### GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Filer ID (Ethics Commission Filers) 00062782	2 Total pages filed: 13				
3	COMMITTEE NAME				OFFICE U	SE ONLY	
	First Tuesday				Date Received		
					ELECTRONICA		
_					10/28/2024		
4	COMMITTEE ADDRESS		TY;	STATE; ZIP CODE			
	ADDITESS	511 Lovett Blvd.			Date Hand-delivered or	Date Postmarked	
	Change of Address						
		Houston, TX 77006			Receipt #	Amount	
					Date Processed		
					Date Imaged		
5	CAMPAIGN	MS / MRS / MR FIRST			MI		
	TREASURER NAME	Mr. David					
		NICKNAME LAST	•••••		SUFFIX		
		Matthiesen					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)		APT / SUITE #; CITY;	STA	TE; ZIP CODE	
ľ	TREASURER	511 Lovett Blvd.			01/1	12, 21 00DE	
	STREET						
	ADDRESS						
	(Residence or Business)	Houston, TX 77006					
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #; CITY	; STA	ATE; ZIP CODE	
	MAILING	511 Lovett Blvd.					
	ADDRESS						
	Change of Address	Houston, TX 77006					
_							
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EX.	TENSION			
	PHONE	(713) 877-8522					
Ļ	25205-						
9	REPORT TYPE	January 15	0th (	day before election	Dissolution (Attack	PAC-DR)	
			th da	ay before election	10th day after carr	paign treasurer	
		July 15			termination		
			luno	IT			
10	PERIOD	Month Day Year		Month Day	Year		
	COVERED	09/27/2024 7	HR	OUGH 10/26/202	4		
11	ELECTION	ELECTION DATE		ELECTION TYPE			
		Month Day Year	Prim	ary Runoff	Other		
		11/05/2024	Gen	eral Special			
		I I					
	GO TO PAGE 2						
For	ms provided by Te	xas Ethics Commission www.e	thic	cs.state.tx.us	Versio	on V4.1.0.48da51f7	

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
First Tuesday			00062782	· · · · · · · · · · · · · · · · · · ·		
14 COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		A Supported				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders					
	Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICA	·	\$	75 000 00		
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	Ţ.	75,000.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,980,760.36		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	58,816.25		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT	1					
		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.				
			Matthiesen			
		Signature of Car	npaign Treas	urer		
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	d before me, by the said	, tł	nis the	day		
	of, 20, to certify which, witness my hand and seal of office.					
Signature of officer ad	dministering oath	Printed name of officer administering oath	Title of off	icer administering oath		
Forms provided by Texas I	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7		

SUBTOTA	LS - GPAC	C	FORM OVER SHE	<b>GPAC</b> ET PG 3 3 of 13
<b>17</b> COMMITTEE NAMI First Tuesday	Ε	18 Filer ID 00062782	(Ethics Comm	ission Filers)
19 SCHEDULE SUBTO NAME OF SCHEDU			SUBTOT	AL AMOUNT
1. X SCHEI	DULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	75,000.00
2. SCHEI	DULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3. SCHEI	DULE B: PLEDGED CONTRIBUTIONS		\$	
	DULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	R	\$	
	DULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA R ORGANIZATION	TION OR	\$	
6. SCHEI	DULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG,	ANIZATION	\$	
	DULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR		\$	
8. SCHEI	DULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	RGANIZATION	۱ <b>\$</b>	
9. SCHEI	DULE E: LOANS		\$	
10. X SCHEI	DULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	1,980,760.36
11. SCHEI	DULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12. SCHEI	DULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
13. SCHEI	DULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14. SCHEI	DULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
15. SCHEI TO FIL	DULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F ER	RETURNED	\$	

MONET	ARY POLITICAL CONTRIBUTION	15	SCHEDULE A1
The Instru	ction Guide explains how to complete this for	m.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/13
2 FILER NAME First Tuesda			<b>3</b> Filer ID (Ethics Commission Filers) 00062782
4 Date 09/30/2024	6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$50,000.00	
8 Principal occu	Houston, TX 77002 upation / Job title (See Instructions) 9	Employer (See Instructions)	)
Date 09/30/2024	Full name of contributor       out-of-state PAC (ID#:         Lubel Voyles LLP         Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$25,000.00
Principal occu	Houston, TX 77057 upation / Job title (See Instructions)	Employer (See Instructions)	)

