

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) 00086098 | 2 Total pages filed: 34 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | FIRST Adan | MI MI | OFFICE USE ONLY |
| | NICKNAME Adam | LAST Hinojosa | SUFFIX | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 18301 Corpus Christi, TX 78480 | | | Date Hand-delivered or Date Postmarked |
| | | | | Receipt # Amount |
| | | | | Date Processed |
| | | | | Date Imaged |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | FIRST Michael | MI MI | |
| | NICKNAME | LAST Bergsma | SUFFIX | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4117 Acushnet Dr. Corpus Christs, TX 78413 | | | |
| | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | |
| | (391) | 537-6964 | | |
| 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 | | THROUGH | Month Day Year |
| | 09/27/2024 | | | 10/26/2024 |
| 10 ELECTION | ELECTION DATE Month Day Year | | ELECTION TYPE | |
| | 11/05/2024 | | <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) | | 12 OFFICE SOUGHT (if known) State Senator District 27 | |
| GO TO PAGE 2 | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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| | |
|--------------------------------------------|-----------------------------------------------------------|
| 13 C / OH NAME Hinojosa, Adan (Mr.) | 14 Filer ID (Ethics Commission Filers) 00086098 |
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| | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------|--------------------------|-----------------------------------|------------------------------------------|--|---------------------------------------------|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | | | | | | | | |
| <table border="1" style="width:100%"> <tr> <td style="width:25%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> | COMMITTEE TYPE | COMMITTEE NAME | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | |
| | COMMITTEE TYPE | COMMITTEE NAME | | | | | | | | |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | | | | | | | | |
| | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | | | | | | | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | | | | | | |

| | | |
|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| 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) | \$ 1,371,235.21 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 1,593,585.25 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 66,715.56 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 89,025.43 |

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.

