## 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 00062790		2 Total pages	filed: 43
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Christopher G	i.	MI	OFFICE  Date Received  ELECTRONIC	USE ONLY CALLY FILED
	NICKNAME Chris	LAST Turner		SUFFIX	10/28/2024	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT P. O. Box 182093	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked  Amount
Change of Address	Arlington, TX 76096				Date Processed  Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST William D.		MI		
	NICKNAME Dan	LAST Dipert		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO 7301 W. Pioneer Pkwy.	BOX PLEASE);	APT	T / SUITE #; CIT	Y; Sī	TATE; ZIP CODE
(Residence or Business)  7 CAMPAIGN TREASURER PHONE	Arlington, TX 76013  AREA CODE PHON (817) 543-3700	IE NUMBER I	EXTENSION			
8 REPORT TYPE	January 15 July 15	30th day before		Runoff  Exceeded modified reporting limit	appointment (of	campaign treasurer fficeholder only) ttach C/OH-FR)
9 PERIOD COVERED	Month Day Year 09/27/2024	TH	HROUGH	Month Day 10/26/20		
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		Primary General	ELECTION TYPE Runoff Special	Other	
11 OFFICE	OFFICE HELD (if any) State Representative Dist	rict 101		12 OFFICE SOUGH State Represe	HT (if known) ntative District 10	1
	•	GO 1	ΓΟ PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 43

13 C / OH NAME	C / OH NAME Turner, Christopher G. (The Honorable)  14 Filer ID 00062790							
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or office	holder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	X GENERAL	Texas REALTORS Political Action Committe	ee					
		COMMITTEE ADDRESS						
	SPECIFIC	1115 San Jacinto						
		Ste 200						
		Austin, TX 78701						
		COMMITTEE CAMPAIGN TREASURER NAME						
		Cantu, Leslie						
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS					
		PO Box 2246						
		Austin, TX 78701						
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00						
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 102,665.69				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		<b>\$</b> 1,982.61				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 263,627.64				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 451,181.14				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00				
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.						
		The Honora	ble Christopher G. Tu	rner				
		Signature of	Candidate or Officehold	der				
AFFIX NO	TARY STAMP / SEAL AB	DVE						
Sworn to and subs	cribed before me, by the s	aid	, this the	day				
		ertify which, witness my hand and seal of office.		-				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath				

## **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

				3 of 43
18 FILER NAME Turner, Christopher G. (The	e Honorable)	<b>19</b> Filer ID 00062790	(Ethics Com	nmission Filers)
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE			SUBTO	OTAL AMOUNT
1. X SCHEDULE A1: I	MONETARY POLITICAL CONTRIBUTIONS		\$	102,415.69
2. X SCHEDULE A2: I	NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	S	\$	250.00
3. SCHEDULE B: P	LEDGED CONTRIBUTIONS		\$	
4. SCHEDULE E: LO	DANS		\$	
5. X SCHEDULE F1: F	POLITICAL EXPENDITURES FROM POLITICAL CONTRIE	BUTIONS	\$	230,068.41
6. SCHEDULE F2: U	JNPAID INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: F	PURCHASE OF INVESTMENTS FROM POLITICAL CONT	RIBUTIONS	\$	
8. X SCHEDULE F4: E	EXPENDITURES MADE BY CREDIT CARD		\$	33,468.23
9. X SCHEDULE G: P	OLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	91.00
10. SCHEDULE H: P	AYMENT FROM POLITICAL CONTRIBUTIONS TO A BUS	SINESS OF C/OH	\$	
11. SCHEDULE I: NO	N-POLITICAL EXPENDITURES FROM POLITICAL CONT	RIBUTIONS	\$	
12. X SCHEDULE K: IN TO FILER	TEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBU	ITIONS RETURNED	\$	1,510.49

	MONET	ARY POLITICAL COI	NTRIBUTION:	5		SCHEDUI	_E <b>A1</b>
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 1/17 Rpt: 4/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/07/2024	<ul> <li>5 Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$100.00
		Arlington, TX 76016-3806					
8	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	i)		
	Date 10/18/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$150.00
	Principal occu	Fort Worth, TX 76109-2750 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Attorney			Thompson & Knight L.L.	Ρ.		
	Date 10/25/2024	Full name of contributor		)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78752-3747					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 10/18/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 10/26/2024	Balsom, Jim	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
	Principal occu Senior Mana	pation / Job title (See Instructions) ger		Employer (See Instructions Signify Health	()		
			<b>1</b>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/17 Rpt: 5/43
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062790
4	Date 10/24/2024	<ul> <li>Full name of contributor</li></ul>	)	7 Amount of Contribution (\$) \$2,500.00
	<u> </u>	Houston, TX 77056-8000		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)
	Date 10/25/2024	Full name of contributor out-of-state PAC (ID#:_ Beef PAC Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)
	Principal occu	Amarillo, TX 79106-4617 pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Beer Alliance of Texas PAC Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$1,000.00
		Austin, TX 78701-2656		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Date 10/25/2024	Full name of contributor out-of-state PAC (ID#:_Breckenridge, Mary (Ms.)  Contributor address; City; State; Zip Code  Arlington, TX 76001-8431		Amount of Contribution (\$)
	Principal occu Administrato	pation / Job title (See Instructions) r	Employer (See Instructions Tender Heart Home Heart	, in the second
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_Bresnen, Amy  Contributor address; City; State; Zip Code  Austin, TX 78701-2837	)	Amount of Contribution (\$)
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Bresnen & Associates	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/17 Rpt: 6/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/16/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$200.00
_		Dallas, TX 75214-5604				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Centene Corporation PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Saint Louis, MO 63105-1813 pation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>		
	· ····o.pa. ooda		p.oyo. (000ou uou uo	,		
	Date 10/16/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
	Dringing aggr	San Ramon, CA 94583-0716	Employer (Coo Instructions	_		
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 10/16/2024	Full name of contributor X out-of-state PAC (ID#: C Comcast Corporation PAC (COMPAC)  Contributor address; City; State; Zip Code  Philadelphia, PA 19103	00248716		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/16/2024	Full name of contributor X out-of-state PAC (ID#: Communications Workers of America (CWA COI Contributor address; City; State; Zip Code  Washington, DC 20001-2760	PE PAC)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/17 Rpt: 7/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00062790	
4	Date 10/16/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$5,000.	<b></b>
8	Dringing aggr	Washington, DC 20001-2133 pation / Job title (See Instructions)	Employer (See Instructions	_		
	Date	Full name of contributor out-of-state PAC (ID#:	9 Employer (See Instructions	_	Amount of Contribution (\$)	_
	10/26/2024	Davis, Jeff Contributor address; City; State; Zip Code			\$1,000.	)0
	Fort Worth, TX 76110-1150					
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Republic Title	)		
	Date 10/18/2024	Full name of contributor x out-of-state PAC (ID#: C00074096 )  Dow Inc. Political Action Committee (DOWPAC)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.	<b>)</b> 00
	Principal occu	Midland, MI 48642-4815 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_ Dunn, Louise  Contributor address; City; State; Zip Code  Arlington, TX 76002-2869	)		Amount of Contribution (\$) \$15.	<del></del>
	Principal occu Retired Tead	pation / Job title (See Instructions) cher	Employer (See Instructions AISD	)		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#:_ Dunning, Thomas M (Mr.)  Contributor address; City; State; Zip Code  Dallas, TX 75201-7943	)		Amount of Contribution (\$) \$500.	<del></del>
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	)		