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS								
EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbur Fees Office Overhead/Rental Ex Food/Beverage Expense Polling Expense /- Gift/Awards/Memorials Expense Printing Expense	xpense Transportation Equipment & Related Expense Travel in District Travel Out of District Labor OTHER (enter a category not listed above)						
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
Sch: 1/9 Rpt: 5/13	First Tuesday	00062782						
4 Date 10/01/2024	5 Payee name Amegy Bank							
6 Amount (\$) \$25.00	<ul> <li>Payee address; City; State; Zip Code</li> <li>PO Box 27459</li> </ul>							
Expenditure from corporate funds	Houston, TX 77227							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held						
Date	Payee name							
10/10/2024	Amegy Bank							
Amount (\$)	Payee address; City; State; Zip Code							
\$25.00	PO Box 27459							
Expenditure from corporate funds	Houston, TX 77227							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	ption						
OF EXPENDITURE		k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense ■ ■						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held						
Date	Payee name							
10/11/2024	Amegy Bank							
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 27459							
Expenditure from corporate funds	Houston, TX 77227							
PURPOSE OF EXPENDITURE		k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held						

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1								
Advertising Expense Accounting/Banking Consulting Expense	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimburse Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense							
Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Gift/Awards/Memorials Expense Printing Expense	Travel Out of District oor OTHER (enter a category not listed above)						
1 Total pages Schedule F1: Sch: 2/9 Rpt: 6/13	2 FILER NAME First Tuesday	3 Filer ID (Ethics Commission Filers) 00062782						
4 Date 10/18/2024	5 Payee name Amegy Bank							
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code PO Box 27459							
Expenditure from corporate funds	Houston, TX 77227							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held						
Date	Payee name							
10/21/2024	Amegy Bank							
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 27459							
Expenditure from corporate funds	Houston, TX 77227							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE		f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense I <b>CS</b>						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held						
Date	Payee name							
10/21/2024	Amegy Bank							
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 27459							
Expenditure from corporate funds	Houston, TX 77227							
PURPOSE OF EXPENDITURE		f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held						

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1							
	EXPENDITURE CATEGORIES FOR BOX	8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/R Fees Office Overhead/Re Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	endursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
<b>1</b> Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Sch: 3/9 Rpt: 7/13	First Tuesday	00062782					
4 Date	5 Payee name	·					
10/21/2024	Amegy Bank						
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code PO Box 27459						
Expenditure from corporate funds	Houston, TX 77227						
8 PURPOSE OF EXPENDITURE	Fees	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ank Fees					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held					
Date	Payee name						
10/21/2024	Amegy Bank						
Amount (\$)	Payee address; City; State; Zip Code						
\$25.00	PO Box 27459						
Expenditure from corporate funds	Houston, TX 77227						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription					
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ank Fees					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held					
Date	Payee name						
10/23/2024	Amegy Bank						
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 27459						
Expenditure from corporate funds	Houston, TX 77227						
PURPOSE OF EXPENDITURE	Fees	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ank Fees					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought I	Office held					

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1								
	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ontract Labor OTHER (enter a category not listed above)						
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)						
Sch: 4/9 Rpt: 8/13	First Tuesday	00062782						
4 Date 10/23/2024	5 Payee name Amegy Bank							
6 Amount (\$) \$25.00	7 Payee address;       City;       State; Zip Code         PO Box 27459       PO Box 27459							
corporate funds	Houston, TX 77227							
8 PURPOSE OF EXPENDITURE	Fees	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cank Fees						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held						
Date	Payee name							
10/23/2024	Amegy Bank							
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 27459							
Expenditure from corporate funds	Houston, TX 77227							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	escription						
OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check Fees						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held						
Date	Payee name							
10/23/2024	Amegy Bank							
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 27459							
Expenditure from corporate funds	Houston, TX 77227							
PURPOSE OF EXPENDITURE	Fees	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ank Fees						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held						

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
<b>1</b> Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 5/9 Rpt: 9/13	First Tuesday 00062782						
4 Date 10/21/2024	5 Payee name Angle Mastagni Mathews Political Strategies LLC						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$125,000.00	507 N Sylvania Ave						
Expenditure from corporate funds	Fort Worth, TX 76111						
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Consulting Expense       (b) Description         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense         Image: Consulting Expense       Image: Consulting Expense       Image: Consulting Expense							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
10/23/2024	Angle Mastagni Mathews Political Strategies LLC						
Amount (\$)	Payee address; City; State; Zip Code						
\$150,000.00	507 N Sylvania Ave						
Expenditure from corporate funds	Fort Worth, TX 76111						
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Consulting Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Voter Outreach Calls</li> </ul> </li> </ul>						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
09/30/2024	Bouchard Gold Communications						
Amount (\$) \$48,714.20	Payee address; City; State; Zip Code 5900 Balcones Dr.						
Expenditure from corporate funds	Ste 110 Austin, TX 78731						
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Printing Expense       (b) Description 							
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office name         Office sought         Office held							

