

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00030098	2 Total pages filed: 63	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Christi L.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/28/2024
	NICKNAME	LAST Craddick	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 3112 Windsor Ste A-505 Austin, TX 78703		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Thornton J.	MI	
	NICKNAME	LAST Keel	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 23812 Tres Coronas Spicewood, TX 78669		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 699-3899	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 09/27/2024	THROUGH	Month Day Year 10/26/2024	
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Railroad Commissioner		12 OFFICE SOUGHT (if known) Railroad Commissioner	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Craddick, Christi L. (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00030098

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input checked="" type="checkbox"/> GENERAL	Texas Alliance for Life
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	8000 Centre Park Dr Ste 380
	Austin, TX 78754
	COMMITTEE CAMPAIGN TREASURER NAME
	Shaw, James
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	4505 Corazon Cv
	Round Rock, TX 78681

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 504,284.34
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 128,869.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,577,036.17
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Christi L. Craddick

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH
ADDENDUM

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C / OH NAME	Craddick, Christi L. (The Honorable)	Filer ID	(Ethics Commission Filers)
		00030098	

17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input checked="" type="checkbox"/> GENERAL	Texas Now PAC	
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		PO Box 341027	
		Austin, TX 78734	
	COMMITTEE CAMPAIGN TREASURER NAME		
	Rusing, Shannon		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
	PO Box 341027		
	Austin, TX 78701		

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Craddick, Christi L. (The Honorable)		19 Filer ID 00030098	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	499,461.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	4,823.34
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	115,703.87
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	13,166.07
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	847.62

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/28 Rpt: 5/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anwar, Ryan C. (Mr.)	7 Amount of Contribution (\$) \$25,000.00
6 Contributor address; City; State; Zip Code Midland, TX 79705-8618		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Petroplex Energy
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer III, Ira F. (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75206-1910		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auler, Susan (Mrs.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Austin, TX 78703-2441		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Bob (Mr.)	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Granbury, TX 76049-0987		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beecherl, Robert R. (Mr.)	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Midland, TX 79702-2502		
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/28 Rpt: 6/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biard, Amy (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746-5258	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bivins, Mark Ernest <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79105-0708	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boggus, Bob (Mr.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504-2870	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowling, Randall J. (Mr.) <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-8176	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Homebuilder		Employer (See Instructions) Tropicana Homes Corporation
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowling IV, Robert L. (Mr.) <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-6431	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Homebuilder		Employer (See Instructions) Tropicana Homes Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/28 Rpt: 7/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton Jr., Bill (Mr.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code El Paso, TX 79922-2128		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaffin, Michael Glenn (Mr.)	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Humble, TX 77346-2142		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Valence
Date 10/04/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035006 _____) Chevron Employees PAC (Federal)	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code San Ramon, CA 94583-0716		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, James (Mr.)	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Marble Falls, TX 78654-0668		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleere, Kirk	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code San Angelo, TX 76902-1622		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/28 Rpt: 8/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffin Renner LLP 6 Contributor address; City; State; Zip Code Austin, TX 78705-2099	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Concho Valley Republican Women's Club PAC Contributor address; City; State; Zip Code San Angelo, TX 76906-0583	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ConocoPhillips Spirit PAC Contributor address; City; State; Zip Code Bartlesville, OK 74004-0001	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke County Republican Women PAC Contributor address; City; State; Zip Code Gainesville, TX 76240-4162	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courson, Harold D. (Mr.) Contributor address; City; State; Zip Code Perryton, TX 79070-0809	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Natural Gas		Employer (See Instructions) Courson Oil & Gas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/28 Rpt: 9/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cross Oak Group <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701-1819	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daggett, Susan (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762-5106	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, David L. (Mr.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79707-1434	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLa Express LCC <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-7100	Amount of Contribution (\$) \$4,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deison, David P. (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086-4309	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/28 Rpt: 10/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delisi Communications PAC	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Austin, TX 78701-1720		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denman III, Joe C.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lufkin, TX 75901-7706		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) District Disposal LLC	Amount of Contribution (\$) \$20,000.00
Contributor address; City; State; Zip Code Center, TX 75935-4537		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duggins Wren Mann & Romero LLP	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78767-1149		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enbridge (U.S.) Inc. PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77056-5353		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/28 Rpt: 11/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everhart, Jane G. (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209-2207	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00121368</u>) Exxon Mobil Corporation PAC	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Irving, TX 75039-4202	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgibbons, Donald R. (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Albany, TX 76430-8030	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Paul L. (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code El Paso, TX 79905-3106	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Franklin Mountain Investments