 Mr. Adan Hinojosa
 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

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

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| | | |
|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| 18 FILER NAME Hinojosa, Adan (Mr.) | | 19 Filer ID (Ethics Commission Filers) 00086098 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 1,023,637.49 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 347,597.72 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 1,593,585.25 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input 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: 1/14 Rpt: 4/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmanson, Howard <hr/> 6 Contributor address; City; State; Zip Code Irvine, CA 92623 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Fieldstead and Company |
| Date 10/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahumada, Patricio <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78521 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anwar, Javaid <hr/> Contributor address; City; State; Zip Code Midland, TX 79701 | Amount of Contribution (\$) \$20,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Midland Energy |
| Date 10/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Roy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) PE | | Employer (See Instructions) Bailey Deason Capital Advisers |
| Date 10/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethune, Kenneth <hr/> Contributor address; City; State; Zip Code Beeville, TX 78102 | Amount of Contribution (\$) \$1,041.02 |
| Principal occupation / Job title (See Instructions) Investor | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/14 Rpt: 5/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birschbach, James <hr/> 6 Contributor address; City; State; Zip Code Harlingen, TX 78552 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 10/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, James <hr/> Contributor address; City; State; Zip Code Los Fresnos, TX 78566 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Geologist | | Employer (See Instructions) Geological Assist & Medical Biller |
| Date 10/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crow, Harlan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219 | Amount of Contribution (\$) \$20,000.00 |
| Principal occupation / Job title (See Instructions) Investor | | Employer (See Instructions) Crow Holdings |
| Date 10/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dani Milo Enterprises <hr/> Contributor address; City; State; Zip Code Laguna Vista, TX 78578 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVine, Gaylyn <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Entrepreneur | | Employer (See Instructions) DeVine Promotions |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/04/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dealon, LLC <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79102 | 7 Amount of Contribution (\$) \$50,000.00 |
| 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#: _____) Deason, Darwin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deason, Doug <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Deason Capital Services |
| Date 10/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkin, Carolyn <hr/> Contributor address; City; State; Zip Code Laguna Vista, TX 78578 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckroat, James <hr/> Contributor address; City; State; Zip Code Mission, TX 78573 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Clerk | | Employer (See Instructions) Foremost Paving |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Donald <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Don Evans Group |
| Date 10/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Mike <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550 | Amount of Contribution (\$) \$520.87 |
| Principal occupation / Job title (See Instructions) Contract Sales | | Employer (See Instructions) Self |
| Date 10/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraday, Teresa <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes Jr., Francisco <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Architect | | Employer (See Instructions) Self |
| Date 10/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GPM PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78265 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Mikael <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78738 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) Candidate | | 9 Employer (See Instructions) Mike Garcia for Texas GOP |
| Date 10/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruber, Mike <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Greenberg Traurig |
| Date 10/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Arthur <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Insurance Producer | | Employer (See Instructions) Higginbotham |
| Date 09/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, John <hr/> Contributor address; City; State; Zip Code Ormond Beach, FL 32174 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Hamlin and Associates |
| Date 10/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hassenflu, Alan <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401 | Amount of Contribution (\$) \$100,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Fidelis Realty Partners, Ltd |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Laverne <hr/> 6 Contributor address; City; State; Zip Code Riviera, TX 78379 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Lobbyist | | 9 Employer (See Instructions) Cornerstone |
| Date 10/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Pat <hr/> Contributor address; City; State; Zip Code Riviera, TX 78379 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 10/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, Deirdre <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205 | Amount of Contribution (\$) \$52.37 |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |
| Date 10/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, Don <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Huffines Communities |
| Date 10/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, Phillip <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205 | Amount of Contribution (\$) \$1,562.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, Russell | 7 Amount of Contribution (\$) \$104.42 |
| 6 Contributor address; City; State; Zip Code Dallas, TX 75206 | | |
| 8 Principal occupation / Job title (See Instructions) Vice President | | 9 Employer (See Instructions) HEST Investments |
| Date 10/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, Terence | Amount of Contribution (\$) \$52.37 |
| Contributor address; City; State; Zip Code Dallas, TX 75206 | | |
| Principal occupation / Job title (See Instructions) Construction | | Employer (See Instructions) Self |
| Date 10/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humston, John | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Beeville, TX 78104 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacy, Kevin | Amount of Contribution (\$) \$2,500.00 |
| Contributor address; City; State; Zip Code The Woodlands, TX 77387 | | |
| Principal occupation / Job title (See Instructions) unemployed | | Employer (See Instructions) unemployed |
| Date 10/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lassig, Diane | Amount of Contribution (\$) \$52.37 |
| Contributor address; City; State; Zip Code Lyford, TX 78569 | | |
| Principal occupation / Job title (See Instructions) Farmer | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 09/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mabee, John | 7 Amount of Contribution (\$) \$10,000.00 |
| | 6 Contributor address; City; State; Zip Code Midland, TX 79705 | |
| 8 Principal occupation / Job title (See Instructions) Self | | 9 Employer (See Instructions) Mabee Ranch |
| Date 10/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marchant Good Government Fund | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Carrollton, TX 75006 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNutt, Amber | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75205 | |
| Principal occupation / Job title (See Instructions) Producer | | Employer (See Instructions) Self |
| Date 10/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Mayes (Mr.) | Amount of Contribution (\$) \$10,411.56 |
