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)	ĒD
OFFICE HOLDER NAME The Honorable Michael The Honorable Michael The Honorable Michael Date Received ELECTRONICALLY FILE NICKNAME LAST Schofield ADDRESS / PO BOX; APT / SUITE #; CITY; 934 Hidden Canyon Rd. Amount Change of Address Katy, TX 77450 MI TREASURER NAME MS / MRS / MR Mr. Jay Date Hand-delivered or Date Postma Date Hand-delivered or Date Postma Date Processed Date Imaged MI MI MI Date Imaged	ΞD
NAME The Honorable Michael NICKNAME LAST Schoffield 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; 934 Hidden Canyon Rd. Change of Address Katy, TX 77450 5 CAMPAIGN TREASURER NAME NICKNAME LAST Schoffield SUFFIX 10/26/2024 Date Hand-delivered or Date Postma Receipt # Amount Date Imaged Date Imaged	
NICKNAME LAST SUFFIX 10/26/2024 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS PO BOX; APT / SUITE #; CITY; 934 Hidden Canyon Rd. Change of Address Katy, TX 77450 5 CAMPAIGN TREASURER NAME MS / MRS / MR	
NICKNAME LAST Schofield 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; 934 Hidden Canyon Rd. Change of Address Katy, TX 77450 5 CAMPAIGN TREASURER NAME NICKNAME ADDRESS / PO BOX; APT / SUITE #; CITY; 934 Hidden Canyon Rd. Amount Amount Date Hand-delivered or Date Postma Amount Date Processed Date Imaged MI	
Schofield 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; S14 Find the post of Address Change of Address Katy, TX 77450 Amount Date Post of Address Change of Address MI TREASURER NAME ADDRESS / PO BOX; APT / SUITE #; CITY; S14 Find the post of Date Hand-delivered or Date Post of Date Post of Date Post of Date Processed Date Imaged MI Mr. Jay	rked
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; 334 Hidden Canyon Rd. Change of Address Katy, TX 77450 TREASURER NAME ADDRESS / PO BOX; APT / SUITE #; CITY; 2IP CODE Receipt # Amount Amount Amount Postma Amount Date Processed Date Imaged MI MI MR. Jay	rked
OFFICEHOLDER MAILING ADDRESS Change of Address Katy, TX 77450 MS / MRS / MR TREASURER NAME Page of Address MS / MRS / MR Mr. Jay MI Receipt # Amount Date Processed Date Imaged	rked
MAILING ADDRESS Change of Address Katy, TX 77450 Katy, TX 77450 Date Processed Date Imaged TREASURER NAME Mr. Jay	
Change of Address Change of Address Katy, TX 77450 Date Processed Date Imaged TREASURER NAME Mr. Jay	
Date Imaged 5 CAMPAIGN TREASURER NAME Mr. Jay	
5 CAMPAIGN TREASURER NAME Mr. Jay	
5 CAMPAIGN TREASURER NAME Mr. Jay	
5 CAMPAIGN TREASURER NAME Mr. Jay	
TREASURER Mr. Jay	
NAME Mr. Jay	
NAME	
NICKNAME LAST SUFFIX	
Zeidman	
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; Z	IP CODE
TREASURER 2104 Chilton	. 0002
ADDRESS	
(Residence or Business) Houston, TX 77019	
7 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION	
TREASURER (713) 366-0579	
FRONE	
8 REPORT	
TYPE January 15 30th day before election Runoff 15th day after campaign treas appointment (officeholder onle	
July 15 X 8th day before election Exceeded modified Final Report (Attach C/OH-FF	
reporting limit	•)
9 PERIOD Month Day Year Month Day Year	
COVERED 09/27/2024 THROUGH 10/26/2024	
10/20/2021	
10 ELECTION ELECTION DATE ELECTION TYPE	
Month Day Year Primary Runoff Other	
11/05/2024	
X General Special	
11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)	
State Representative District 132 State Representative District 132	
GO TO PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 19