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Phil (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78701-2179	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/28 Rpt: 12/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gipson, Connie Wade <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75605-1630	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goleman, R. Kinnan (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1801	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman III, Leonard A. (Mr.) <hr/> Contributor address; City; State; Zip Code El Paso, TX 79922-2022	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hackett, Maureen (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-1115	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Community Volunteer		Employer (See Instructions) NA
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardaway, David J. (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605-3952	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/28 Rpt: 13/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harracksingh, Rachel (Ms.) <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79626	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayenga, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-1456	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McElroy, Sullivan, Miller & Weber LLP
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebble, Carolyn V. (Mrs.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-4129	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Jason S. (Mr.) <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119-6268	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Pantera Energy Company
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) High Plains Republican Women <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79114-1003	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/28 Rpt: 14/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hochheim Prairie Political Action Committee	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Yoakum, TX 77995-1318	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houghton, Ted (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code El Paso, TX 79901-1406	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard Energy Partners PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Jay (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701-2458	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Raymond L. (Mr.)	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201-2300	
Principal occupation / Job title (See Instructions) Chairman, President and CEO		Employer (See Instructions) Hunt Consolidated, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/28 Rpt: 15/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Woody L. (Mr.) <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79913-0667	7 Amount of Contribution (\$) \$15,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Hunt Building Corporation
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Clint (Mr.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79702-1973	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacks, Rodney <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-3397	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jobe, Stanley P. (Mr.) <hr/> Contributor address; City; State; Zip Code El Paso, TX 79928-5240	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Jobe Concrete Products, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, K.C. <hr/> Contributor address; City; State; Zip Code Albany, TX 76430-8057	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/28 Rpt: 16/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Neal Thomas (Mr.)	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Austin, TX 78735-1702		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones Jr., Jon Rex (Mr.)	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Albany, TX 76430-8030		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Jones Mgt. Corp.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karlsruher, Mary Eileen (Mrs.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code El Paso, TX 79932-4216		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeling, Keith (Dr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Carthage, TX 75633-1623		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keppler, Edward (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Fulshear, TX 77441		
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Wolf Pack Ind.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/28 Rpt: 17/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keppler, Edward (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fulshear, TX 77441-1703	
8 Principal occupation / Job title (See Instructions) COO		9 Employer (See Instructions) Wolf Pack Ind.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knowlton, Lary D. (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Rockwall, TX 75032-8605	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Basa Resources Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle, James Wayne (Dr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Carthage, TX 75633-2231	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landry, Jacob (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Erath, LA 70533-4006	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landry, Vance (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Erath, LA 70533-0247	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/28 Rpt: 18/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauhoff, Vera (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Portland, TX 78374-1453	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehrmann, Brian (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75201-2814	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Robert K. (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kerrville, TX 78029-4928	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Judith (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78737-1501	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00393348) Marchant Good Government Fund	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Carrollton, TX 75006-3016	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/28 Rpt: 19/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marek, Todd (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Rogers, TX 76569-0725	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Ross B. (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dayton, WY 82836-1083	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) EOGC INC.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews Jr., Charles W. (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75205-3009	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCart Jr., Joseph R.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78703-1806	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Sullivan, Miller & Weber LLP	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78711-2127	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/28 Rpt: 20/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland Jr., James William (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Tuscaloosa, AL 35406-2011	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis Lochridge Attorneys at Law	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78703-5345	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrue, Aaron	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Grand Prairie, TX 75050-6561	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Gary D. (Mr.)	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Midland, TX 79701-4310	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Reliance Energy Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillan, John C. (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130-6675	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/28 Rpt: 21/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lindsey <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731-3818	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, William J. <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-2217	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, David and Ginger <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624-8275	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Oil and Gas		Employer (See Instructions) Self