| | Contributor address; City; State; Zip Code Galveston, TX 77550 | |
| Principal occupation / Job title (See Instructions) Oil & Gas | | Employer (See Instructions) Middleton Oil Co |
| Date 10/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Shannon | Amount of Contribution (\$) \$52.37 |
| | Contributor address; City; State; Zip Code Port Aransas, TX 78373 | |
| Principal occupation / Job title (See Instructions) Pool Service | | Employer (See Instructions) Port Aransas Pool |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parham, Connie | 7 Amount of Contribution (\$) \$200.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78413 | |
| 8 Principal occupation / Job title (See Instructions) Remodeler | | 9 Employer (See Instructions) Olympia |
| Date 10/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pauken, Tom | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Port Aransas, TX 78373 | |
| Principal occupation / Job title (See Instructions) Businessman | | Employer (See Instructions) Self |
| Date 10/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck Jr., John | Amount of Contribution (\$) \$25,000.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75225 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poirier, Randal | Amount of Contribution (\$) \$25.30 |
| | Contributor address; City; State; Zip Code Donna, TX 78537 | |
| Principal occupation / Job title (See Instructions) unemployed | | Employer (See Instructions) unemployed |
| Date 10/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajabi, Ali | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78257 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) FSH |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/15/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Raymond <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) unemployed | | 9 Employer (See Instructions) unemployed |
| Date 10/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Party of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$160,000.00 |
| 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#: _____) Restore Trust Texas <hr/> Contributor address; City; State; Zip Code Mountain Brook, AL 35223 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Barbara <hr/> Contributor address; City; State; Zip Code Bayview, TX 78566 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 09/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Fred <hr/> Contributor address; City; State; Zip Code Portland, TX 78374 | Amount of Contribution (\$) \$104.42 |
| Principal occupation / Job title (See Instructions) Site Manager | | Employer (See Instructions) One Subsea |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seay, George <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204 | 7 Amount of Contribution (\$) \$10,000.00 |
| 8 Principal occupation / Job title (See Instructions) Founder | | 9 Employer (See Instructions) Annandale Capital |
| Date 10/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Dennis <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526 | Amount of Contribution (\$) \$104.42 |
| Principal occupation / Job title (See Instructions) Medical Technologist | | Employer (See Instructions) Harlingen Medical Center |
| Date 10/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Ellen <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spellane, Bill & Terri <hr/> Contributor address; City; State; Zip Code Los Fresnos, TX 78566 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Spellbro |
| Date 09/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stallings, Kyle <hr/> Contributor address; City; State; Zip Code Midland, TX 79702 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Desert Royalty Company |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/14 Rpt: 15/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Lawsuit Reform | 7 Amount of Contribution (\$) \$250,000.00 |
| 6 Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Lawsuit Reform | Amount of Contribution (\$) \$100,000.00 |
| Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority | Amount of Contribution (\$) \$100,000.00 |
| Contributor address; City; State; Zip Code Victoria, TX 77901 | | |
| 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#: _____) Texans United for a Conservative Majority | Amount of Contribution (\$) \$100,000.00 |
| Contributor address; City; State; Zip Code Victoria, TX 77901 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Association Pac | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Austin, TX 78703 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/14 Rpt: 16/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 09/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ugarte, Jose (Dr.) <hr/> 6 Contributor address; City; State; Zip Code Kingsville, TX 78364 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) Family Practitioner | | 9 Employer (See Instructions) Self |
| Date 10/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadhvani, Selma <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504 | Amount of Contribution (\$) \$520.87 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Self |
| Date 10/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsdorf, Robby <hr/> Contributor address; City; State; Zip Code Los Fresnos, TX 78566 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Contractor | | Employer (See Instructions) Self |
| Date 10/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekley, Richard <hr/> Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Weekley Properties |
| Date 10/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheat, Tom <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78466 | Amount of Contribution (\$) \$260.59 |
| Principal occupation / Job title (See Instructions) unemployed | | Employer (See Instructions) unemployed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/14 Rpt: 17/34 |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Derek <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205 | 7 Amount of Contribution (\$) \$2,602.54 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 10/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winton, Kimberly <hr/> Contributor address; City; State; Zip Code Port Aransas, TX 78373 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Winton's Island Candy |
| Date 10/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witten, Ron <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225 | Amount of Contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Witten Advisors |
| Date 10/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeissel, Charles <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/2 Rpt: 18/34 | |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 10/26/2024 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Mayes (Mr.) | 8 Amount of contribution (\$) \$34,597.72 | 9 In-kind contribution description Direct Mailer |
| | 7 Contributor address; City; State; Zip Code Galveston, TX 77550 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Oil & Gas | | 11 Employer (FOR NON-JUDICIAL) (See instructions) Middleton Oil Co | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 09/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority | Amount of contribution (\$) \$6,500.00 | In-kind contribution description Polling |
| | Contributor address; City; State; Zip Code Victoria, TX 77901 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 10/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority | Amount of contribution (\$) \$6,500.00 | In-kind contribution description Polling |
| | Contributor address; City; State; Zip Code Victoria, TX 77901 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 2/2 Rpt: 19/34 | |
| 2 FILER NAME Hinojosa, Adan (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00086098 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 10/21/2024 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Senate Leadership Fund | 8 Amount of contribution (\$) \$100,000.00 | 9 In-kind contribution description Campaign OTT and Online Advertising |
| | 7 Contributor address; City; State; Zip Code Houston, TX 77046 | <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) | | | |
| Date 10/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Senate Leadership Fund | Amount of contribution (\$) \$200,000.00 | In-kind contribution description Campaign Television Advertising |
| | Contributor address; City; State; Zip Code Houston, TX 77046 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

