|--|-----------|
| | The Instruc | ction Guide explains how to complete this | s for | m. | 1 | Total pages Schedule A1: Sch: 8/15 Rpt: 12/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | Filers) |
| 4 | Date 09/11/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$5.00 |
| | | Katy, TX 77449 | | | | | |
| 8 | Principal occu None | pation / Job title (See Instructions) | 9 | Employer (See Instructions None | 5) | | |
| | Date 08/02/2024 | Contributor address; City; State; Zip Code | | | • | Amount of Contribution (\$) | \$8.00 |
| | Principal occu None | Austin, TX 78731 pation / Job title (See Instructions) | | Employer (See Instructions None | <u> </u> S) | | |
| | Date 08/28/2024 | Full name of contributor out-of-state PAC (ID Lokensgard, Mark (Mr.) Contributor address; City; State; Zip Code | #: | | • | Amount of Contribution (\$) | \$6.00 |
| | Principal occu None | San Antonio, TX 78254 pation / Job title (See Instructions) | | Employer (See Instructions None | <u> </u> s) | | |
| Date 08/03/2024 | | Full name of contributor out-of-state PAC (ID#:) Mangini, Lauren (Mrs.) Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$30.00 |
| | Principal occu None | Boston, MA 02125 pation / Job title (See Instructions) | | Employer (See Instructions None | <u> </u> S) | | |
| | Date 08/15/2024 | Full name of contributor out-of-state PAC (ID McCutchen, Mila (Mrs.) Contributor address; City; State; Zip Code Austin, TX 78746 | #: |) | | Amount of Contribution (\$) | \$4.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| | | | • | | | | |

| | MONET | ARY POLITICAL (| | SCHEDULE A1 | | | | |
|---|---|---|--|-------------|--|----------------|--------------------------------------|-----------|
| | The Instruc | ction Guide explains hov | n. | 1 | Total pages Schedule A1: Sch: 9/15 Rpt: 13/24 | | | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | | 3 | Filer ID (Ethics Commission 00088220 | n Filers) |
| 4 | Date 07/12/2024 | | | 7 | Amount of Contribution (\$) | \$21.00 | | |
| _ | | Austin, TX 78703 | | _ | | Ĺ | | |
| 8 | Principal occu None | pation / Job title (See Instructions | structions) 9 Employer (See Instructions None | | 5) | | | |
| | Date 09/24/2024 | Merril, Walter (Mr.) Contributor address; City; State; Zip Code | | | | | Amount of Contribution (\$) | \$25.00 |
| | Allen, TX 75002 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | <u> </u> s) | | |
| | None | | | | None | | | |
| | Date 07/14/2024 | Full name of contributor out-of-state PAC (ID#:) Munro, Marilyn (Mrs.) Contributor address; City; State; Zip Code | | | | | Amount of Contribution (\$) | \$100.00 |
| | | McKinney, TX 75071 | | | | | | |
| | Principal occu None | pation / Job title (See Instructions | 5) | | Employer (See Instructions None | 5) | | |
| | | | | |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu None | pation / Job title (See Instructions | 5) | | Employer (See Instructions None | <u>I</u> 5) | | |
| | Date 09/25/2024 | Full name of contributor out-of-state PAC (ID#:) Munro, Marilyn (Mrs.) Contributor address; City; State; Zip Code McKinney, TX 75071 | | | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu None | pation / Job title (See Instructions | 5) | | Employer (See Instructions None | 5) | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL (| | SCHEDULE A1 | | | | |
|---|--|---|--|-------------|---|--------|--------------------------------------|-----------|
| | The Instruc | ction Guide explains how | n. | 1 | Total pages Schedule A1: Sch: 10/15 Rpt: 14/24 | | | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | | 3 | Filer ID (Ethics Commission 00088220 | n Filers) |
| 4 | Date 07/12/2024 | | | 7 | Amount of Contribution (\$) | \$8.00 | | |
| _ | Deignigal | Kyle, TX 78640 | <u>, </u> | _ | Franks or (Cook batterations | | | |
| 8 | None None | pation / Job title (See Instructions | ee Instructions) 9 | | ··· | | | |
| | Date 07/14/2024 | | | | | | Amount of Contribution (\$) | \$8.00 |
| | MARSHALL, TX 75672 Principal occupation / Job title (See Instructions) Employer (See | | | | | ;) | | |