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neff, Lynn T. (Mrs.) <hr/> Contributor address; City; State; Zip Code Albany, TX 76430-8011	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Kenneth C. (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-1282	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) CML Exploration		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/28 Rpt: 22/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) New, Alvin (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code San Angelo, TX 76903-6769	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northwest Austin Republican Women	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78717-5513	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEOK Employees PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Tulsa, OK 74102-0871	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Occidental Petroleum Corporation PAC (OXY PAC)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Washington, DC 20006-5804	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsen, Todd (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78731-5341	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/28 Rpt: 23/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/04/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00431932) Ovintiv USA INC. PAC	7 Amount of Contribution (\$) \$4,000.00
6 Contributor address; City; State; Zip Code Denver, CO 80202-5632		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pack, Sam H. (Mr.)	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Dallas, TX 75248-7901		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Pack Automotive Group
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Mike (Mr.)	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Albany, TX 76430-8020		
Principal occupation / Job title (See Instructions) Oil and Gas		Employer (See Instructions) Momentum Operating
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Jorge	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code El Paso, TX 79904-6106		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfluger, Addison Lee (Mr.)	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code San Angelo, TX 76901-4511		
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/28 Rpt: 24/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfluger, William C. (Mr.) 6 Contributor address; City; State; Zip Code San Angelo, TX 76904-6212	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Picquet, Glenn A. Contributor address; City; State; Zip Code Albany, TX 76430-8037	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platt, C. Ronald (Mr.) Contributor address; City; State; Zip Code The Hills, TX 78738-1115	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rasmussen, Christopher J. (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78212-5235	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Comal Operating LLC
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridgway, Diana D. (Ms.) Contributor address; City; State; Zip Code San Antonio, TX 78231-1936	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/28 Rpt: 25/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Texas PAC <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-5050	7 Amount of Contribution (\$) \$50,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rycar Investments <hr/> Contributor address; City; State; Zip Code Center, TX 75935-4537	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Republican Women <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Jodi (Mrs.) <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901-5328	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-1105	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/28 Rpt: 26/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saulsbury Sr., Charles R. (Mr.)	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code Odessa, TX 79762-9353	
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Saulsbury Industries
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitz, John (Mr.)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Gainesville, TX 76241-0819	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) B29 Investments
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Ginette R. (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75248-3925	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton, Garlyn O. (Mr.)	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Temple, TX 76503-0548	
Principal occupation / Job title (See Instructions) Auto Dealer		Employer (See Instructions) Garlyn Shelton Autos
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Kelly V. (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78738-1753	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/28 Rpt: 27/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smalley Jr., Bill (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Albany, TX 76430	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smitherman, Barry T.	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Austin, TX 78716-3805	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamper, Calvin Thomas (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Longview, TX 75606-3464	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stasney, Spencer	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77005-2025	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Steve	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code San Angelo, TX 76904-8824	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/28 Rpt: 28/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Targa Resources Corp Texas PAC	7 Amount of Contribution (\$) \$10,000.00
6 Contributor address; City; State; Zip Code Houston, TX 77002-1412		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Irene J. (Mrs.)	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code San Antonio, TX 78251-1217		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texakoma Operating, LP	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Plano, TX 75024-6682		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Austin, TX 78701-2175		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Builders HomePAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Austin, TX 78701-1957		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/28 Rpt: 29/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFund	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Waco, TX 76702-2689		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00040394) The Williams Companies, Inc. PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Tulsa, OK 74172-0140		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Lance	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Albany, TX 76430-2501		
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions) Stasney Well Service
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Richard H. (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Carthage, TX 75633-6162		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tidwell, Don (Mr.)	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Albany, TX 76430-8028		