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.

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|----------|--------------------------------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------|--|
| 1 | Total pages Schedule F1: Sch: 1/15 Rpt: 20/34 | 2 | FILER NAME Hinojosa, Adan (Mr.) | 3 | Filer ID (Ethics Commission Filers) 00086098 | |
| 4 | Date 10/01/2024 | 5 | Payee name AdCrunch | | | |
| 6 | Amount (\$) \$83,400.00 | 7 | Payee address; City; State; Zip Code 990 Spectrum Drive Austin, TX 78717 | | | |
| 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 Digital Ad Buy | | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | |
| | Date 10/09/2024 | | Payee name AdCrunch | | | |
| | Amount (\$) \$90,360.00 | | Payee address; City; State; Zip Code 990 Spectrum Drive Austin, TX 78717 | | | |
| | 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 Digital Ad Buy | | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | |
| | Date 10/17/2024 | | Payee name AdCrunch | | | |
| | Amount (\$) \$125,028.00 | | Payee address; City; State; Zip Code 990 Spectrum Drive Austin, TX 78717 | | | |
| | 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 Digital Ad Buy | | | |
| | | 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: 2/15 Rpt: 21/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/23/2024 | 5 Payee name AdCrunch | |
| 6 Amount (\$) \$125,028.00 | 7 Payee address; City; State; Zip Code 990 Spectrum Drive Austin, TX 78717 | |
| 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 Digital Ad Buy |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/04/2024 | Payee name Baselice & Associates, Inc | |
| Amount (\$) \$31,268.00 | Payee address; City; State; Zip Code PO Box 50238 Austin, TX 78763 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling 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 Brushfire Poll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/27/2024 | Payee name Blakemore & Associates | |
| Amount (\$) \$58,400.00 | Payee address; City; State; Zip Code 1 E Greenway Plaza Suite 225 Houston, TX 77046 | |
| 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 Digital Ads |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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|-----------------------------------------------------------|---------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 3/15 Rpt: 22/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
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| 4 Date 10/21/2024 | 5 Payee name Blakemore & Associates |
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| 6 Amount (\$) \$15,527.91 | 7 Payee address; City; State; Zip Code 1 E Greenway Plaza Suite 225 Houston, TX 77046 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting |
|---------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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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 10/18/2024 | Payee name Brand Boosters Co, LLC |
|--------------------|--------------------------------------|

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| Amount (\$) \$1,677.88 | Payee address; City; State; Zip Code 3607 S L Ln McAllen, TX 78503 |
|---------------------------|------------------------------------------------------------------------------|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign T-shirts / flyers |
|-------------------------------|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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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 10/01/2024 | Payee name Cameron County Republican Party |
|--------------------|-----------------------------------------------|

