

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) 00086083	2 Total pages filed: 28	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Carl H.	MI 	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/28/2024
	NICKNAME	LAST Tepper	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 94534 Lubbock, TX 79493		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Jay C.	MI 	
	NICKNAME	LAST House	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4609 86th St. Lubbock, TX 79424		APT / SUITE #;	CITY; STATE; ZIP CODE
			AREA CODE	PHONE NUMBER EXTENSION (806) 470-6163
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) State Representative District 84 Lubbock		12 OFFICE SOUGHT (if known) State Representative District 84	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Tepper, Carl H. (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00086083

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 PAC
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	8000 Centre Park Drive Suite 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)	\$	40,551.72
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	5,687.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	54,120.20
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 Carl H. Tepper

 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	Tepper, Carl H. (The Honorable)	Filer ID	(Ethics Commission Filers)
		00086083	

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 REALTORS PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		1115 San Jacinto Blvd., Ste. 200
		Austin, TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME	Cantu, Leslie
	COMMITTEE CAMPAIGN TREASURER ADDRESS	PO Box 2246
		Austin, TX 78768

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

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18 FILER NAME Tepper, Carl H. (The Honorable)		19 Filer ID 00086083	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	40,546.54
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	5.18
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,687.70
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 5/28
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capital Leadership Fund	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erben & Yarbrough	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
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#: _____) Golden Spread PAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Amarillo, TX 79105		
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#: _____) HOMEPAC of Texas	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
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#: _____) Hrncirik, Bobbye (Ms.)	Amount of Contribution (\$) \$26.03
Contributor address; City; State; Zip Code Lubbock, TX 79423		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) UMC Health System

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 6/28
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083
4 Date 10/15/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00366559) NRG Energy INC PAC <hr/> 6 Contributor address; City; State; Zip Code Princeton, NJ 08540	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of the Independent Insurance Agents of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78768	Amount of Contribution (\$) \$750.00
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#: _____) PharmPac <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1,000.00
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#: _____) Posey, Jake (Mr.) <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Posey Law Firm, PC
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TBA Bank PAC - State <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	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: 3/5 Rpt: 7/28
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$22,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Apartment Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1951	Amount of Contribution (\$) \$1,000.00
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#: _____) Texas Automobile Dealers Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
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#: _____) Texas Dairymen PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78711	Amount of Contribution (\$) \$1,000.00
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#: _____) Texas Farm Bureau AGFUND <hr/> Contributor address; City; State; Zip Code Waco, TX 76702-2689	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: 4/5 Rpt: 8/28
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Gin PAC <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Homecare & Hospice PAC - State <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1,000.00
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#: _____) Texas Leads PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78767	Amount of Contribution (\$) \$500.00
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#: _____) Texas Optometric PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00284885) The Home Depot PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	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: 5/5 Rpt: 9/28
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vistra Employee PAC of Vistra Corp. <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75039	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 10/28	
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 10/11/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFUND <hr/> 7 Contributor address; City; State; Zip Code Waco, TX 76702-2689	8 Amount of contribution (\$) \$5.18	9 In-kind contribution description AGFUND website endorsement <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
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)			

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 11/28

2 FILER NAME
Tepper, Carl H. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00086083

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 12/28
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		19 Amount Guaranteed (\$)
21 Employer (See Instructions)		