Principal occupation / Job title (See Instructions) Oil and Gas		Employer (See Instructions) Momentum Operating

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/28 Rpt: 30/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Clifford R. (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Long Branch, TX 75669-3820	
8 Principal occupation / Job title (See Instructions) Energy Business		9 Employer (See Instructions) Self
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Gary	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028-3753	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Ralph C.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Long Branch, TX 75669-3857	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Triggs, Cindy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Georgetown, TX 78633-5715	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troclair PC	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78701-2636	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/28 Rpt: 31/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valero Energy PAC <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78269-6000	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandermeer, David A. (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-1202	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Venable Royalty, LTD (Partnership) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-6607	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Margaret G. (Mrs.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79705-1926	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, William G. <hr/> Contributor address; City; State; Zip Code Midland, TX 79702-2253	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/28 Rpt: 32/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ted (Mr.)	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78730-1119	
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Rockport Energy Solutions LLC
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise Republican Women	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Boyd, TX 76023-1819	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wisniewski, Scott A. (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code San Angelo, TX 76904-8206	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young Jr., George M. (Mr.)	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76121-3610	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Pegasus Resources, LLC

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 33/63	
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/16/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Woody L. (Mr.)	8 Amount of contribution (\$) \$587.25	9 In-kind contribution description Event food and beverage
	7 Contributor address; City; State; Zip Code El Paso, TX 79913-0667		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Hunt Building Corporation	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
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)			
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longbow Consulting Partners LLC	Amount of contribution (\$) \$1,500.00	In-kind contribution description Facility use
	Contributor address; City; State; Zip Code Austin, TX 78701-1875		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spreen, Lauren Hamner	Amount of contribution (\$) \$1,430.91	In-kind contribution description Event food, drink and service
	Contributor address; City; State; Zip Code Austin, TX 78703-1943		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Consultant		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 34/63	
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/04/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFund	8 Amount of contribution (\$) \$5.18	9 In-kind contribution description Websire endorsement
	7 Contributor address; City; State; Zip Code Waco, TX 76702-2689		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
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)			
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Clifford R. (Mr.)	Amount of contribution (\$) \$1,300.00	In-kind contribution description Event food and beverage
	Contributor address; City; State; Zip Code Long Branch, TX 75669-3820		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Energy Business		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/15 Rpt: 35/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/12/2024	5 Payee name Alpha Six Aviation Services	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 113 Cloverleaf Cv Buda, TX 78610	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense East Texas trip on 10/8/2024
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Alpha Six Aviation Services	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 113 Cloverleaf Cv Buda, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pilot services to Dallas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2024	Payee name Anedot	
Amount (\$) \$24.00	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/15 Rpt: 36/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/17/2024	5 Payee name Anedot	
6 Amount (\$) \$242.70	7 Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Anedot	
Amount (\$) \$32.10	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2024	Payee name Anedot	
Amount (\$) \$19.80	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/15 Rpt: 37/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/09/2024	5 Payee name Anedot	
6 Amount (\$) \$76.95	7 Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Anedot	
Amount (\$) \$1.28	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2024	Payee name Anedot	
Amount (\$) \$0.34	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 4/15 Rpt: 38/63	2	FILER NAME Craddick, Christi L. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00030098
4	Date 10/03/2024	5	Payee name Anedot		
6	Amount (\$) \$1,092.90	7	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/02/2024		Payee name Anedot		
	Amount (\$) \$276.45		Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/30/2024		Payee name Anedot		
	Amount (\$) \$278.40		Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 5/15 Rpt: 39/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4	Date 10/25/2024	5 Payee name Anedot	
6	Amount (\$) \$413.63	7 Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 10/23/2024	Payee name Anedot	
	Amount (\$) \$585.60	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 10/21/2024	Payee name Anedot	
	Amount (\$) \$351.90	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 6/15 Rpt: 40/63	2	FILER NAME Craddick, Christi L. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00030098
4	Date 09/27/2024	5	Payee name Anedot		
6	Amount (\$) \$97.80	7	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee		
9		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/18/2024		Payee name Austin Catering		
	Amount (\$) \$2,081.65		Payee address; City; State; Zip Code 8530 Burnet Rd Austin, TX 78757-7004		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night party		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/27/2024		Payee name Baker, Wynn		
	Amount (\$) \$184.70		Payee address; City; State; Zip Code 1717 Enfield Rd Apt 106 Austin, TX 78703-3302		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign related business		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/15 Rpt: 41/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
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4 Date 09/27/2024	5 Payee name Baker, Wynn
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6 Amount (\$) \$42.50	7 Payee address; City; State; Zip Code 1717 Enfield Rd Apt 106 Austin, TX 78703-3302
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Personal cell phone reimbursement
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/27/2024	Payee name Barr, Randi Celey (Ms.)