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 5/17 Rpt: 8/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/26/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Eason, Lynette</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Arlington, TX 76016 pation / Job title (See Instructions)	۹	Employer (See Instructions	;) 		
Ū	Not employe		ľ	Not employed	,		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Edwards, Chet Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$1,000.00
		Waco, TX 76710-1052	_	5 1 (0 1 1 1	Ĺ		
	Consultant	pation / Job title (See Instructions)		Employer (See Instructions Edwards Davis Stover &		ssociates	
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Entre Strategic Partners LLC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75219-7905 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_Focused Advocacy Political Action Committee  Contributor address; City; State; Zip Code  Austin, TX 78746-6773				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_Foley & Lardner LLP  Contributor address; City; State; Zip Code  Dallas, TX 75201-3340				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/17 Rpt: 9/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commissi 00062790	on Filers)
4	Date 10/07/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
0	Dringing aggr	Grand Prairie, TX 75051-1233	Employer (See Instru	otions)		
8	Retired	pation / Job title (See Instructions)	Retired	ctions)		
	Date 10/16/2024	Full name of contributor  uut-of-state PAC (ID#: Grace & McEwan Consulting LLC Political Fund Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78701-5001 pation / Job title (See Instructions)	Employer (See Instru	ctions)		
	i iliopai oooa	salion, con the (con modulations)	Employer (eee mea	otionoj		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#: Greenberg Traurig P.A. PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701-4236				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instru	ctions)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#: HCA Texas Good Government Fund Contributor address; City; State; Zip Code Irving, TX 75039-2478			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instru	ctions)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$3,000.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instru- Law Office of Harol		mmett	
		L				

