CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00087357	sion Filers)	2 Total pages file 1	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
NAME	Mr.	Benjamin M.			Date Received ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	10/08/2024	
	Ben	Mostyn		301117		
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 762305				Receipt #	Amount
Change of Address	San Antonio TV 70245					
Change of Address	San Antonio, TX 78245				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-2	
TREASURER NAME	Mr.	Benjamin M.				
	NICKNAME	LAST		SUFFIX		
	Ben	Mostyn		301117		
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE).	APT	// SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	PO Box 762305	BOXT EENGE),	74 1	730112 11,	317	211 0002
(Residence or Business)						
	San Antonio, TX 78245					
7 CAMPAIGN TREASURER		IE NUMBER E	EXTENSION			
PHONE	(210) 379-7117					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after car	npaign treasurer
		_		_	appointment (offic	eholder only)
	July 15	8th day before 6		Exceeded modified reporting limit	Final Report (Atta	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	ROUGH	09/26/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special	<u> </u>	
			onoral			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	, , ,			State Represent		
		GO Т	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	Mostyn, Benjamin M.	(Mr.)	14 Filer ID (00087357	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expe These expenditures may have been made with I officeholders are required to report this inform	nout the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAM	ИE	
		COMMITTEE CAMPAIGN TREASURER ADD	DRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER ES OF LOANS, OR CONTRIBUTIONS MADE		\$ 1,206.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LO	DANS)	\$ 3,324.90
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 5,226.61
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TI RIOD	HE LAST DAY OF THE	\$ 1,692.95
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	S AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT			enalty of perjury, that the acc les all information required to de.	
		M	r. Benjamin M. Mostyn	
		Signatu	re of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
		aid		day
	cer administering	ertify which, witness my hand and seal of office Printed name of officer administering		r administering oath
2.9 3 3. 0111	······································	and the second second		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 11	
18 FILER NA		19 Filer ID	(Ethi	cs Commission Filers)	
	Benjamin M. (Mr.)	00087357			
	LE SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,956.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	368.90	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	SCHEDULE E: LOANS		\$		
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	5,226.61	
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
10.	OF C/OH	\$			
11.	\$				
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 1/3 Rpt: 4/11		
2	FILER NAME Mostyn, Benjamin M. (Mr.)				3	Filer ID (Ethics Commission 00087357	n Filers)	
4			7	Amount of Contribution (\$)	\$100.00			
8	Principal occu	San Antonio, TX 78245 pation / Job title (See Instructions)	Ta	Employer (See Instructions	-, 			
0	Retired	pation / Job title (See Instituctions)	ا	N/A	>)			
	Date Full name of contributor out-of-state PAC (ID#:) 08/30/2024 Farley, J.P. Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$150.00	
	Plano, TX 75026				_			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00			
		San Anotnio, TX 78253						
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)			
Date Full name of contributor out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$250.00			
	Principal occupation / Job title (See Instructions) Retired Employer (See Instructions)			5)				
	Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Rangel, Priscila Contributor address; City; State; Zip Code San Antonio, TX 78225			Amount of Contribution (\$)	\$25.00			
	Principal occu Cleaner	pation / Job title (See Instructions)		Employer (See Instructions Self	5)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 2/3 Rpt: 5/11		
2	FILER NAME Mostyn, Benjamin M. (Mr.)			3	Filer ID (Ethics Commission 00087357	n Filers)		
4			7	Amount of Contribution (\$)	\$25.00			
8	Principal occu	San Antonio, TX 78225 pation / Job title (See Instructions)	9	Employer (See Instructions	;) 			
0	Cleaner	pation / Job title (See instructions)	9	Self	·)			
	Date O7/29/2024 Full name of contributor out-of-state PAC (ID#:) Republican Women of Bexar County PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00		
	San Antonio, TX 78216 Principal occupation / Job title (See Instructions) Employer (See Instructions				·/			
	Fillicipal occu	oation / Job title (See instructions)		Employer (See Instructions	·)			
	Date 09/11/2024	Full name of contributor out-of-state PAC (ID#:_ Roe, Linas Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
		San Antonio, TX 78253						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_ Sperber, Jane Contributor address; City; State; Zip Code San Antonio, TX 78253				Amount of Contribution (\$)	\$200.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> 5)			
	Date Full name of contributor out-of-state PAC (ID#:) Stewart, James Contributor address; City; State; Zip Code San Antonio, TX 78253			Amount of Contribution (\$)	\$100.00			
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)			
		·						

	MONET	TARY POLITICAL CONTRIBUTIO		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/11		
2	FILER NAME Mostyn, Benjamin M. (Mr.)			3	Filer ID (Ethics Commission 00087357	on Filers)
4	Date 08/16/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$200.00
8	Principal occu	San Antonio, TX 78253 upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
°	Retired	ipadon / Job tide (See Instructions)	N/A	>)		
	Date 08/25/2024	Full name of contributor out-of-state PAC (ID#: Stewart, James Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$200.00
		San Antonio, TX 78253	5 1 (0 1 1 1	Ĺ		
	Retired	upation / Job title (See Instructions)	Employer (See Instructions N/A	S)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#: Stewart, Robert (Dr.) Contributor address; City; State; Zip Code San Antonio, TX 78253)		Amount of Contribution (\$)	\$100.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		

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: 7/11 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Mostyn, Benjamin M. (Mr.) 00087357 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 08/15/2024 Horn, Karen \$368.90 PhoneBurner 7 Contributor address; City; State; Zip Code San Anotnio, TX 78253 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) Retired N/A 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 Contributions/ Donations Made By -Event Expense Fees