| | None | | | | None | | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID#:) 4/2024 Overton, David (Mr.) Contributor address; City; State; Zip Code | | | | | Amount of Contribution (\$) | \$250.00 |
| | | Austin, TX 78723 | | | | | | |
| | Principal occu None | pation / Job title (See Instructions | s) | | Employer (See Instructions None | s) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 08/20/2024 PAC Contributor address; City; State; Zip Code San Antonio, TX 78278 | | | | , | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | 5) | | |
| | Date 07/06/2024 | Full name of contributor out-of-state PAC (ID#:) Perry, Sylvia (Mrs.) Contributor address; City; State; Zip Code Austin, TX 78752 | | | | | Amount of Contribution (\$) | \$8.00 |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | 5) | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL (| | SCHEDULE A1 | | | | |
|---|--|---|---------------------|-------------|---------------------------------|----------------|---|-----------|
| | The Instruc | ction Guide explains how | to complete this fo | rr | m. | 1 | Total pages Schedule A1: Sch: 11/15 Rpt: 15/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | | 3 | Filer ID (Ethics Commission 00088220 | n Filers) |
| 4 | Date 08/27/2024 | 5 Full name of contributor out-of-state PAC (ID#:) Reagan, Brian (Mr.) 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$100.00 | | |
| _ | | McKinney, TX 75071 | | | | _ | | |
| 8 | None None | pation / Job title (See Instructions |) | 9 | Employer (See Instructions None | 5) | | |
| | Date 07/14/2024 | 4/2024 Robillard, Melinda (Mrs.) Contributor address; City; State; Zip Code | | | | • | Amount of Contribution (\$) | \$8.00 |
| | Austin, TX 78723 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | <u> </u> s) | | |
| | None | | | | None | | | |
| | Date 07/27/2024 | | | | | | Amount of Contribution (\$) | \$5.00 |
| | | Austin, TX 78757 | | | | | | |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | 5) | | |
| | Date 08/15/2024 | | | | | | Amount of Contribution (\$) | \$5.00 |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | <u>s)</u> | | |
| | Date 07/18/2024 | Full name of contributor out-of-state PAC (ID#:) SALAS-PORRAS, Anna (Mrs.) Contributor address; City; State; Zip Code Austin, TX 78756 | | | | • | Amount of Contribution (\$) | \$50.00 |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | 5) | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL C | | SCHEDULE A1 | | | | |
|---|--|---|---------------------|-------------|---------------------------------|---|---|-----------|
| | The Instruc | ction Guide explains how | to complete this fo | rr | n. | 1 | Total pages Schedule A1: Sch: 12/15 Rpt: 16/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | | 3 | Filer ID (Ethics Commission 00088220 | n Filers) |
| 4 | Date 08/02/2024 | | | 7 | Amount of Contribution (\$) | \$100.00 | | |
| | | Chicopee, MA 01020 | | | | | | |
| 8 | Principal occu None | pation / Job title (See Instructions |) | 9 | Employer (See Instructions None | 5) | | |
| | Date 07/06/2024 | | | | | | Amount of Contribution (\$) | \$8.00 |
| | Austin, TX 78752 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | <u> </u> s) | | |
| | None | | | | None | | | |
| | Date 08/05/2024 | | | | | • | Amount of Contribution (\$) | \$23.00 |
| | | Austin, TX 78752 | | | | | | |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions None | 5) | | |
| | Date 07/12/2024 | Date Full name of contributor out-of-state PAC (ID#:) | | | | | Amount of Contribution (\$) | \$2.00 |
| | Principal occu None | Austin, TX 78756 pation / Job title (See Instructions |) | | Employer (See Instructions None | <u> </u> | | |
| | Date 07/19/2024 | e Full name of contributor out-of-state PAC (ID#:) | | | | | Amount of Contribution (\$) | \$2.00 |
| | Principal occu None | pation / Job title (See Instructions | | | Employer (See Instructions None | 5) | | |
| | | | , | | | | | |

| | MONET | ARY POLITICAL C | | SCHEDULE A1 | | | |
|---|---------------------------|---|-----|--------------------------------|---|--------------------------------------|---------|