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 7/17 Rpt: 10/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/07/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Haverlah, Sandra (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Austin, TX 78759-7533 pation / Job title (See Instructions)	9	Employer (See Instructions	;) 		
_	Policy Consu	·		Self-employed	•′′		
	Date 10/16/2024	Full name of contributor				Amount of Contribution (\$)	\$250.00
		Dallas, TX 75201-2532					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#: Invenergy Investment Company LLC Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$1,500.00
		Chicago, IL 60606-4630					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_Linebarger Goggan Blair & Sampson LLP  Contributor address; City; State; Zip Code  Austin, TX 78760-7428		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/18/2024	Full name of contributor 💢 out-of-state PAC (ID#: C Lockheed Martin Employees PAC Contributor address; City; State; Zip Code Arlington, VA 22202-4110	000	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.                                    </u>		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 8/17 Rpt: 11/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)				3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/16/2024	<ul><li>5 Full name of contributor Lunderby, Ryan</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:ate; Zip Code			7	Amount of Contribution (\$)	\$1,000.00
		Southlake, TX 76092-346						
8	Principal occu Senior Vice	pation / Job title (See Instructions President	)	9	Employer (See Instructions Dominion Apartments	5)		
	Date 10/07/2024	Full name of contributor  Massingill, G Sealy  Contributor address; City; St  Fort Worth, TX 76109-275	·				Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions			Employer (See Instructions PRI Houston	<u>                                      </u>		
	Date 10/24/2024	Full name of contributor  Maxwell, James  Contributor address; City; St			)		Amount of Contribution (\$)	\$300.00
	Principal occu	Streetman, TX 75859-716 pation / Job title (See Instructions			Employer (See Instructions Retired	<u> </u> s)		
	Date 10/16/2024	Full name of contributor McGuire, Michael  Contributor address; City; St  Dallas, TX 75205-3126	out-of-state PAC (ID#:		)	-	Amount of Contribution (\$)	\$2,000.00
	Principal occu President an	pation / Job title (See Instructions of CEO	)		Employer (See Instructions Andrew's Distributing	5)		
	Date 10/16/2024	Full name of contributor  McGuireWoods Federal P  Contributor address; City; St  Richmond, VA 23219-395	ate; Zip Code	:00:	225342 )	•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 9/17 Rpt: 12/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/19/2024	<ul> <li>Full name of contributor</li></ul>	#:		7	Amount of Contribution (\$)	\$100.00
0	Dringing oggu	Venus, TX 76084-3252	ام	Employer (See Instructions	<u></u>		
8	Attorney	pation / Job title (See Instructions)	9	Employer (See Instructions Raymond M Meeks	5)		
	Date 10/22/2024	Full name of contributor	#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75204-2634 pation / Job title (See Instructions)	$\top$	Employer (See Instructions	<u> </u> s)		
	Attorney	,		Self employed	,		
	Date 10/16/2024	Full name of contributor  out-of-state PAC (ID: National Association of Benefit and Insurance Contributor address; City; State; Zip Code	Pro			Amount of Contribution (\$)	\$250.00
		Cranford, NJ 07016-2464					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (IDa Navejar, Rosa Contributor address; City; State; Zip Code Fort Worth, TX 76107-3077		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions The Rios Group Inc.	<u>.                                    </u>		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID: North Texas Automobile Dealers PAC Contributor address; City; State; Zip Code  Irving, TX 75062-2781	#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/17 Rpt: 13/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/16/2024	Full name of contributor     PAC Of The Independent     Contributor address; City; Sta			7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78768-4487	,	9 Employer (See Instructions	()		
	Date Full name of contributor X out-of-state PAC (ID#: C00016683 )  10/24/2024 Pfizer PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00		
	New York, NY 10017-5703  Principal occupation / Job title (See Instructions)  Employer (See Instruction				5)		
	Date 10/16/2024	Full name of contributor Poinsett PLLC PAC Contributor address; City; Sta	out-of-state PAC (ID#:_ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Austin, TX 78701-2134  Principal occupation / Job title (See Instructions)  Employer (See Instructions)			5)			
	Date 10/16/2024	Full name of contributor  Sampson Public Affairs LL  Contributor address; City; Sta				Amount of Contribution (\$)	\$500.00
	Austin, TX 78749-5202  Principal occupation / Job title (See Instructions)  Employer (See Instruction		Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  10/18/2024 Schlansker, Jane (Ms.)  Contributor address; City; State; Zip Code  Fort Worth, TX 76102-5918			Amount of Contribution (\$)	\$50.00		
	Principal occu Public Relati	pation / Job title (See Instructions)		Employer (See Instructions InterStar Public Relation			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 11/17 Rpt: 14/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062790	
4			7	Amount of Contribution (\$) \$500.00			
		College Station, TX 77840-1829					
8	Principal occu Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Self employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/20/2024 Smith, Cheryl Ann (Ms.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$50.00			
	Grand Prairie, TX 75052-4581  Principal occupation / Job title (See Instructions)  Retired  Employer (See Instruction Retired		<u> </u> ;)				
	Date Full name of contributor out-of-state PAC (ID#:)  10/03/2024 Smith, Robert  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00			
	Deinsinal assu	Dallas, TX 75230-1955		Franks on (Cas Instructions			
	Principal occu President CE	pation / Job title (See Instructions) EO		Employer (See Instructions Accident & Injury Chirop	-	ctic	
	Date Full name of contributor out-of-state PAC (ID#:)  10/07/2024 Staples-Wherry, Lisa (Mrs.)  Contributor address; City; State; Zip Code  Arlington, TX 76018-1684			Amount of Contribution (\$) \$50.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/16/2024 Tenaska Employees Texas PAC  Contributor address; City; State; Zip Code  Omaha, NE 68154-5212			Amount of Contribution (\$) \$500.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 12/17 Rpt: 15/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/16/2024	5 Full name of contributor out-of-state PAC (ID#:)  Texas Academy of Family Physicians PAC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78727-6207					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 10/16/2024	Full name of contributor  Texas Apartment Association  Contributor address; City; State		)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701-1951 pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/16/2024 Texas Association of Life and Health Insurers Life Insurance PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$750.00		
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 10/18/2024	Full name of contributor Texas Association of Pawn E Contributor address; City; State Austin, TX 78701-1618		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/07/2024	Full name of contributor Texas Building Branch AGC Contributor address; City; State Austin, TX 78701-2656		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/17 Rpt: 16/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/16/2024			7	Amount of Contribution (\$)	\$500.00	
		Athens, TX 75751-7379					
8	Principal occu	pation / Job title (See Instructions	)	9 Employer (See Instructions	5)		
	Date 10/16/2024	Full name of contributor Texas Dental Association Contributor address; City; St				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78704-3644 pation / Job title (See Instructions	)	Employer (See Instructions	 s)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/16/2024 Texas Farm Bureau Friends of Agriculture Fund Inc.  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
	Principal occu	Waco, TX 76702-2689 pation / Job title (See Instructions	)	Employer (See Instructions	<u>                                      </u>		
	Date 10/16/2024	Full name of contributor Texas Land Title Associat Contributor address; City; St Austin, TX 78703-4775				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 10/16/2024	Full name of contributor Texas Medical Association Contributor address; City; St Austin, TX 78701-1624				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 14/17 Rpt: 17/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00062790	
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  10/16/2024 Texas Mortgage Bankers PAC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,500.00		
_		Austin, TX 78701-2668				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID#: Texas REALTORS Political Action Committee  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$10,000.00	
	Principal occu	Austin, TX 78768-2246 pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Fillicipal occu	pation / Job title (See mstructions)	Employer (See instructions	·)		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#: Texas Society of Architects Committee  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00	
		Austin, TX 78702-2754		<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/16/2024 Texas State Association of Fire Fighters Action Committee  Contributor address; City; State; Zip Code  Austin, TX 78745-1173		•	Amount of Contribution (\$) \$1,200.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#: Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code  Austin, TX 78767-0788			Amount of Contribution (\$) \$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		-				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 15/17 Rpt: 18/43		
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)	
	Turner, Chris	stopher G. (The Honorable)			00062790		
4	Date	5 Full name of contributor out-of-state PAC (ID#		7	Amount of Contribution (\$)		
	10/18/2024	Texas United Automobile Workers (UAW) CAF	)			\$2,500.00	
		6 Contributor address; City; State; Zip Code					
		Dallas, TX 75247-6901					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date	Full name of contributor $\overline{X}$ out-of-state PAC (ID#	: <u>C00142711</u> )		Amount of Contribution (\$)		
	10/18/2024	The Boeing Company Political Action Committ	ee			\$1,000.00	
		Contributor address; City; State; Zip Code					
		Arlington, VA 22202-4208					
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				)			
	Date Full name of contributor			Amount of Contribution (\$)			
			ee			\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date	Full name of contributor  ut-of-state PAC (ID#	:)		Amount of Contribution (\$)		
	10/16/2024 The Political Action Committee of the Texas Hospital Association  Contributor address; City; State; Zip Code		ospital Association			\$3,500.00	
		Austin, TX 78701-2180					
		Employer (See Instructions	<u>(</u>				
	Date	Full name of contributor X out-of-state PAC (ID#	: C00542365 )		Amount of Contribution (\$)		
	10/16/2024	Toyota Motor North America Inc. PAC			( )	\$1,000.00	
	Contributor address; City; State; Zip Code						
		Washington, DC 20004-2801					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/17 Rpt: 19/43	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 10/09/2024	<ul><li>5 Full name of contributor Transport Workers Union</li><li>6 Contributor address; City; St</li></ul>		Committee	7	Amount of Contribution (\$)	\$2,500.00
		Washington, DC 20001-2					
8	Principal occu	pation / Job title (See Instructions	(i)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/09/2024 Turner, Gary  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	Deinsinal	Dallas, TX 75228	, T	Frankrija (Caa kastuustia na			
	Principal occupation / Job title (See Instructions)  Retired  Employer (See Instructions)  Retired		5)				
	Date Full name of contributor out-of-state PAC (ID#:)  10/16/2024 Union Pacific Corporation Fund for Effective Government  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00		
		Washington, DC 20005-66	621				
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 10/16/2024	Full name of contributor Verizon Good Governmer Contributor address; City; St Austin, TX 78701-2557				Amount of Contribution (\$)	\$1,000.00
Principal occupation / Job title (See Instructions)  Employer (See Instructions)		5)					
	Date 10/16/2024	Full name of contributor Vistra Employee PAC of N Contributor address; City; St Irving, TX 75039-2479				Amount of Contribution (\$)	\$3,500.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	;)		