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Amount (\$) \$9,142.14	Payee address; City; State; Zip Code 4715 Sinclair Ave Austin, TX 78756-2818
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/27/2024	Payee name Barr, Randi Celey (Ms.)
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Amount (\$) \$22.89	Payee address; City; State; Zip Code 4715 Sinclair Ave Austin, TX 78756-2818
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Use of phone
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/15 Rpt: 42/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/18/2024	5 Payee name Blue Sky Aviation	
6 Amount (\$) \$7,382.65	7 Payee address; City; State; Zip Code 1982 Airport Dr San Marcos, TX 78666-4832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight services to El Paso
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/25/2024	Payee name Brian Bridges Enterprises INC	
Amount (\$) \$380.65	Payee address; City; State; Zip Code 3409 Windy Harbor Dr Austin, TX 78734-2025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel for Plane
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Castle Communications	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code Po Box 90691 Austin, TX 78709-0691	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/15 Rpt: 43/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
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4 Date 10/25/2024	5 Payee name Cessna 205, LLC
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6 Amount (\$) \$2,706.25	7 Payee address; City; State; Zip Code 3409 Windy Harbor Dr Austin, TX 78734-2025
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight to San Angelo
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/25/2024	Payee name Cessna 205, LLC
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Amount (\$) \$3,369.73	Payee address; City; State; Zip Code 3409 Windy Harbor Dr Austin, TX 78734-2025
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight to San Angelo
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/11/2024	Payee name Chase Credit Card
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Amount (\$) \$13,399.72	Payee address; City; State; Zip Code PO Box 15123 Wilmington, DE 19850-5123
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of campaign credit card bill
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/15 Rpt: 44/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/26/2024	5 Payee name Chase Credit Card	
6 Amount (\$) \$19,489.12	7 Payee address; City; State; Zip Code PO Box 15123 Wilmington, DE 19850-5123	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of campaign credit card bill
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Dudley Group LLC	
Amount (\$) \$1,954.47	Payee address; City; State; Zip Code 1108 Lavaca St Ste 693 Austin, TX 78701-2180	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and print forms
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Dudley Group LLC	
Amount (\$) \$13,500.00	Payee address; City; State; Zip Code 1108 Lavaca St Ste 693 Austin, TX 78701-2180	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/15 Rpt: 45/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 09/30/2024	5 Payee name Dudley Group LLC	
6 Amount (\$) \$2,250.20	7 Payee address; City; State; Zip Code 1108 Lavaca St Ste 693 Austin, TX 78701-2180	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and print forms
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Dudley Group LLC	
Amount (\$) \$277.66	Payee address; City; State; Zip Code 1108 Lavaca St Ste 693 Austin, TX 78701-2180	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and print forms
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Gober Group	
Amount (\$) \$505.50	Payee address; City; State; Zip Code 14425 Falcon Head Blvd Austin, TX 78738-4412	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense legal advice
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/15 Rpt: 46/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/07/2024	5 Payee name Google Services	
6 Amount (\$) \$92.10	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email and calendar services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2024	Payee name Heim, Bill	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 10312 Trout Cv Austin, TX 78749-6946	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pilot services to El Paso
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Hutchens, Mia	
Amount (\$) \$461.75	Payee address; City; State; Zip Code 1122 Colorado St Ste 102 Austin, TX 78701-2101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign related business
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/15 Rpt: 47/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/01/2024	5 Payee name Keel Systems	
6 Amount (\$) \$4,041.25	7 Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669-1631	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance software and services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Keel Systems	
Amount (\$) \$4,041.25	Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669-1631	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance software and services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Lilly And Company	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code 1005 Congress Ave Ste 400 Austin, TX 78701-2469	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising retainer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/15 Rpt: 48/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4 Date 10/10/2024	5 Payee name ReadyRefresh	