| | The Instruc | ction Guide explains how | rm. | 1 | Total pages Schedule A1: Sch: 13/15 Rpt: 17/24 | | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | Filers) |
| 4 | Date 08/15/2024 | | | 7 | Amount of Contribution (\$) | \$2.00 | |
| _ | | Austin, TX 78750 | | | Ĺ | | |
| 8 | Principal occu None | ipal occupation / Job title (See Instructions) 9 | | s) | | | |
| | Date 07/21/2024 | Full name of contributor Spain, Diana (Mrs.) Contributor address; City; Sta | | Amount of Contribution (\$) | \$2.00 | | |
| | Principal occu None | Austin, TX 78751 pation / Job title (See Instructions) | | Employer (See Instruction None | s) | | |
| | Date 08/12/2024 | Full name of contributor out-of-state PAC (ID#:) Spain, Diana (Mrs.) Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$2.00 |
| | | Austin, TX 78751 | | | | | |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instruction None | s) | | |
| | Date 09/25/2024 |) | | Amount of Contribution (\$) | \$2.00 | | |
| | Principal occu None | Austin, TX 78751 pation / Job title (See Instructions) | | Employer (See Instruction None | <u> </u> s) | | |
| | Date 09/18/2024 | Full name of contributor out-of-state PAC (ID#:) | | | | Amount of Contribution (\$) | \$2.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instruction None | s) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CON | | SCHEDULE A1 | | | |
|---|--|--|-------------------|---------------------------------|-----------------------------|---|-----------|
| | The Instruc | ction Guide explains how to co | omplete this forr | n. | 1 | Total pages Schedule A1: Sch: 14/15 Rpt: 18/24 | |
| 2 | FILER NAME Adams, Tony | y (Mr.) | | | 3 | Filer ID (Ethics Commission 00088220 | n Filers) |
| 4 | Date 08/14/2024 | | | 7 | Amount of Contribution (\$) | \$417.00 | |
| _ | 5 | Washington DC, DC 20001 | | | | | |
| 8 | None | e Employer (See Instructions) 9 Employer (See Instructions) None | | 5) | | | |
| | Date 07/06/2024 | | | | | Amount of Contribution (\$) | \$30.00 |
| | Austin, TX 78752 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | | |
| | None | , | | None | , | | |
| | Date 09/25/2024 | | | | | Amount of Contribution (\$) | \$4.00 |
| | | Pflugerville, TX 78660 | | | | | |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None |) | | |
| | Date 07/19/2024 | | | | | Amount of Contribution (\$) | \$4.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None |) | | |
| | Date 08/12/2024 | | | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu None | pation / Job title (See Instructions) | | Employer (See Instructions None | 5) | | |
| | | | • | | | | |

| TARY POLITICAL CONTRIBUTION | NC | IS | | SCHEDULE A1 |
|--|--|--|---|---|
| uction Guide explains how to complete this | n. | 1 | Total pages Schedule A1: Sch: 15/15 Rpt: 19/24 | |
| E ny (Mr.) | | 3 | Filer ID (Ethics Commission Filers) 00088220 | |
| 5 Full name of contributor out-of-state PAC (ID# Wooten, Tim (Mr.) 6 Contributor address; City; State; Zip Code | 7 | Amount of Contribution (\$) \$8.00 | | |
| Round Mountain, TX 78663 cupation / Job title (See Instructions) | 9 | Employer (See Instructions | - s) | |
| | | None | | |
| | | | | |
| | uction Guide explains how to complete this E ny (Mr.) 5 Full name of contributor out-of-state PAC (ID#: Wooten, Tim (Mr.) 6 Contributor address; City; State; Zip Code Round Mountain, TX 78663 | uction Guide explains how to complete this form E ny (Mr.) 5 Full name of contributor out-of-state PAC (ID#: Wooten, Tim (Mr.) 6 Contributor address; City; State; Zip Code Round Mountain, TX 78663 | supation / Job title (See Instructions) 5 Full name of contributor out-of-state PAC (ID#:) Wooten, Tim (Mr.) 6 Contributor address; City; State; Zip Code Round Mountain, TX 78663 9 Employer (See Instructions) | uction Guide explains how to complete this form. 3 3 3 3 3 3 3 3 3 |

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 20/24 2 FILER NAME 3 Filer ID Adams, Tony (Mr.) 00088220 \$ 100.00 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 5 Date **6** Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 7 Contributor address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) **13** Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