The Instruction Guide explains how to complete this form.  2 FILER NAME Turner, Christopher G. (The Honorable)  4 Date 09/30/2024  5 Full name of contributor out-of-state PAC (ID#: Williams, Jared 6 Contributor address; City; State; Zip Code Fort Worth, TX 76162-4002	
Turner, Christopher G. (The Honorable)  4 Date	Total pages Schedule A1: Sch: 17/17 Rpt: 20/43
09/30/2024 Williams, Jared  6 Contributor address; City; State; Zip Code  Fort Worth, TX 76162-4002  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	Filer ID (Ethics Commission Filers) 00062790
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	Amount of Contribution (\$) \$100.00
City Council Member Self employed	

## 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: 21/43 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Turner, Christopher G. (The Honorable) 00062790 \$ 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 10/11/2024 Texas REALTORS Political Action Committee \$250.00 i Fundraising event 7 Contributor address; City; State; Zip Code advertising Austin, TX 78768-2246 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) 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 -Candidate/Officeholder/Political Con

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

	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: 1/8 Rpt: 22/43	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	10/10/2024	AL Media
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23,622.00	222 W Ontario St
		Ste 600
		Chicago, IL 60654-3655
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign advertising
		Campaign auvertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/15/2024	AL Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$17,522.00	222 W Ontario St
		Ste 600
		Chicago, IL 60654-3655
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign advertising
		Campaign daverdening
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	10/21/2024	AL Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$17,522.00	222 W Ontario St
		Ste 600
		Chicago, IL 60654-3655
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Campaign advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

## 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/8 Rpt: 23/43	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	10/25/2024	AL Media
6	Amount (\$) \$17,522.00	7 Payee address; City; State; Zip Code 222 W Ontario St Ste 600 Chicago, IL 60654-3655
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  Campaign advertising
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/23/2024	AMM Political Strategies
	Amount (\$) \$12,810.46	Payee address; City; State; Zip Code 507 N Sylvania Ave
		Fort Worth, TX 76111-2317
	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  Campaign phone calls and texts
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/21/2024	Payee name American Express
	Amount (\$) \$43,267.36	Payee address; City; State; Zip Code 200 Vesey St
		New York, NY 10281-5525
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Credit Card Payment  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Credit card payment
	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 Comm

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/8 Rpt: 24/43	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	10/25/2024	Criminal Justice Reform Caucus
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	2601 N Stanton St
		Ste A
		El Paso, TX 79902-3116
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н
	Date	Payee name
	10/04/2024	Dallas AFL-CIO
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1408 N Washington Ave
		Ste 240
		Dallas, TX 75204-5168
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H end of the second of the sec
	Date	Payee name
	10/03/2024	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.86	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	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.
		Credit card processing fee
		Credit card processing ice
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## 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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 4/8 Rpt: 25/43	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	10/03/2024	First Data Merchant Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$546.06	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
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
		Credit card processing fee
_	Complete ONLY if direct	Condidate/Office holds
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	10/03/2024	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	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.
		Check if Austin, TX, officeholder living expense
		Credit card processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	10/09/2024	Gutierrez, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
		Buda, TX 78610-2765
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign operations consulting
		Campaign operations consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	<b>y</b>
	•	

## 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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/8 Rpt: 26/43	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	09/30/2024	Internal Revenue Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$267.75	PO Box 970030
		Saint Louis, MO 63197-0030
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Payroll taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	10/03/2024	NGP Van
	Amount (\$) \$469.04	Payee address; City; State; Zip Code 655 15th St NW
	\$409.04	333 234 3444
		Ste 650
		Washington, DC 20005-5738
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign database subscription
		Sumpargo sumanos susceptions
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>S</b>
_	Date	Payee name
	09/30/2024	Ngo, Vanna
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 540592
	φ2,500.00	PO BOX 540592
		0 1 D
		Grand Prairie, TX 75054-0592
	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
		Campaign salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## 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