13 C / OH NAME	Schofield, Michael (T	he Honorable)		14 Filer ID 00057835	(Ethics Com	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures r	accepted or political expenditu may have been made without i quired to report this information	the candidate's or office	eholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Texas Alliance for	Life Political Action Comm	ittee		
		COMMITTEE ADDR				
	SPECIFIC	8000 Centre Park	Dr			
		Ste 380				
		Austin, TX 78754				
			PAIGN TREASURER NAME			
		Shaw, James				
			PAIGN TREASURER ADDRES	SS		
		4505 Corazon CV				
		Round Rock, TX 7	'8754			
16 CONTRIBUTION TOTALS			NTRIBUTIONS (OTHER THA CONTRIBUTIONS MADE ELE		\$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS, C	S DR GUARANTEES OF LOANS	5)	\$	46,405.18
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EXF	PENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES			\$	3,658.53
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE L	AST DAY OF THE	\$	102,192.43
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		tr	swear, or affirm, under penalty ue and correct and includes a nder Title 15, Election Code.			
			The Honor	able Michael Schofie	eld	
		_	Signature of	Candidate or Officehol	der	
AFFIX NC	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	scribed before me. by the s	aid		. this the		day
			ny hand and seal of office.	,,		,
Signature of offi	icer administering	Printed name of	f officer administering	Title of office	r administer	ing oath

SUBTOTALS - C/OH

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

					3 of 19
_	ER NAN	ME Michael (The Honorable)	19 Filer ID 00057835	(Ethics	s Commission Filers)
		E SUBTOTALS SCHEDULE		S	SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	46,400.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	5.18
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	;	\$	1,452.48
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	2,206.05
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/19	
2	FILER NAME Schofield, M	chael (The Honorable)		3	Filer ID (Ethics Commission 00057835	n Filers)
4	Date 10/04/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
_	<u> </u>	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#: Associated Builders & Contractors of Greater Ho Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#: Associated General Contractors of Texas PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78768 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipal occu	sation, con the (occ manachons)	Employer (See manacions	,		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: Beer Alliance of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		I				

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 5/19	
2	FILER NAME Schofield, M	chael (The Honorable)		3	Filer ID (Ethics Commissi 00057835	on Filers)
4	Date 10/10/2024	 Full name of contributor	(ID#: <u>C00035006</u>)	7	Amount of Contribution (\$)	\$1,500.00
		San Ramon, CA 94583				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 10/24/2024	Full name of contributor out-of-state PAC Congress Avenue Partners PAC Contributor address; City; State; Zip Code Austin, TX 78701	(ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	l ns)		
	Date 10/25/2024	Full name of contributor	(ID#:)		Amount of Contribution (\$)	\$1,000.00
		Irving, TX 75039				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 10/26/2024	Full name of contributor out-of-state PAC Foley & Lardner LLP Texas Campaign Fund Contributor address; City; State; Zip Code Dallas, TX 75201	d		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	l ns)		
	Date 10/10/2024	Full name of contributor out-of-state PAC Fred Shannon LLC Contributor address; City; State; Zip Code Round Mound, TX 78663	(ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
			1			

	MONET	ARY POLITICAL CONTRIBU	UTIONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/19
2	FILER NAME Schofield, M	chael (The Honorable)		3 Filer ID (Ethics Commission Filers) 00057835
4	Date 10/04/2024	 Full name of contributor out-of-state PA Gulf States Toyota Inc State PAC Contributor address; City; State; Zip Code 	AC (ID#:)	7 Amount of Contribution (\$) \$500.00
8	Principal occu	Houston, TX 77077 pation / Job title (See Instructions)	9 Employer (See Instructions))
	Date 10/24/2024	Full name of contributor out-of-state PAHOSPAC Contributor address; City; State; Zip Code Austin, TX 78701	AC (ID#:)	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/10/2024	Full name of contributor	AC (ID#:)	Amount of Contribution (\$) \$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions))
	Date 10/13/2024	Full name of contributor out-of-state PA Head, Vim Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$250.00
	Principal occu	Katy, TX 77493 pation / Job title (See Instructions)	Employer (See Instructions))
	Date 10/10/2024	Full name of contributor out-of-state PA HillCo PAC Contributor address; City; State; Zip Code Austin, TX 78701	AC (ID#:)	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
			<u> </u>	