| | Contributions Donations Made By Candidate/Officeholder/Politica Credit Card Payment | / - al Committee | Gift/Awards/Memorials E Legal Services The Instruction Gui | Expense Printing Salaries ide explains how to o | /Wage | s/Contract Labor | | Travel Out of Dis OTHER (enter a | strict category not listed above) |
|---|---|---|--|--|------------------|------------------|-----------------------|-------------------------------------|--------------------------------------|
| 1 | Total pages Schedule F1: | 2 FILER NAM | E | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 1/4 Rpt: 21/24 | Adams, To | ony (Mr.) | | | | | 00088220 | |
| 4 | Date | 5 Payee name | е | | | | | | |
| | 07/27/2024 | Amazon | | | | | | | |
| 6 | Amount (\$) \$285.77 | 7 Payee addr 410 Terry Seattle, W | Ave N | State; Zip (| Code | | | | |
| 8 | PURPOSE | (a) Category | See Categories listed at the | e top of this schedule) | (b) | Description | | | |
| | OF | Fees | ooo caacgenee neted at an | o top or timo demodalo, | | | outsi | ide of Texas. Com | plete Schedule T. |
| | EXPENDITURE | | | | Check if Austin, | , TX | , officeholder living | ı expense | |
| | | | | | | Speaker and | mi | c for politcal | speech events |
| | | | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | ficeholder name | Office so | ought | | | Office he | eld |
| | Date | Payee name | | | | | | | |
| | 07/23/2024 | Collin Cou | nty Dem Party | | | | | | |
| H | Amount (\$) | Payee addr | ess; City; | State; Zip C | Code | | | | |
| | \$25.00 | 6829 K Av | • | , , | | | | | |
| | 420.00 | #111 | | | | | | | |
| | | | 75074 | | | | | | |
| | | Plano, TX | 75074 | | _ | | | | |
| | PURPOSE OF | (a) Category (| See Categories listed at the | e top of this schedule) | (b) | Description | | | |
| | EXPENDITURE | Fees | | | | | | ide of Texas. Com | |
| | | | | | | Youth Voter E | | , officeholder living | g expense |
| | | | | | | routii votei L | _vc | 51 IL | |
| | Complete ONLY if direct expenditure to benefit C/OI | | ficeholder name | Office so | ught | | | Office he | eld |
| F | Date | Payee name | <u> </u> | | | | | | |
| | 09/23/2024 | - | nty Dem Party | | | | | | |
| H | Amount (\$) | Payee addr | | State; Zip (| `odo | | | | |
| | \$20.00 | 6829 K Av | | State, Zip C | Joue | | | | |
| | Φ20.00 | | e | | | | | | |
| | | #111 | | | | | | | |
| | | Plano, TX | 75074 | | | | | | |
| | PURPOSE | (a) Category (| See Categories listed at the | e top of this schedule) | (b) | Description | | | |
| | OF EXPENDITURE | Fees | | | | | | ide of Texas. Com | |
| | EXI ENDITORE | | | | | ш | , TX | , officeholder living | g expense |
| | | | | | | Billboard | | | |
| L | | L | | | 1_ | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | ficeholder name | Office so | ought | | | Office he | eld |
| L | experientare to benefit C/OI | | | | | | | | |
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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Candidate/Officeholder/Politica Credit Card Payment | | mmittee | Legal Services | · | | Vages | /Contract Labor | | OTHER (enter | a category not listed a | above) |
|----------|---|-----|---------------|----------------------|----------------------|--------------------|-------|------------------|-------|--------------------|-------------------------|--------------|
| L | | | | | n Guide explain | s now to co | mpie | ete this form. | _ | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | Ξ | | | | | 3 | Filer ID | (Ethics Commis | sion Filers) |
| | Sch: 2/4 Rpt: 22/24 | | Adams, To | ny (Mr.) | | | | | | 00088220 | | |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 07/15/2024 | | Collin Dem | | | | | | | | | |
| Ļ | | ļ_ | | | Ctat | ta. Zia Ca | ما م | | | | | |
| l۴ | Amount (\$) | ' | Payee addre | | | te; Zip Co | ue | | | | | |
| l | \$150.00 | | 800 W Can | npbell Rd Dga | a 10 | | | | | | | |
| | | | | | | | | | | | | |
| l | | | Richardson | , TX 75080 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (S | ee Categories listed | at the ten of this s | ahadula) | (b) | Description | | | | |
| | OF | `` | Fees | ee Calegories listet | at the top of this s | criedule) | () | | outsi | de of Texas. Co | mplete Schedule T. | |