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/8 Rpt: 27/43	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	09/30/2024	Peterson, Kelly
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1000 San Marcos St
		Unit 176
		Austin, TX 78702-2660
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign salary
		Campaign salary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	10/07/2024	Rodman, Megan
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	5503 Mercedes Ave
		Dallas, TX 75206-5821
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign fundraising consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/10/2024	Stephanie Swan Photography
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	4906 Oldfield Dr
		Arlington, TX 76016-6266
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	-	Campaign event photography
		Campaign event photography
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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 Salaries/Wages/Contract Labor

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

OTHER (enter a category not listed above)

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/8 Rpt: 28/43 Turner, Christopher G. (The Honorable) 00062790 4 Date Payee name **Texas Democratic Party** 10/24/2024 6 Amount (\$) Payee address; City; State; Zip Code \$20,900.00 PO Box 15707 Austin, TX 78761-5707 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. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/25/2024 **Texas Democratic Party** Amount (\$) Payee address; City; State; Zip Code \$63,000.00 PO Box 15707 Austin, TX 78761-5707 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/25/2024 Turner, Chris Amount (\$) Payee address: City: State; Zip Code \$91.00 3060 Nadar Grand Prairie, TX 75054-6792 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Schedule G Reimbursement

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printing Ammittee Legal Services Salaries  The Instruction Guide explains how to	s/Wage	ges/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 8/8 Rpt: 29/43	ı	FILER NAME Turner, Christopher G. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062790
4	Date 10/25/2024	ı	Payee name Turner, Chris		•
6	Amount (\$) \$489.71		Payee address; City; State; Zip (3060 Nadar  Grand Prairie, TX 75054-6792	Code	e
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mileage reimbursement
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name Office so	ought	nt Office held
	Date 10/23/2024	l	Payee name Voice of Vietnamese Americans		
	Amount (\$) \$500.00		Payee address; City; State; Zip ( 2625 W Pioneer Pkwy Ste 811 Grand Prairie, TX 75051-3539	Code	е
	PURPOSE OF EXPENDITURE		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 Radio advertising
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office so	ought	nt Office held

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

l	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)			
l	Sch: 1/12 Rpt: 30/43	Turner, Christopher	G. (The Honorable)			00062790					
4	CREDIT CARD ISSUER		ncial institution n Express	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	1,657.3	39			
6	PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 10/15/2024	(c) Date(s) C 10/21/2024	Credit Card Issuer 4	r Paid					
7	PAYEE	(a) Payee name  Agave Democratic	Infrastructure	(b) Payee at PO Box 51	037	City,	State,	Zip Code			
Ļ		(-) 0-4		Austin, TX							
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct expenditure to benefit C/OH	name Office	e sought	-	Office held						
	PAYMENT	(a) Amount Charged \$2,000.00	(b) Date of Charge 10/15/2024	(c) Date(s) C 10/21/2024	credit Card Issuer 4	r Paid					
	PAYEE	(a) Payee name  Boots on the Ground PAC		(b) Payee ac PO Box 30 Austin, TX		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Contribution	on						
l	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	-	Office held					
	PAYMENT	(a) Amount Charged \$135.30	(b) Date of Charge 10/03/2024	(c) Date(s) C 10/21/2024	Credit Card Issuer 4	Paid					
	PAYEE	(a) Payee name  Dominos Pizza		(b) Payee ac 130 E Barc Arlington, 7		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	(See Categories listed at the top of this schedule) Food/Beverage Expense			(b) Description Pizza for UTA meet and greet event						
L	Non-Political	(*) <b>—</b>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
ε	Complete ONLY if direct expenditure to benefit C/OH					Office held					

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(*	,	,		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)		
	Sch: 2/12 Rpt: 31/43	Turner, Christopher	G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	<b>\$</b> 1,657.39				
6	PAYMENT	(a) Amount Charged \$1,401.93	(b) Date of Charge 09/30/2024	(c) Date(s) 10/21/20	) Credit Card Issuei 24	r Paid				
7	PAYEE	(a) Payee name  Driskill Hotel		(b) Payee 604 Braz		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought			e sought		Office held					
	PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 10/15/2024	(c) Date(s) 10/21/20	) Credit Card Issuei 24	r Paid				
	PAYEE	(a) Payee name  For All Texans		(b) Payee address; City, State, Z PO Box 33079  Washington, DC 20033-0079						
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde		(b) Descrip	otion	013				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$1,450.00	(b) Date of Charge 10/01/2024	(c) Date(s) 10/21/20	) Credit Card Issuei 24	r Paid				
	PAYEE	(a) Payee name  Heart Led Digital			address; /press Ave s, OH 43222-140	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Consulting Expense		(b) Descrip Digital co	ommunications co					
L	Non-Political	(9) 🗖				officeholder living exp	ense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
l										