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/19	
2	FILER NAME Schofield, M	ichael (The Honorable)			3	Filer ID (Ethics Commissio 00057835	n Filers)
4	Date 10/07/2024	5 Full name of contributor Katzman, Joel6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Katy, TX 77450 pation / Job title (See Instructions) I	9 Employer (See Instructions	 		
	•	`	,	. , ,	,		
	Date 10/10/2024	Full name of contributor Koebele, Stephen Contributor address; City; St)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	(i)	Employer (See Instructions	s)		
	Date 10/15/2024	Full name of contributor McNerney, Patrick Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$500.00
		Cypress, TX 77433					
	Principal occu COO	pation / Job title (See Instructions)	Employer (See Instructions 3d Design & Engineerin	•	Inc.	
	Date 10/10/2024	Full name of contributor Moak Casey PAC Contributor address; City; St Austin, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 10/10/2024	Full name of contributor P. John Kuhl, Jr., PC Contributor address; City; St Houston, TX 77056	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONT	RIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to con	nplete this fo	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/19	
2	FILER NAME Schofield, M	ichael (The Honorable)			3	Filer ID (Ethics Commission 00057835	n Filers)
4	Date 10/24/2024	 Full name of contributor x out-or Parsons Corporation PAC Contributor address; City; State; Zip Contributor address; City; C	f-state PAC (ID#: <u>C</u>	000103549)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Pasadena, CA 91124 pation / Job title (See Instructions)		Employer (See Instructions)		
_	Date 10/10/2024		f-state PAC (ID#:		,	Amount of Contribution (\$)	\$500.00
		Contributor address; City; State; Zip C	Code				
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/10/2024	Full name of contributor out-o Political Action Committee Of The Contributor address; City; State; Zip C		nsurance Agents of		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/08/2024	Sepehri, John	f-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78731 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/27/2024	Sulistyo, Dore Contributor address; City; State; Zip C	f-state PAC (ID#: Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Katy, TX 77450 pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/19	
2	FILER NAME Schofield, Michael (The Honorable)			3	Filer ID (Ethics Commission 00057835	on Filers)	
4	Date 10/10/2024	5 Full name of contributor TXTA TruckPAC6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$1,000.00
		Auatin, TX 75701					
8	Principal occu	pation / Job title (See Instructions	s) 	9 Employer (See Instructions	5)		
	Date 10/10/2024	Full name of contributor Texans For Lawsuit Refor Contributor address; City; Si Austin, TX 78701)		Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>I</u> S)		
	Date 10/10/2024	Full name of contributor Texans For Lawsuit Refor Contributor address; City; Si)	•	Amount of Contribution (\$)	\$10,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> S)		
	Date 10/24/2024	Full name of contributor Texas Association of Crai Contributor address; City; Si Austin, TX 78716				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 10/24/2024	Full name of contributor Texas Construction Assoc Contributor address; City; St Austin, TX 78701				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/19	
2	FILER NAME Schofield, M	ichael (The Honorable)		3	Filer ID (Ethics Commission 00057835	on Filers)
4	Date 10/24/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
•	Dringing! goog	Waco, TX 78702	D. Employer (Co.) Instructions			
8	-	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Food and Fuel Association PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Podiatric Association Political Action Con Contributor address; City; State; Zip Code	nmittee		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin , TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Architechts Committee Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78702 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_ The Chickasaw Nation Contributor address; City; State; Zip Code Ada, OK 74820			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	ΓIONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/19	
2	FILER NAME Schofield, M	chael (The Honorable)		3	Filer ID (Ethics Commission 00057835	on Filers)
4	Date 10/10/2024	 Full name of contributor out-of-state PAC (The Garcia Group Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions	ns)		
		,				
	Date 10/10/2024	Full name of contributor out-of-state PAC (TxCPA Political Action Committee Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$500.00
		Addison, TX 75001				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (Verizon Communications Inc Good Governn Contributor address; City; State; Zip Code	nent Fund		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701	1 - 1 (0 1 1 1	<u> </u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (Veterinarian Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78754	D#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (Wholesale Beer Distributors of Texas Politic Contributor address; City; State; Zip Code Austin, TX 78701	al Action Committee		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
			1			

TARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1
iction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/19
E Michael (The Honorable)		3 Filer ID (Ethics Commission Filers) 00057835
5 Full name of contributor out-of-state PAC (IDs		7 Amount of Contribution (\$) \$500.00
San Antonio, TX 78265		
upation / Job title (See Instructions)	9 Employer (See Instructions	s)
1	Iction Guide explains how to complete this Iichael (The Honorable) 5 Full name of contributor out-of-state PAC (ID: Zachary Corporation Political Action Committee 6 Contributor address; City; State; Zip Code San Antonio, TX 78265	San Antonio, TX 78265

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	L		SCHEDULE A2					
The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/19						
2 FILER NAME		3	Filer ID (Ethics Commission Filers)					
Schofield, Michael (The Honorable)			00057835					
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$						
5 Date 10/21/2024 10/21/2024 Texas Farm Bureau Agfund Inc PAC 7 Contributor address; City; State; Zip Code Waco, TX 78702	ureau Agfund Inc PAC ress; City; State; Zip Code							
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule N-JUDICIAL) (See instructions)						
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title	e (FOR JUDICIAL) (See instructions)						
14 Contributor's employer/law firm (FOR JUDICIAL)	or's spouse (if any) (FOR JUDICIAL)							
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services			s/Contract Labor		OTHER (enter a	category not listed above))
				Guide explains how to co	ompl	ete this form.				
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID	(Ethics Commission	Filers)
	Sch: 1/2 Rpt: 14/19	Schof	ield, Michael (The Ho	onorable)				00057835		
4	Date	5 Payee	name							
	10/01/2024		Mobility							
6	Amount (\$)	7 Payee	address; City;	State; Zip Co	ode					
	\$137.62		ox 6463	этэг, —р						
	42002	. 0 2								
		Caral	Ctroom II 60107							
			Stream, IL 60197		1					
8	PURPOSE OF		Ory (See Categories listed at		(b)	Description				
	EXPENDITURE	Office	Overhead/Rental Ex	rpense				de of Texas. Com officeholder living	plete Schedule T.	
						Telephone se			, олронов	
9	Complete ONLY if direct	Candida	ate/Officeholder name	Office sou	laht			Office he	əld	
	expenditure to benefit C/OI		ato, omocrioladi name	011100 000	agiit			Omoo m	314	
_	Data									
	Date	Payee								
	10/05/2024		can Express							
	Amount (\$)		address; City;	State; Zip Co	ode					
	\$986.36	P.O. I	3ox 650448							
		Dallas	s, TX 75265							
	PURPOSE	(a) Catego	Ory (See Categories listed at	the top of this schedule)	(b)	Description				
	OF EXPENDITURE		t Card Payment						plete Schedule T.	
	ZA ZADITORZ					ш		officeholder living	g expense	
						Credit Card F	ay	ment		
_	Operation ONLY if allowed	01: -1 -	-t-/0#: -	0#:				O#: I-	-1-1	
	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholder name	Office sou	ugnt			Office h	eia	
	Date	Payee								
	10/11/2024	Aned	ot							
	Amount (\$)		address; City;	State; Zip Co	ode					
	\$53.50	1340	Poydras Street							
		Suite	1770							
		New (Orleans, LA 70112							
	PURPOSE	(a) Catego	Ory (See Categories listed at	the top of this schedule)	(b)	Description				
	OF EXPENDITURE		tation/Fundraising Ex			ш			plete Schedule T.	
	EXPENDITORE					ш		officeholder living	g expense	
						On-line fundr	aıs	ing fees		
					1_					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ate/Officeholder name	Office sou	ught			Office h	eld	
	onponditure to benefit 0/01	•								