6 Amount (\$) \$84.60	7 Payee address; City; State; Zip Code 6661 Dixie Hwy Ste 4 Louisville, KY 40258-3950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office refreshments
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Texas Workforce Commission	
Amount (\$) \$5.25	Payee address; City; State; Zip Code PO Box 149037 Austin, TX 78714-9037	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State unemployment taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2024	Payee name Tripp Aviation	
Amount (\$) \$4,108.09	Payee address; City; State; Zip Code 1865 Mykawa Rd Pearland, TX 77581-3207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense East Texas trip
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/15 Rpt: 49/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
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4 Date 10/02/2024	5 Payee name Tripp Aviation
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6 Amount (\$) \$3,695.29	7 Payee address; City; State; Zip Code 1865 Mykawa Rd Pearland, TX 77581-3207
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to Dallas
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/01/2024	Payee name U.S. Treasury
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Amount (\$) \$3,990.61	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201-0001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal tax withholding
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/13 Rpt: 50/63		2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098	
4 CREDIT CARD ISSUER		Name of financial institution Chase		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$412.98	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name American Airlines		(b) Payee address; City, State, Zip Code 4255 Amon Carter Blvd Fort Worth, TX 76155	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Flight for GOP meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$1,072.85	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name Lakeway Aviation		(b) Payee address; City, State, Zip Code 13204 Country Trails Ln Austin, TX 78732-2079	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Flight to Midland	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$1,587.60	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name Million Air Austin		(b) Payee address; City, State, Zip Code 4801 Emma Browning Ave Austin, TX 78719-3303	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for plane in El Paso Trip	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/13 Rpt: 51/63		2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$722.09	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7 PAYEE		(a) Payee name Million Air Austin		(b) Payee address; City, State, Zip Code 4801 Emma Browning Ave Austin, TX 78719-3303	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for plane in El Paso Trip	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$1,375.42	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name Million Air Austin		(b) Payee address; City, State, Zip Code 4801 Emma Browning Ave Austin, TX 78719-3303	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for plane in El Paso Trip	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$39.98	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name 32 Market		(b) Payee address; City, State, Zip Code 3329 Casey St River Falls, WI 54022-5852	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food and drink for travel	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/13 Rpt: 52/63	2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$67.15	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
7 PAYEE	(a) Payee name WP Engine	(b) Payee address; City, State, Zip Code 60 29Th St # 343 San Francisco, CA 94110-4929	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description website hosting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT	(a) Amount Charged \$31.08	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
PAYEE	(a) Payee name Chick-FIL-A #03976	(b) Payee address; City, State, Zip Code 1300 Airway Blvd El Paso, TX 79925-2200	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Travel Meal
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT	(a) Amount Charged \$50.06	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
PAYEE	(a) Payee name Paso Del Norte	(b) Payee address; City, State, Zip Code 10 Henry Trost Ct El Paso, TX 79901-1154	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Lodging		(b) Description Hotel in El Paso
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 4/13 Rpt: 53/63	2	FILER NAME Craddick, Christi L. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00030098
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$146.00	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7	PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 475 L'Enfant Plz SW Washington, DC 20260-0004	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Postage stamps	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$194.36	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name Hertz	(b) Payee address; City, State, Zip Code 7212 Cedar Springs Rd Dallas, TX 75235-2810			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Local transportation for meeting		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$236.13	(b) Date of Charge 10/13/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name Cutter Aviation	(b) Payee address; City, State, Zip Code 10440 John Cape Rd Ste 101 San Antonio, TX 78216-4101			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for Plane		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political 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 F4: Sch: 5/13 Rpt: 54/63	2 FILER NAME Craddick, Christi L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00030098