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	hics Commiss	sion Filers)				
Sch: 3/12 Rpt: 32/43	Turner, Christopher	G. (The Honorable)		00062790						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A C	<b> \$</b>	1,657.3	39				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	rd Issuer Paid						
	\$5,000.00	10/03/2024	10/21/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Kristian Carranza C	Campaign	PO Box 831436							
			San Antonio, TX 7	8283-1436						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description							
EXPENDITURE	Contributions/Donatio		Contribution							
X Political	Candidate/Officeholde									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	Austin, TX, officeholder living e	expense					
9 Complete ONLY if direct	Candidate/Officeholder	e sought	Office held							
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Car 10/21/2024	rd Issuer Paid						
PAYEE	(a) Davis a mana		(1-) Davida a dalara	0.4	04-4-	7:- 01-				
PAILE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Laurel Swift Campa	aign	7627 Woodridge Dr							
			San Antonio, TX 7	8209-2941						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
l <u> </u>	Contributions/Donatio	ns Made By	Contribution							
X Political	Candidate/Officeholde									
Non-Political		of Texas. Complete Schedule T.								
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held						
expenditure to benefit C/OH	( )	T (1) = 1	T() = . () = . !!. =							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car 10/21/2024	rd Issuer Paid						
	\$500.00	10/03/2024	10/21/2024							
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code				
			1908 Haddock Dr							
	Linda Garcia Camp	aign								
			Mesquite, TX 7514	19-3847						
PURPOSE OF	(a) Category		(b) Description Contribution							
EXPENDITURE	EXPENDITURE (See Categories listed at the top of this schedule)  Contributions/Donations Made By									
X Political	Candidate/Officeholde									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held						

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/C						Contra		THER (enter a categor	ry not listed at	oove)		
		The	Instr	uction Guide explains how	to complet	e thi	s form.					
1	Total pages Schedule F4:	2 FILER NAME						3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 4/12 Rpt: 33/43	Turner, Christop	her	G. (The Honorable)				00062790				
4	CREDIT CARD	Name of	finan	icial institution			F UNITEMIZED			_		
	ISSUER	se	e pr	evious			TURES D TO A CREDIT	\$	1,657.3	39		
			•		CARD		D TO A CREDIT					
6	PAYMENT	(a) Amount Charged		(b) Date of Charge	(c) Date(	s) C	redit Card Issue	r Paid				
		\$5.000.00		10/03/2024	10/21/2	024	1					
		40,000.00		10/00/2021								
7	PAYEE	(a) Payee name			(b) Paye	e ad	Idress;	City,	State,	Zip Code		
		(4) 1 29 22 11			PO Box 796311							
		Mihaela Plesa C	Cam	paign	. 6 20% 100022							
					Dallas,	TX	75379-6311					
8	PURPOSE OF	(a) Category			(b) Desc	riptio	on					
	EXPENDITURE	(See Categories listed at the			Contrib	utio	n					
	X Political	Contributions/Don Candidate/Officeh		er/Political Committee	ee l							
	Non-Political	(C) Check if travel out	tside c	of Texas. Complete Schedule T.	1	Т	Check if Austin, TX,	officeholder living exp	ense			
9				name Offic	e sought	_	<u>-</u>	Office held				
	penditure to benefit C/OH											
	PAYMENT	(a) Amount Charged		(b) Date of Charge	(c) Date(	s) C	redit Card Issue	r Paid				
		\$8.04		10/12/2024	10/21/2	024	1					
		,										
PAYEE (a) Payee name		(b) Paye	e ad	ldress;	City,	State,	Zip Code					
		Barrier Hard Baller		2222 N	Ste	mmons Fwy						
		Renaissance Hotel - Dallas										
					Dallas,	TX	75207-2802					
	PURPOSE OF	(a) Category		-f.d-:bd-d->	(b) Description							
	EXPENDITURE —	(See Categories listed at the Food/Beverage Ex			Lodging in Dallas for campaign fundraising event							
	X Political											
	Non-Political	(c) Check if travel out	tside c	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeho	lder	name Offic	e sought			Office held				
ex	penditure to benefit C/OH											
	PAYMENT	(a) Amount Charged		(b) Date of Charge			redit Card Issue	r Paid				
		\$1,000.00		10/15/2024	10/21/2	.024	+					
	PAYEE	(a) Payee name			(b) Paye			City,	State,	Zip Code		
		Solomon Ortiz J	lr Ca	amnaign	PO Box	28	6					
		3010111011 01112 0	1 00	ampaign								
		( ) 0 :					risti, TX 78403	-0286				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the	e top o	of this schedule)	(b) Desc	•						
	<u></u>	Contributions/Don	atio	ns Made By	Continu	นแบ	11					
	X Political			er/Political Committee			_					
	Non-Political	<u> </u>		of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held											
e	penditure to benefit C/OH											

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this	s form.						
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)					
Sch: 5/12 Rpt: 34/43	Turner, Christopher	r G. (The Honorable)			00062790					
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	FUNITEMIZED FURES O TO A CREDIT	\$	1,657.3	39			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	Paid					
	\$2,000.00	10/15/2024	10/21/2024							
7 PAYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code			
	Tarrant County Der	mocratic Party	685 John B Sias Memorial Pkwy Ste 400 Fort Worth, TX 76134-1304							
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Contribution							
X Political	Candidate/Officeholde									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Т	Check if Austin, TX,	officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	<sup>-</sup> Paid					
	\$3,746.63	10/02/2024	10/21/2024							
PAYEE	(a) Payee name	•	(b) Payee add	dress;	City,	State,	Zip Code			
	Texas Live!		1650 E Randol Mill Rd							
			+	X 76011-6219						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Fundraising event venue and catering							
X Political	Zvorit Zxporioo									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$49.65	(b) Date of Charge 10/01/2024	(c) Date(s) Ci 10/21/2024	redit Card Issuei	Paid					
DAVEE			4) 5							
PAYEE	(a) Payee name		(b) Payee add		City,	State,	Zip Code			
	Uber		1544 Marke	et St						
			Ste 400	04 04100	6007					
DUDDOCE OF	(a) Category		(b) Descriptio	sco, CA 94102	-6007					
EXPENDITURE	1 ( ) ( )			sportation						
X Political	Transportation Equipr Expense	Ground trai	Бронацон							
Non-Political	(c) Check if travel outside	T. Check if Austin, TX, officeholder living expense								
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