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 C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Salaries/	Wage	s/Contract Labor		OTHER (enter a	category not listed above)
				The Instruction Guid	le explains how to co	ompl	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/2 Rpt: 15/19		Schofield, M	lichael (The Hono	orable)				00057835	
4	Date	5	Payee name							
	10/10/2024			un Run for Heroe	es					
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip Co	ode				
	\$250.00		18118 E Alle	en Shore Drive						
			Cypress, TX	77/133						
_	DUDDOCE	(2)				(6)				
8	PURPOSE OF	(a) 		e Categories listed at the		(a)	Description	outoi.	do of Toyon Com	valete Celeadule T
	EXPENDITURE			s/Donations Mad Officeholder/Politic					officeholder living	plete Schedule T.
			Candidate/C	miceriolaer/Politic	ai Committee		Sponsorship			у схренас
							ороноогонир (011	uniun	
Ļ	Operation ONLY if allowed	<u> </u>	2 11 - 1 - 1 - 1 O FF		0#:				Off: I-	-1.1
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	cenoider name	Office sou	ugnt			Office h	ela
	Date		Payee name							
	10/01/2024		Katy Rice H	arvest Festival						
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode				
	\$25.00		901 Avenue	С						
			Katy, TX 774	493						
_	PURPOSE	(2)	-			(h)	Description			
	OF	رم) ا		e Categories listed at the	top of this schedule)	(6)	Description Check if travel of	outsi	de of Texas, Com	plete Schedule T.
	EXPENDITURE		Event Exper	ise			ш		officeholder living	
							Parade entry			
							•			
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office sou	uaht			Office he	eld
	expenditure to benefit C/O					3				
\vdash										

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a cate)