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: 1/12 Rpt: 13/28	2	FILER NAME Tepper, Carl H. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086083
4	Date 10/17/2024	5	Payee name AC Hotel Bozeman Downtown		
6	Amount (\$) \$96.00	7	Payee address; City; State; Zip Code 110 N Tracy Ave Bozeman, MT 59715		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder issues during legislative conference regarding aerial firefighting		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/07/2024		Payee name Alamo Coffee Company		
	Amount (\$) \$43.94		Payee address; City; State; Zip Code 1021 Sendero Springs Dr Round Rock, TX 78681		
	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 Campaign meal		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/17/2024		Payee name Austin-Bergstrom International Airport		
	Amount (\$) \$27.34		Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719		
	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 Staff meal for travel to Montana for legislative conference regarding aerial firefighting		
		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: 2/12 Rpt: 14/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
4	Date 10/21/2024	5 Payee name Austin-Bergstrom International Airport	
6	Amount (\$) \$74.00	7 Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Airport parking fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 10/04/2024	Payee name Austin-Bergstrom International Airport	
	Amount (\$) \$28.12	Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719	
	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 Airport meal
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 10/05/2024	Payee name Buc-ee's	
	Amount (\$) \$40.30	Payee address; City; State; Zip Code 1700 State Hwy 71 East Bastrop, TX 78602	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Gas for campaign travel
	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: 3/12 Rpt: 15/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
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4 Date 10/07/2024	5 Payee name Canopy by Hilton San Antonio Riverwalk
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6 Amount (\$) \$29.90	7 Payee address; City; State; Zip Code 123 N St Mary's St San Antonio, TX 78205
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8 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 Meeting to discuss campaign issues
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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 10/08/2024	Payee name Dallas Fort Worth International Airport
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Amount (\$) \$2.00	Payee address; City; State; Zip Code 2400 Aviation Dr Dallas, TX 75261
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Airport toll fee (returning to Lubbock from conference in Dallas)
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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 10/03/2024	Payee name Expedia, Inc
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Amount (\$) \$334.00	Payee address; City; State; Zip Code 1111 Expedia Group Way W Seattle, WA 98119
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Hotel to blockwalk for political candidate (following conclusion of THRC retreat)
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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: 4/12 Rpt: 16/28	2	FILER NAME Tepper, Carl H. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086083
4	Date 10/12/2024	5	Payee name Expedia, Inc		
6	Amount (\$) \$556.88	7	Payee address; City; State; Zip Code 1111 Expedia Group Way W Seattle, WA 98119		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Hotel to blockwalk for political candidate		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/17/2024		Payee name Harry Reid International Airport		
	Amount (\$) \$32.60		Payee address; City; State; Zip Code 5757 Wayne Newton Blvd Las Vegas, NV 89119		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals before connecting flight to Montana for legislative conference regarding aerial firefighting		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/02/2024		Payee name Hill Country Springs		
	Amount (\$) \$10.83		Payee address; City; State; Zip Code 10019 S I-35 Frontage Rd Austin, TX 78747		
	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 Water for office		
		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: 5/12 Rpt: 17/28	2	FILER NAME Tepper, Carl H. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086083
4	Date 10/15/2024	5	Payee name Informed Texans Foundation		
6	Amount (\$) \$15.82	7	Payee address; City; State; Zip Code PO Box 690024 Houston, TX 77269		
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 Online news subscription		
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 Isaac, Aiden (Mr.)		
	Amount (\$) \$250.00		Payee address; City; State; Zip Code 301 Village Oak Drive Dripping Springs, TX 78620		
	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 wages		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/21/2024		Payee name JW Marriott Austin		
	Amount (\$) \$46.97		Payee address; City; State; Zip Code 110 E 2nd St Austin, TX 78701		
	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 Meeting to discuss campaign/officeholder issues		
		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: 6/12 Rpt: 18/28	2	FILER NAME Tepper, Carl H. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086083
4	Date 10/21/2024	5	Payee name Jam!		
6	Amount (\$) \$32.00	7	Payee address; City; State; Zip Code 25 W Main St Bozeman, MT 59715		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder issues during legislative conference regarding aerial firefighting		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/27/2024		Payee name Latino Lubbock Magazine, LLC		
	Amount (\$) \$1,050.00		Payee address; City; State; Zip Code PO Box 6473 Lubbock, TX 79493		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Magazine advertisement		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/07/2024		Payee name Lubbock Preston Smith International Airport		
	Amount (\$) \$24.00		Payee address; City; State; Zip Code 5401 N Martin L King Blvd Lubbock, TX 79403		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Airport parking 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: 7/12 Rpt: 19/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
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4 Date 10/02/2024	5 Payee name Murphy Express
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6 Amount (\$) \$32.57	7 Payee address; City; State; Zip Code 8202 University Ave Lubbock, TX 79423
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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 Gas for campaign travel
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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 10/21/2024	Payee name Orlando's Italian Restaurant
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Amount (\$) \$75.26	Payee address; City; State; Zip Code 6951 Indiana Ave Lubbock, TX 79413
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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 Meeting to discuss campaign/officeholder issues