l	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)			
	Sch: 6/12 Rpt: 35/43	Turner, Christopher	G. (The Honorable)			00062790					
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	1,657.3	39			
6	PAYMENT	(a) Amount Charged \$34.85	(b) Date of Charge 09/27/2024	(c) Date(s) C 10/21/2024	redit Card Issuer I	Paid					
7	PAYEE	(a) Payee name Uber		<u> </u>	et St sco, CA 94102-	City, -6007	State,	Zip Code			
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name			e sought		Office held					
	PAYMENT	(a) Amount Charged \$44.95	(b) Date of Charge 10/02/2024	(c) Date(s) C 10/21/2024	redit Card Issuer I	Paid					
	PAYEE	(a) Payee name  Uber		(b) Payee ad 1544 Marke Ste 400 San Franci		City, -6007	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	,	(b) Description Ground train	on						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$41.08	(b) Date of Charge 10/02/2024	(c) Date(s) C 10/21/2024	redit Card Issuer 	· Paid					
	PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102		City, -6007	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political  Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense			(b) Description Ground transportation						
$\vdash$		(*) <b>—</b>	of Texas. Complete Schedule T.		Check if Austin, TX,	Office hold	ense				
€	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this	form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 7/12 Rpt: 36/43	Turner, Christopher	G. (The Honorable)			00062790		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDIT	UNITEMIZED URES TO A CREDIT	\$	1,657.3	39
6 PAYMENT	(a) Amount Charged \$54.80	(b) Date of Charge 10/02/2024	(c) Date(s) Cr 10/21/2024	edit Card Issuer	Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee add 1544 Marke Ste 400 San Francis		City, -6007	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	· · · · · · · · · · · · · · · · · · ·	(b) Description Ground tran				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
expenditure to benefit C/OH			e sought		Office held		
PAYMENT	(a) Amount Charged \$12.64	(b) Date of Charge 10/12/2024	(c) Date(s) Cr 10/21/2024	edit Card Issuer	Paid		
PAYEE	(a) Payee name  Uber		(b) Payee address; City, State, Zip Cod- 1544 Market St Ste 400 San Francisco, CA 94102-6007				
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Ground transportation				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged \$2.39	(b) Date of Charge 10/12/2024	(c) Date(s) Cr 10/21/2024	edit Card Issuer	Paid		
PAYEE	(a) Payee name Uber		(b) Payee add 1544 Marke Ste 400 San Francis		City, -6007	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political     Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description Ground transportation				
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Offic	e sought	Cneck If Austin, TX,	officeholder living exp	ense	

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)					
Sch: 8/12 Rpt: 37/43	Turner, Christopher	G. (The Honorable)		00062790							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	1,657.3	39					
6 PAYMENT	(a) Amount Charged \$20.54	(b) Date of Charge 10/12/2024	(c) Date(s) Credit Card Issuer 10/21/2024	r Paid							
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102	City, -6007	State,	Zip Code					
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Ground transportation								
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense						
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held							
PAYMENT	(a) Amount Charged \$34.54	(b) Date of Charge 10/11/2024	024 10/21/2024								
PAYEE	(a) Payee name  Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102	City, -6007	State,	Zip Code					
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	•	(b) Description Ground transportation								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$2.86	(b) Date of Charge 10/11/2024	(c) Date(s) Credit Card Issuel 10/21/2024	r Paid							
PAYEE	(a) Payee name  Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102	City, -6007	State,	Zip Code					
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	ment And Related	(b) Description Ground transportation								
Non-Political  Complete ONLY if direct expenditure to benefit C/OH  Condidate/Officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Condidate/Officeholder name  Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office sought  Office held											

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commis	sion Filers)			
	Sch: 9/12 Rpt: 38/43	Turner, Christopher	G. (The Honorable)			00062790					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$	1,657.3	39			
6	PAYMENT	(a) Amount Charged \$33.72	(b) Date of Charge 10/11/2024	(c) Date(s 10/21/20	) Credit Card Issud 124	er Paid					
7	PAYEE	(a) Payee name Uber			rket St ncisco, CA 9410	City, 2-6007	State,	Zip Code			
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Descri	ption ransportation						
L	Non-Political	<u> </u>	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	pense				
	9 Complete ONLY if direct Candidate/Officeholder name Officependiture to benefit C/OH					Office held					
	PAYMENT	(a) Amount Charged \$36.97	(b) Date of Charge 10/11/2024	(c) Date(s	) Credit Card Issue 124	er Paid					
	PAYEE	(a) Payee name  Uber		(b) Payee 1544 Ma Ste 400 San Fran		City, 2-6007	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Descri							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	pense				
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	ffice sought Office held							
	PAYMENT	(a) Amount Charged \$41.00	(b) Date of Charge 10/11/2024	(c) Date(s	) Credit Card Issu 124	er Paid					
	PAYEE	(a) Payee name Uber		(b) Payee 1544 Ma Ste 400 San Fran		City, 2-6007	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political Non-Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	,	(b) Descri Ground t	ransportation	/ officeholder living	20000				
$\vdash$	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	e sought	Crieck if Austin, 1)	Office held	pense					
е	xpenditure to benefit C/OH	Januluale/Officeriolder	name Office	c sought		Onice Held					
Ī											

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
	Sch: 10/12 Rpt: 39/43	Turner, Christopher G. (The Honorable)				00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	<b>\$</b> 1,657.39				
6	PAYMENT	(a) Amount Charged \$28.36	(b) Date of Charge 10/10/2024	(c) Date(s 10/21/20	) Credit Card Issue )24	er Paid				
7	PAYEE	(a) Payee name Uber			rket St ncisco, CA 94102	City, 2-6007	State,	Zip Code		
8	PURPOSE OF EXPENDITURE  X Political		See Categories listed at the top of this schedule)  Transportation Equipment And Related  Ground transportation							
L	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense			
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$172.90	(b) Date of Charge 10/12/2024	(c) Date(s 10/21/20	) Credit Card Issue )24	er Paid				
PAYEE (a) Payee name  UnaVida		Ste 307	address; kinney Ave TX 75204-4553	City,	State,	Zip Code				
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Event Expense			(b) Description Lunch for staff after campaign event						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense			
е	Complete ONLY if direct Candidate/Officeholder name Office expenditure to benefit C/OH			e sought		Office held				
	PAYMENT	(a) Amount Charged \$3,858.15	(b) Date of Charge 10/11/2024	(c) Date(s 10/21/20	) Credit Card Issue )24	er Paid				
	PAYEE	(a) Payee name UnaVida		Ste 307	address; kinney Ave TX 75204-4553	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  X Political Non-Political	E (See Categories listed at the top of this schedule)  Event Expense			(b) Description Campaign event catering					
$\vdash$	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Crieck if Austin, TX	, officeholder living exp	erise			
е	xpenditure to benefit C/OH	Candidate/Officeriolder	name Office	o sought		Onice neiu				
1										