4	CREDIT CARD ISSUER Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6	PAYMENT (a) Amount Charged \$1,750.39	(b) Date of Charge 10/10/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
7	PAYEE (a) Payee name Lakeway Aviation	(b) Payee address; City, State, Zip Code 13204 Country Trails Ln Austin, TX 78732-2079	
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Flight to Tyler	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT	(a) Amount Charged \$143.77	(b) Date of Charge 10/10/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
PAYEE	(a) Payee name Enterprise - Tyler	(b) Payee address; City, State, Zip Code 500 W Front St Tyler, TX 75702-8027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Campaign in Tyler	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT	(a) Amount Charged \$112.25	(b) Date of Charge 10/10/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
PAYEE	(a) Payee name The Violet Shop	(b) Payee address; City, State, Zip Code 109 W Sabine St Carthage, TX 75633-2697	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description FLoowers for event	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/13 Rpt: 55/63		2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$266.37	(b) Date of Charge 10/09/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7 PAYEE		(a) Payee name Million Air Austin		(b) Payee address; City, State, Zip Code 4801 Emma Browning Ave Austin, TX 78719-3303	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for plane	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$134.10	(b) Date of Charge 10/09/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name Holiday Inn Tyler		(b) Payee address; City, State, Zip Code 5701 S Broadway Ave Tyler, TX 75703-4350	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Lodging		(b) Description Hotel	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$25.41	(b) Date of Charge 10/08/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name Whataburger #363		(b) Payee address; City, State, Zip Code 4635 Rittiman Rd San Antonio, TX 78218-4629	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Travel Meal	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 7/13 Rpt: 56/63	2	FILER NAME Craddick, Christi L. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00030098
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$579.31	(b) Date of Charge 10/08/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7	PAYEE	(a) Payee name Jet Center Of Tyler		(b) Payee address; City, State, Zip Code 221 Stearman Dr Georgetown, TX 78628-2399	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Flight to Tyler	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$15.16	(b) Date of Charge 10/06/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7	PAYEE	(a) Payee name Numberbarn		(b) Payee address; City, State, Zip Code Po Box 3 Poway, CA 92074-0003	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office number upkeep	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$48.18	(b) Date of Charge 10/06/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7	PAYEE	(a) Payee name Texaco		(b) Payee address; City, State, Zip Code 1111 Bagby St Houston, TX 77002-2551	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 8/13 Rpt: 57/63	2	FILER NAME Craddick, Christi L. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00030098
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$527.01	(b) Date of Charge 10/06/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7	PAYEE	(a) Payee name Hertz		(b) Payee address; City, State, Zip Code 7212 Cedar Springs Rd Dallas, TX 75235-2810	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Local transportation for meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$116.58	(b) Date of Charge 10/06/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name Expressway Airport	(b) Payee address; City, State, Zip Code 3600 Presidential Blvd Austin, TX 78719-2363			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Parking at airport		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$29.13	(b) Date of Charge 10/06/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name Austin Second Bar	(b) Payee address; City, State, Zip Code 3600 Presidential Blvd Austin, TX 78719-2363			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food and drink at airport		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 9/13 Rpt: 58/63	2	FILER NAME Craddick, Christi L. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00030098
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$64.80	(b) Date of Charge 10/05/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7	PAYEE	(a) Payee name Microsoft		(b) Payee address; City, State, Zip Code 1 Microsoft Way Redmond, WA 98052-8300	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Software	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$294.55	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 475 L'Enfant Plz SW Washington, DC 20260-0004		