POLITICAL EXE	SCHEDULE F1							
EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayme Fees Office Overhea Food/Beverage Expense Polling Expens - Gift/Awards/Memorials Expense Printing Expens	nt/Reimbursement Solicitation/Fundraising Expense d/Rental Expense Transportation Equipment & Related Expense e Travel in District se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)						
1 Total pages Schedule F1:	2 EILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
Sch: 6/9 Rpt: 10/13	First Tuesday	00062782						
4 Date 10/17/2024	5 Payee name Bouchard Gold Communications							
6 Amount (\$) \$418,807.83	7 Payee address; City; State; Zip Code 5900 Balcones Dr. Ste 110 Austin, TX 78731							
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>(b) Advertising Expense</li> </ul>	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Direct Mail Services						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held						
Date 10/23/2024	Payee name Bouchard Gold Communications							
Amount (\$) \$286,605.22	Payee address;City;State;ZipCode5900 Balcones Dr.							
Expenditure from corporate funds	Ste 110 Austin, TX 78731							
PURPOSE OF EXPENDITURE	OF Advertising Expanse							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
Date	Payee name							
10/24/2024	Laredo Strategies							
Amount (\$) \$3,500.00	Payee address;City;State;Zip Code11515 Paul E. Anderson Dr							
Expenditure from corporate funds	Austin, TX 78748							
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>(b) Consulting Expense</li> </ul>	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Translation Services						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							

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	POLITICAL EXI		ENDITURES FROM POI	LITI	CA	L				SCHEDULE F1
			EXPENDITURE CATEG	ORIE	S FOI	R BO>	( 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services	O Pi Pi	ffice Ov olling Ex rinting E	erhead/F kpense xpense	Reimbursement Rental Expense Contract Labor		Transportation E Travel in District Travel Out of Di	
	Credit Card Fayment		The Instruction Guide explai	ns hov	v to co	omplete	e this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 7/9 Rpt: 11/13		First Tuesday						00062782	
4	Date 10/18/2024	5	Payee name Lone Star Project Non-Federal							
6	Amount (\$) \$25,000.00	7	Payee address; City; Sta 6 E St., SE	ate; Z	Ľip Co	ode				
	Expenditure from corporate funds		Washington, DC 20003							
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Contributions/Donations Made By Candidate/Officeholder/Political Con						side of Texas. Com	nplete Schedule T. g expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Offic	ce sou	ight			Office h	eld

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Date	Payee name							
10/24/2024	Madden, Joseph							
Amount (\$)	Payee address; City; State; Zip Code							
\$10,000.00	1717 W. 34th, Suite 600-110							
Expenditure from corporate funds	Houston, TX 77018							
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.							
	Political Strategy Consulting Services							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H							
Date	Payee name							
10/25/2024	Signature Aspen							
Amount (\$)	Payee address; City; State; Zip Code							
\$2,455.11	3300 Kingswood St							
Expenditure from corporate funds	Houston, TX 77092							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.							
	Canvassing Literature							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H							

POLITICAL EXE	PENDITURES FROM POLITICAL	SCHEDULE F1	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)	
Sch: 8/9 Rpt: 12/13	First Tuesday	00062782	
4 Date 10/03/2024	5 Payee name Swash Labs		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$140,000.00	PO Box 2464		
Expenditure from corporate funds	Denton, TX 76202		
8 PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held	
Date	Payee name		
10/03/2024	Swash Labs		
Amount (\$)	Payee address; City; State; Zip Code		
\$17,500.00	PO Box 2464		
Expenditure from corporate funds	Denton, TX 76202		
PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense a Consulting Services	
Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held         expenditure to benefit C/OH       Office held       Office held			
Date	Payee name		
10/21/2024	Swash Labs		
Amount (\$)	Payee address; City; State; Zip Code		
\$100,000.00	PO Box 2464		
Expenditure from corporate funds	Denton, TX 76202		
PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office held         Office held         Office held			

POLITICAL EXE CONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees         Office Overhead/Rental Expense         1           Food/Beverage Expense         Polling Expense         1           / -         Gift/Awards/Memorials Expense         Printing Expense         1	Solicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District JTHER (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1: Sch: 9/9 Rpt: 13/13		Filer ID     (Ethics Commission Filers)       00062782	
4 Date 10/23/2024	5 Payee name Swash Labs		
6 Amount (\$) \$17,500.00	7 Payee address; City; State; Zip Code PO Box 2464		
Expenditure from corporate funds	Denton, TX 76202		
8 PURPOSE OF EXPENDITURE		of Texas. Complete Schedule T. fficeholder living expense sulting Services	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held	
Date	Payee name		
10/10/2024	Texas Tool Belt LLC		
Amount (\$) \$407,034.00	Payee address; City; State; Zip Code 6717 Mount Carmel St		
Expenditure from corporate funds	Houston, TX 77087		
PURPOSE OF EXPENDITURE		e of Texas. Complete Schedule T. fficeholder living expense CES	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held	
Date 10/23/2024	Payee name Texas Tool Belt LLC		
Amount (\$) \$228,349.00	Payee address;City;State;Zip Code6717 Mount Carmel St		
Expenditure from corporate funds	Houston, TX 77087		
PURPOSE OF EXPENDITURE	Check if Austin, TX, of	e of Texas. Complete Schedule T. fficeholder living expense Poll Working Services	
Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held         expenditure to benefit C/OH       Office held       Office held			