Candidate/Officeriolide//Folitica		ruction Guide explains how	to complete th		TTIEN (enter a catego	ry not iisteu ai	oove)		
1 Total pages Schedule F4:	2 FILER NAME	2 FILER NAME					sion Filers)		
Sch: 1/4 Rpt: 16/19	Schofield, Michael	(The Honorable)	00057835						
4 CREDIT CARD ISSUER	Name of final	ncial institution	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid				
	\$15.70	10/04/2024							
7 PAYEE	(a) Payee name Exxon C Store		(b) Payee at 805 E Stat	e Hwy 71	City,	State,	Zip Code		
8 PURPOSE OF	(a) Category		(b) Descripti	, TX 78945					
8 PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Out of dist						
X Political	Travel Out of District	iot traver							
Non-Political	() []			7					
	(c) Check if travel outside Candidate/Officeholder	Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH			e sought						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid				
	\$41.91	10/10/2024							
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code		
	The Kebob Shop		1011 E 5th	St					
			Austin, TX	78702					
PURPOSE OF	(a) Category		(b) Descripti	on					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	•	Staff meals	6					
X Political	T ood/beverage Exper	1130							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	name Offic	fice sought Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid				
	\$16.74	10/23/2024							
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code		
			316 West 2	12th St					
	Sweetwaters Coffee	е							
			Austin, TX	78701					
PURPOSE OF	(a) Category		(b) Descripti						
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	•	Coffee for	prospective sta	off interviews				
X Political	. Journal of the control of the cont								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeriolder/Folitica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how		omplete th		TILN (enter a categor	y not listed a	bove)		
1 Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethics Commission Filers)				
Sch: 2/4 Rpt: 17/19	Schofield, Michael ((The Honorable)				00057835				
4 CREDIT CARD ISSUER		ncial institution revious		EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s)	Credit Card Issuer	r Paid				
	\$42.70	10/24/2024								
7 PAYEE	(a) Payee name			Payee a	ddress;	City,	State,	Zip Code		
	Couthorn Dough Do	lina	90)8 Avenu	ие В					
	Southern Dough Ba	aking	Sı	uite A						
			_	aty, TX 7						
8 PURPOSE OF	(a) Category		1 ` ′	Descripti						
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper		sta	aff meals	5					
X Political	T God/Bovorago Expor									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	, officeholder living expense				
9 Complete ONLY if direct	name Office	e sou	ught		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s)	Credit Card Issuer	r Paid				
	\$8.39	09/27/2024								
PAYEE	(a) Payee name		(b)	Payee a	ddress;	City,	State,	Zip Code		
	United States Postal Service			40 Gree	enbriar St					
				Houston, TX 77098						
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top		postage							
X Political	Office Overhead/Rent	lai Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Г	Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	•	e soi	<u> </u>		Office held				
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s)	Credit Card Issuer	r Paid				
	\$1,950.97	09/30/2024								
PAYEE	(a) Payee name	<u> </u>	(b)	Payee a	ddress;	City,	State,	Zip Code		
	Donger M. Der del		18	3333 Egr	et Bay Blvd					
	Boney, W. Bradsha	W	St	e 110						
			Н	ouston, 7	ΓX 77058					
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)		(b) Description								
EXPENDITURE	Advertising Expense	of this schedule)	pc	olitical ma	ailer					
X Political	/ tavortioning Expense									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct	Candidate/Officeholder	name Office	e sou	ught	_	Office held				
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica			aries/Wages/Co		THER (enter a cate		oove)			
	The Inst	ruction Guide explains how	to complete	this form.						
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)							
Sch: 3/4 Rpt: 18/19	Schofield, Michael ((The Honorable)			00057835					
4 CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED						
ISSUER	see pi	revious		DITURES SED TO A CREDIT	\$					
	'		CARD	SED TO A CREDIT						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
	\$72.00	10/12/2024								
	Ψ12.00	10/12/2024								
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
			PO Box 2		•	,	•			
	Katy Heritage Socie	ety								
			Katy, TX	77492						
8 PURPOSE OF	(a) Category		(b) Descrip							
EXPENDITURE	(See Categories listed at the top		Katy Her	itage Society Chr	ristmas orna	ments				
X Political	Contributions/Donatio									
Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living	evnense				
9 Complete ONLY if direct	(c) Greek in travel dublide of Texas, complete contention.				Office held	ехрепзе				
expenditure to benefit C/OH	Carialadio, Ciniconolaci	That To The Tollar	o oougin		Omoo noid					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
	\$20.00	10/13/2024								
	φ20.00	10/13/2024								
PAYEE	(a) Payee name		(b) Payee	address:	City,	State,	Zip Code			
				ngham Oaks	•	,	•			
	St. John Vianney cl	nurch		3						
			Houston,	TX 77079						
PURPOSE OF	(a) Category		(b) Descrip							
EXPENDITURE	(See Categories listed at the top		event ticket							
X Political	Contributions/Donatio									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living	expense				
Complete ONLY if direct	Candidate/Officeholder	name Office	ice sought Office held							
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
	\$12.00	10/17/2024								
	412.00	10/11/2021								
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
			1 ' '	orthwest Fwy	•		•			
	Cypress Republica	ns		,						
			Houston,	TX 77065						
PURPOSE OF	(a) Category		(b) Descrip							
EXPENDITURE	(See Categories listed at the top		event tick	ket						
X Political	Contributions/Donatio									
Non-Political		of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living	expense				
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	<u> </u>	Office held	er re				
expenditure to benefit C/OH			3							
	<u>I</u>									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Candidate/Officeholder/Politica			inting Expense llaries/Wages/Contr		avei Out of District THER (enter a category	y not listed al	oove)		
	The Inst	ruction Guide explains how	to complete th	is form.					
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)		
Sch: 4/4 Rpt: 19/19	Schofield, Michael	(The Honorable)			00057835				
4 CREDIT CARD	Name of final	ncial institution		F UNITEMIZED	_				
ISSUER	see p	revious	EXPEND CHARGE	D TO A CREDIT	3				
			CARD						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid				
	\$16.12	10/23/2024							
			<u> </u>						
7 PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code		
	Sweetwaters Coffee	e	316 West 1	12th St					
			Austin, TX	79701					
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top			orospective staf	f interviews				
X Political	Food/Beverage Expe		•						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		7 Check if Austin, TX,	officeholder living expe	ense			
9 Complete ONLY if direct					Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid				
	\$9.52	10/23/2024							
PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code		
	Sweetwaters Coffee	Δ	316 West 12th St						
	oweewaters come.		A TV	70704					
PURPOSE OF	(a) Category		Austin, TX 78701 (b) Description						
EXPENDITURE	(See Categories listed at the top		Coffee for prospective staff interviews						
X Political	Food/Beverage Expe	nse							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder		. Check if Austin, TX, officeholder living expense ice sought Office held						
expenditure to benefit C/OH			ŭ						
	<u>l</u>								
1									