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Postage stamps		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$222.85	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name Westbank Flower Market		(b) Payee address; City, State, Zip Code 5320 Bee Caves Rd West Lake Hills, TX 78746-5225		
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description flowers for event		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 10/13 Rpt: 59/63	2	FILER NAME Craddick, Christi L. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00030098
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$72.49	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7	PAYEE	(a) Payee name Intuit Payroll		(b) Payee address; City, State, Zip Code PO Box 7850 Mountain View, CA 94039-7850	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Payroll services	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$110.57	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name Spectrum	(b) Payee address; City, State, Zip Code PO Box 60074 City Of Industry, CA 91716-0074			
PURPOSE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign telephone	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$18.99	(b) Date of Charge 09/29/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024		
PAYEE	(a) Payee name EFAX Services	(b) Payee address; City, State, Zip Code 6922 Hollywood Blvd Fl 5 Los Angeles, CA 90028-6125			
PURPOSE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description FAX Service	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/13 Rpt: 60/63		2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$180.43	(b) Date of Charge 10/19/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7 PAYEE		(a) Payee name Enterprise Rent-A-Car		(b) Payee address; City, State, Zip Code 600 Corporate Park Dr Saint Louis, MO 63105-4204	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Local transportation for meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$6.00	(b) Date of Charge 10/19/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name LAZ Parking Austin		(b) Payee address; City, State, Zip Code 106 E 6th St Ste 320 Austin, TX 78701-3652	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Parking for campaign meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$83.45	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE		(a) Payee name DFW Airport		(b) Payee address; City, State, Zip Code 2400 Aviation Dr Dallas, TX 75261	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food at airport	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 12/13 Rpt: 61/63	2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1,072.85	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
7 PAYEE	(a) Payee name Lakeway Aviation	(b) Payee address; City, State, Zip Code 13204 Country Trails Ln Austin, TX 78732-2079	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Flight to Dallas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$76.52	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
PAYEE	(a) Payee name Go Rentals Dallas	(b) Payee address; City, State, Zip Code 8611 Lemmon Ave Dallas, TX 75209-1614	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Local transportation for meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$219.36	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024
PAYEE	(a) Payee name Cutter Aviation	(b) Payee address; City, State, Zip Code 10440 John Cape Rd Ste 101 San Antonio, TX 78216-4101	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for Plane
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/13 Rpt: 62/63		2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT	(a) Amount Charged \$260.72	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
7 PAYEE	(a) Payee name Million Air Austin		(b) Payee address; City, State, Zip Code 4801 Emma Browning Ave Austin, TX 78719-3303	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for plane	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$665.40	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE	(a) Payee name Business Jet Center		(b) Payee address; City, State, Zip Code 8611 Lemmon Ave Dallas, TX 75209-1614	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for flight	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$133.73	(b) Date of Charge 10/19/2024	(c) Date(s) Credit Card Issuer Paid 10/11/2024 10/26/2024	
PAYEE	(a) Payee name Hertz		(b) Payee address; City, State, Zip Code 7212 Cedar Springs Rd Dallas, TX 75235-2810	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Local transportation for meeting	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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.		1 Total pages Schedule K: Sch: 1/1 Rpt: 63/63
2 FILER NAME Craddick, Christi L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00030098
4 Date 09/27/2024	5 Name of person from whom amount is received American Airlines	8 Amount (\$) \$544.98
	6 Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76155	
	7 Purpose for which amount is received Refund for flight <input type="checkbox"/> Check if political contribution returned to filer	
Date 10/26/2024	Name of person from whom amount is received RBC Wealth Management	Amount (\$) \$302.64
	Address of person from whom amount is received; City; State; Zip Code Midland, TX 79701	
	Purpose for which amount is received End of period value adjustment <input type="checkbox"/> Check if political contribution returned to filer	