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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 10/15/2024	Payee name Project Destiny Amarillo PAC
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 2607 Wolflin Avenue PMB972 Amarillo, TX 79109
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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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: 8/12 Rpt: 20/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
4 Date 10/07/2024	5 Payee name Rosario's	
6 Amount (\$) \$204.20	7 Payee address; City; State; Zip Code 722 S St Mary's St San Antonio, TX 78205	
8 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 Meeting to discuss campaign issues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Shell	
Amount (\$) \$14.57	Payee address; City; State; Zip Code County Rd 4260 Hillsboro, TX 76645	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Gas for campaign travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2024	Payee name Southwest Airlines	
Amount (\$) \$478.28	Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff travel with member to Montana to attend legislative conference regarding aerial firefighting
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: 9/12 Rpt: 21/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
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4 Date 09/30/2024	5 Payee name Southwest Airlines
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6 Amount (\$) \$362.98	7 Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Airfare to attend Texas House Republican Caucus Retreat and blockwalk for political candidates
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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 10/04/2024	Payee name Southwest Airlines
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Amount (\$) \$132.31	Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Rental car in Austin
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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 10/17/2024	Payee name Squarespace
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Amount (\$) \$50.77	Payee address; City; State; Zip Code 8 Clarkson St New York, NY 10014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website hosting
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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: 10/12 Rpt: 22/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
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4 Date 09/27/2024	5 Payee name Stacked Breakfast and Lunch
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6 Amount (\$) \$19.30	7 Payee address; City; State; Zip Code 6015 82nd St, Ste. 5 Lubbock, TX 79424
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8 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 Meeting to discuss campaign/officeholder issues
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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 10/21/2024	Payee name Sushi Junai
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Amount (\$) \$58.66	Payee address; City; State; Zip Code 1612 Lavaca St Austin, TX 78701
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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 Meeting to discuss campaign/officeholder issues
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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 10/22/2024	Payee name The Salt Lick BBQ
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Amount (\$) \$95.92	Payee address; City; State; Zip Code 18300 Ranch to Market Rd 1826 Driftwood, TX 78619
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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 Meeting to discuss campaign/officeholder issues
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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: 11/12 Rpt: 23/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
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4 Date 10/16/2024	5 Payee name Townsquare Media Lubbock
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6 Amount (\$) \$1,000.60	7 Payee address; City; State; Zip Code 4413 82nd St #300 Lubbock, TX 79424
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Radio advertisement
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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 10/17/2024	Payee name Uber
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Amount (\$) \$59.98	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber from BZN Airport to hotel for legislative conference regarding aerial firefighting
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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 10/21/2024	Payee name Uber
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Amount (\$) \$30.94	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber to BZN Airport following conclusion of legislative conference regarding aerial firefighting
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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: 12/12 Rpt: 24/28	2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
4 Date 09/30/2024	5 Payee name Uber	
6 Amount (\$) \$57.07	7 Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Uber to meeting to discuss campaign/officeholder issues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2024	Payee name Uber	
Amount (\$) \$27.44	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Uber to meeting to discuss campaign issues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2024	Payee name Whole Foods Market	
Amount (\$) \$42.15	Payee address; City; State; Zip Code 525 N Lamar Blvd Austin, TX 78703	
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 Meeting to discuss campaign/officeholder issues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: Sch: 1/4 Rpt: 25/28
2 FILER NAME Tepper, Carl H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086083
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee AC Hotel Bozeman Downtown		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
6 Dates of Travel 10/16/2024 10/19/2024	7 Name of person(s) traveling Stathatos, Parker (Mr.)	
	8 Departure city or name of departure location Austin	
	9 Destination city or name of destination location Bozeman	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event) Attend legislative conference regarding aerial firefighting	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee AC Hotel Bozeman Downtown		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel 10/16/2024 10/19/2024	Name of person(s) traveling Tepper, Carl (The Honorable)	
	Departure city or name of departure location Lubbock	
	Destination city or name of destination location Bozeman	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event) Attend legislative conference regarding aerial firefighting	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Harry Reid International Airport		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel 10/16/2024 10/16/2024	Name of person(s) traveling Stathatos, Parker (Mr.)	
	Departure city or name of departure location Austin	
	Destination city or name of destination location Bozeman	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Attend legislative conference regarding aerial firefighting	