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

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:		
L	Sch: 1/4 Rpt: 8/11	Mostyn, Benjamin M. (Mr.) 00087357	
4	Date	5 Payee name	
	07/05/2024	3D Signs	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,040.00	8015 W 2nd St	
		Somerset, TX 78069	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Signs	
		Signs	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	expenditure to benefit C/Ol		
⊨	Date	Dougo nama	=
	08/06/2024	Payee name 3D Signs	
L			_
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 8015 W 2nd St	
	\$1,000.00	6013 W 2110 3t	
		Compared TV 70000	
		Somerset, TX 78069	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Signs	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/Ol	1	
	Date	Payee name	
	07/01/2024	Anedot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.20	1920 McKinney Ave	
		Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Anedot	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
\vdash			_

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category pet 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:	
L	Sch: 2/4 Rpt: 9/11	
4	Date	5 Payee name
	08/01/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.20	1920 McKinney Ave
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Anedot
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	07/16/2024	Avila, Henry
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	985 PRICE RD
		POTEET, TX 78065
	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 Sign Placement
		Signifiacement
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
⊨	Date	Davida marra
	08/22/2024	Payee name Avila, Henry
L		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	985 PRICE RD
		POTEET, TX 78065
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Signs
		3.5
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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)

	Credit Card Payment	The Instruction Guide explains how to complete the	his form.
1		2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 3/4 Rpt: 10/11	Mostyn, Benjamin M. (Mr.)	00087357
4		5 Payee name	
	09/17/2024	Avila, Henry	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	985 PRICE RD	
		POTEET, TX 78065	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Galaries/Wages/Gorillater Eabor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
		3.9	,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
H	Date	Payee name	
	07/31/2024	Broadway Bank	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.00	502 W Loop 1604 N	
	Ψ4.00	302 W L00p 1004 W	
		Can Antonia TV 70251	
	DUDD005	San Antonio, TX 78251	
	PURPOSE OF		Scription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	/ Accounting/Banking	Check if Austin, TX, officeholder living expense
		Ba	ınking
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	07/01/2024	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$35.31	1600 Amphitheatre Parkway	
		Mountain View, CA 94043	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE		Check if Austin, TX, officeholder living expense
		GO CO	oogle
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office netu

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 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)

Google 6 Amount (\$) \$46.05 7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Google		Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
Date	1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Google Google Famount (\$) 7 Payee address; City; State; Zip Code Google Google		Sch: 4/4 Rpt: 11/11	Mostyn, Benjamin M. (Mr.)		00087357
Amount (S) S46.05 7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	4	Date	5 Payee name		<u>'</u>
Section Sect		08/01/2024			
Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if award outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense Conglete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
Purpose		\$46.05	1600 Amphitheatre Parkway		
Purpose of Expenditure (a) Category (see Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense Google					
Advertising Expense Check if travel outside of Texas. Complete Schedule T.			Mountain View, CA 94043		
Check if travel outside of Texas. Complete Schedule T. Check if Austin, Tx, officeholder hiring oxpense Google	8		(a) Category (See Categories listed at the top of this schedule)	(b)	Description
9 Complete ONLY if direct expenditure to benefit C/OH Date O9/03/2024 Google Amount (s) Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Candidate/Officeholder name Office sought Office held Date O9/12/2024 Phone Burner Amount (s) Payee address; City; State; Zip Code Complete ONLY if direct expenditure to benefit C/OH Payee name O9/12/2024 Phone Burner Amount (s) Payee name Phone Burner Phone Burner Purpose Office Sought Office held Payee name O9/12/2024 Phone Dathay, Suite 1800 Laguna Beach, CA 92651 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
9 Complete ONLY if direct expenditure to benefit C/OH Date		-			
Date 09/03/2024 Amount (\$) Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Payee name Office sought Office held Payee name Office Sought Office held Payee name PhoneBurner Amount (\$) Payee address; City; State; Zip Code Office held Office held Date 09/12/2024 Payee name PhoneBurner Amount (\$) Payee address; City; State; Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92651 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Office Overhead/Rental Expense Candidate/Officeholder name Office sought Office held Office overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held Office held Office held					Coogle
Date 09/03/2024 Amount (\$) Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Payee name Office sought Office held Payee name Office Sought Office held Payee name PhoneBurner Amount (\$) Payee address; City; State; Zip Code Complete ONLY if direct expenditure to benefit C/OH Payee name PhoneBurner Amount (\$) Payee address; City; State; Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92651 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held	9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
O9/03/2024 Google Amount (\$) Payee address; City; State; Zip Code PAGE 1600 Amphitheatre Parkway Mountain View, CA 94043 PURPOSE OF EXPENDITURE (a) Category (See Categories isted at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Date O9/12/2024 Amount (\$) Payee name PhoneBurner Amount (\$) Payee address; City; State; Zip Code \$578.80 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92651 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Office held (b) Description Office held Office held (b) Description Office held (c) Description Office held (b) Description Office held (c) Description Office Overhead/Rental Expense Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held				9	
Amount (\$) Payee address; City; State; Zip Code	H	Date	Pavee name		
### State: Target Note: The Note of this schedule of the schedule of					
### State: Target Note: The Note of this schedule of the schedule of		Amount (\$)	Pavee address: City: State: Zip Co	de	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Google Complete ONLY if direct expenditure to benefit C/OH Date 09/12/2024 Amount (\$) Payee name PhoneBurner Amount (\$) Payee address; City; State; Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92651 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description (check if Austin, TX, officeholder living expense) Phone banking software Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct expenditure to benefit C/OH Date O9/12/2024 Payee name PhoneBurner Amount (\$) Payee address; City; State; Zip Code \$578.80 Laguna Beach, CA 92651 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description		,			
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