| | EXPENDITURE | | 1 000 | | | | | Check if Austin, | , TX | officeholder livir | ng expense | |
| | | | | | | | | Democratic P | art | y Event | | |
| | | | | | | | | | | | | |
| 9 | Complete ONLY if direct | | Candidate/Off | iceholder name | <u> </u> | Office sou | aht | | | Office h | neld | |
| ľ | expenditure to benefit C/OI | | | | • | 000 000 | 9 | | | 000 1 | | |
| ⊨ | | _ | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 07/15/2024 | | Collin Dem | S | | | | | | | | |
| | Amount (\$) | | Payee addre | ss; City; | Stat | te; Zip Co | de | | | | | |
| | \$20.00 | | 800 W Can | npbell Rd Dga | a 10 | | | | | | | |
| | | | | | | | | | | | | |
| | | | Richardson | TV 75090 | | | | | | | | |
| L | | _ | | | | | | | | | | |
| | PURPOSE OF | (a) | Category (S | ee Categories listed | at the top of this s | chedule) | (b) | Description | | | | |
| | EXPENDITURE | | Fees | | | | | = | | | mplete Schedule T. | |
| | | | | | | | | ш | | officeholder livir | ig expense | |
| | | | | | | | | Democratic P | an | y Event | | |
| ┡ | | | | | | | | | | | | |
| l | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Off | iceholder name |) | Office sou | ght | | | Office h | neld | |
| L | experientare to benefit 6/01 | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 07/26/2024 | | DAIFO LLC | • | | | | | | | | |
| ┢ | Amount (\$) | | Payee addre | ss; City; | Stat | te; Zip Co | nde | | | | | |
| l | \$50.00 | | 11014 man | - | Otat | .o, <u>L</u> .p oc | uc | | | | | |
| l | Ψ30.00 | | 11014 man | Silcia arive | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Frisco, TX | 75035 | | | | | | | | |
| | PURPOSE | (a) | Category (S | ee Categories listed | at the top of this s | chedule) | (b) | Description | | | | |
| l | OF | | Fees | | | , | | Check if travel | outsi | de of Texas. Co | mplete Schedule T. | |
| l | EXPENDITURE | | | | | | | | | officeholder livir | ng expense | |
| | | | | | | | | Voter Data fo | r p | ost mail | | |
| 1 | | | | | | | | | | | | |
| Г | Complete ONLY if direct | | Candidate/Off | iceholder name | ; | Office sou | ght | | | Office h | neld | |
| | expenditure to benefit C/OI | Н | | | | | | | | | | |
| \vdash | | | | | | | | | | | | |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 23/24 Adams, Tony (Mr.) 00088220 4 Date Payee name 07/21/2024 Got Print 6 Amount (\$) Payee address; City; State; Zip Code \$43.43 1001 S Nolen Dr Grapevine, TX 76051 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Post card for voters Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/19/2024 Got Print Amount (\$) Payee address; City; State; Zip Code \$48.66 1001 S Nolen Dr Grapevine, TX 76051 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Post card for voters Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/02/2024 **PostNet** Payee address; Amount (\$) City; State; Zip Code \$9.99 Bugo LLC 2831 St Rose Pkwy Suite 244 Henderson, NV 89052 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign MailBox Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

| | 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: 4/4 Rpt: 24/24 | Adams, Tony (Mr.) 00088220 |
| 4 | Date | 5 Payee name |
| | 08/02/2024 | PostNet |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$9.99 | Bugo LLC, 2831 St. Rose Pkwy |
| | | Suite 244 |
| | | Henderson, NV 89052 |
| 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 Campaign MailBox |
| | | Campaigh Mailbox |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 09/02/2024 | PostNet |
| Г | Amount (\$) | Payee address; City; State; Zip Code |
| | \$9.99 | Bugo LLC, 2831 St. Rose Pkwy, Suite 244 |
| | | Suite 244 |
| | | Henderson, NV 89052 |
| H | 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 |
| | | Campaign MailBox |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 09/25/2024 | Vista Print |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$51.00 | 275 Wyman Street |
| | | |
| | | Waltham, MA 02451 |
| | 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 |
| | | Campaign Cards |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| Г | | |
| | | |
| I | | |