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Harry Reid International Airport

5 Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

6 Dates of Travel	7 Name of person(s) traveling Tepper, Carl (The Honorable)
	8 Departure city or name of departure location Lubbock
	9 Destination city or name of destination location Bozeman
10/16/2024	
10/19/2024	

10 Means of transportation: Commercial Airplane **11** Purpose of travel (including name of conference, seminar, or other event): Attend legislative conference regarding aerial firefighting

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Jam!

Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

Dates of Travel	Name of person(s) traveling Stathatos, Parker (Mr.)
	Departure city or name of departure location Austin
	Destination city or name of destination location Bozeman
10/16/2024	
10/19/2024	

Means of transportation: Purpose of travel (including name of conference, seminar, or other event): Attend legislative conference regarding aerial firefighting

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Southwest Airlines

Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

Dates of Travel	Name of person(s) traveling Stathatos, Parker (Mr.)
	Departure city or name of departure location Austin
	Destination city or name of destination location Bozeman
10/16/2024	
10/19/2024	

Means of transportation: Purpose of travel (including name of conference, seminar, or other event): Attend legislative conference regarding aerial firefighting

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Uber

5 Contribution / Expenditure reported on:

Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

6 Dates of Travel

7 Name of person(s) traveling

Stathatos, Parker (Mr.)

10/16/2024

8 Departure city or name of departure location

Austin

10/19/2024

9 Destination city or name of destination location

Bozeman

10 Means of transportation

Commercial Automobile

11 Purpose of travel (including name of conference, seminar, or other event)

Attend legislative conference regarding aerial firefighting

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

Uber

Contribution / Expenditure reported on:

Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

Dates of Travel

Name of person(s) traveling

Stathatos, Parker (Mr.)

10/16/2024

Departure city or name of departure location

Austin

10/19/2024

Destination city or name of destination location

Bozeman

Means of transportation

Commercial Automobile

Purpose of travel (including name of conference, seminar, or other event)

Attend legislative conference regarding aerial firefighting

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

Uber

Contribution / Expenditure reported on:

Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

Dates of Travel

Name of person(s) traveling

Tepper, Carl (The Honorable)

10/16/2024

Departure city or name of departure location

Lubbock

10/19/2024

Destination city or name of destination location

Bozeman

Means of transportation

Commercial Automobile

Purpose of travel (including name of conference, seminar, or other event)

Attend legislative conference regarding aerial firefighting

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Uber

5 Contribution / Expenditure reported on:

- Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

6 Dates of Travel

10/16/2024

10/19/2024

7 Name of person(s) traveling

Tepper, Carl (The Honorable)

8 Departure city or name of departure location

Lubbock

9 Destination city or name of destination location

Bozeman

10 Means of transportation

Commercial Automobile

11 Purpose of travel (including name of conference, seminar, or other event)

Attend legislative conference regarding aerial firefighting