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 11/12 Rpt: 40/43	Turner, Christopher	G. (The Honorable)	00062790				
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	1,657.3	19	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$500.00	10/25/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Josey Garcia Campaign		702 Richland Hills Dr Unit 760578 San Antonio, TX 78245-4	520			
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Contribution				
X Political	Contributions/Donatio						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$400.00	10/21/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	UTA Shorthorn		PO Box 19038				
			Arlington, TX 76019-0001	L			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Advertising Expense	ee Categories listed at the top of this schedule)  Newspaper advertising					
X Political	Advertising Expense						
Non-Political  (c) Check if travel outside of Texas. Complete Sched  Complete ONLY if direct  Candidate/Officeholder name		of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense		
		name Office	me Office sought Offic				
expenditure to benefit C/OH		-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$1,107.54	10/10/2024	10/21/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
(a) Fayee Halle			2222 N Stemmons Fwy	City,	State,	Zip Couc	
	Renaissance Hotel	- Dallas	ZZZZ W Sterninons i wy				
			Dallas, TX 75207-2802				
PURPOSE OF	PURPOSE OF (a) Category		(b) Description				
EXPENDITURE	<b>EXPENDITURE</b> (See Categories listed at the top of this schedule)		Lodging in Dallas for campaign fundraising event				
X Political Event Expense							
			Check if Austin, TX	, officeholder living expe	ense		
Complete ONLY if direct Candidate/Officeholder name Office sought				Office held			
expenditure to benefit C/OH							

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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	- Gift/Awards	Memorials Expense P	rinting Expense Tra	avel in District avel Out of District THER (enter a category	not listed above)
		The Insti	uction Guide explains how	w to complete this form.		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	s Commission Filers)
	Sch: 12/12 Rpt: 41/43	Turner, Christopher	G. (The Honorable)		00062790	
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED		
	ISSUER	see pr	evious	EXPENDITURES	\$	1,657.39
		•		CHARGED TO A CREDIT CARD		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid	
		\$92.00	10/03/2024	10/21/2024		
		·				
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code
		<b>.</b>		130 E Bardin Rd		
		Dominos Pizza				
				Arlington, TX 76018-5260	1	
8	PURPOSE OF	(a) Category		(b) Description		
	EXPENDITURE	(See Categories listed at the top Food/Beverage Exper		Pizza for UTA meet and g	reet event	
	X Political	Todar Bovorago Expor				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense
9	Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought	Office held	
e	xpenditure to benefit C/OH					

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME (Ethics Commission Filers) Filer ID Sch: 1/1 Rpt: 42/43 00062790 Turner, Christopher G. (The Honorable) Date Payee name

09/29/2024	AI&I					
6 Amount (\$) \$76.94	7 Payee address; City; State; Zip Co 208 S Akard St	ode				
Reimbursement from political contributions intended	Dallas, TX 75202-4206					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense  Campaign portion of wireless bill				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
10/21/2024	Apple					
Amount (\$) \$14.06	Payee address; City; State; Zip Code  1 Apple Park Way					
Reimbursement from political contributions intended	Ms 927-4INV Cupertino, CA 95014-0642					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Apple News+ Subscription				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

╙								
	The Instruction Guide explains how to complete this form.					ages Schedule K: /1 Rpt: 43/43		
2				Filer ID	D (Ethics Commission Filers)			
l				00062		,		
┝	Date							
4		5 Name of person from whom amount is received			8 Amount (\$)	440.00		
l	10/05/2024	American Express				\$19.00		
l		6 Address of person from whom amount is received; City; State; Zip Code						
l								
l								
l		New York, NY 10285						
l		7 Purpose for which amount is received Check if p	olitic	al cont	ribution returned to file	er		
l		Wifi fee credit						
⊨	Data	Name of page or from whom are until a readined			Δ == α (Φ)			
l	Date	Name of person from whom amount is received			Amount (\$)	<b>#10.00</b>		
l	10/09/2024	American Express				\$10.00		
l		Address of person from whom amount is received; City; State; Zip Code						
l								
l								
l		New York, NY 10285						
l		Purpose for which amount is received Check if p	olitic	al cont	ribution returned to file	er		
l		Wireless credit						
H	Data	Name of page or from whom are until a readined			Δ == α (Φ)			
l	Date	Name of person from whom amount is received			Amount (\$)	Φ704 OO		
l	10/25/2024	American Express				\$761.83		
l		Address of person from whom amount is received; City; State; Zip Code						
l								
l								
l		New York, NY 10285						
l		Purpose for which amount is received	olitic	al cont	ribution returned to file	er		
l		Account interest						
F	Date	Name of person from whom amount is received			Amount (\$)			
l	10/25/2024				Airiount (φ)	¢710.66		
l	10/25/2024	Bank of America				\$719.66		
l		Address of person from whom amount is received; City; State; Zip Code						
l								
l								
l		Tampa, FL 33622						
l		Purpose for which amount is received Check if p	olitic	al cont	ribution returned to file	er		
l		CD account interest						
Г								
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l								
l								
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l								