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|---------------------------|-----------------------------------------------------------------------------------|
| Amount (\$) \$1,500.00 | Payee address; City; State; Zip Code 765 E 7th St Brownsville, TX 78520 |
|---------------------------|-----------------------------------------------------------------------------------|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Sponsorship of Lincoln-Reagan Dinner |
|-------------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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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: 4/15 Rpt: 23/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/16/2024 | 5 Payee name Case Hall and Company | |
| 6 Amount (\$) \$10,339.47 | 7 Payee address; City; State; Zip Code 1 E Greenway Plaza Suite225 Houston, TX 77046 | |
| 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 Text Campaign |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/10/2024 | Payee name Case Hall and Company | |
| Amount (\$) \$9,872.93 | Payee address; City; State; Zip Code 1 E Greenway Plaza Suite225 Houston, TX 77046 | |
| 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 Text Campaign |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/25/2024 | Payee name Case Hall and Company | |
| Amount (\$) \$15,205.41 | Payee address; City; State; Zip Code 1 E Greenway Plaza Suite225 Houston, TX 77046 | |
| 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 Text Campaign |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 5/15 Rpt: 24/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/21/2024 | 5 Payee name Facebook | |
| 6 Amount (\$) \$947.43 | 7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 | |
| 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 Social Media Ads |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/21/2024 | Payee name Facebook | |
| Amount (\$) \$900.45 | Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 | |
| 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 Social Media Ads |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/23/2024 | Payee name Facebook | |
| Amount (\$) \$903.65 | Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 | |
| 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 Social Media Ads |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 6/15 Rpt: 25/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/25/2024 | 5 Payee name Facebook | |
| 6 Amount (\$) \$900.00 | 7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 | |
| 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 Social Media Ads |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/27/2024 | Payee name Gulf Coast Mailing & Printing | |
| Amount (\$) \$777.24 | Payee address; City; State; Zip Code PO Box 9312 Corpus Christi, TX 78469 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Pushcards / Flyers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/16/2024 | Payee name Gulf Coast Mailing & Printing | |
| Amount (\$) \$5,699.18 | Payee address; City; State; Zip Code PO Box 9312 Corpus Christi, TX 78469 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail Materials |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 7/15 Rpt: 26/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/04/2024 | 5 Payee name Hidalgo County GOP | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code 4900 N 23rd St McAllen, TX 78504 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Sponsorship of Lincoln-Reagan Dinner |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/16/2024 | Payee name Jacobs, Alejandra | |
| Amount (\$) \$1,098.27 | Payee address; City; State; Zip Code 402 S. Ironwood Pharr, TX 78577 | |
| 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 Contract Worker |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/01/2024 | Payee name MK Visual Communications | |
| Amount (\$) \$2,500.00 | Payee address; City; State; Zip Code 15318 Cruiser St Corpus Chriti, TX 78418 | |
| 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 Contract Worker |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 8/15 Rpt: 27/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 09/27/2024 | 5 Payee name Mendez, Miguel (Mr.) | |
| 6 Amount (\$) \$450.00 | 7 Payee address; City; State; Zip Code 5409 Palm Valley Dr N Harlingen, TX 79552 | |
| 8 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 Sign Installation |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/14/2024 | Payee name Milestone Collaborative Systems | |
| Amount (\$) \$5,374.79 | Payee address; City; State; Zip Code 3522 South Alameda Corpus Christi, TX 78411 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/27/2024 | Payee name Mission 911 | |
| Amount (\$) \$1,030.00 | Payee address; City; State; Zip Code 911 Park Ave Corpus Christi, TX 78401 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Sponsorship for Fundraising Event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 9/15 Rpt: 28/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/11/2024 | 5 Payee name Mobilize The Message LLC | |
| 6 Amount (\$) \$160,000.00 | 7 Payee address; City; State; Zip Code 490 Hanover Port Lane Fort Walton Beach, FL 32547 | |
| 8 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 Block Walking Campaign |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/01/2024 | Payee name Pena Garza Consulting | |
| Amount (\$) \$7,500.00 | Payee address; City; State; Zip Code 2900 S Jackson Rd Ste 100 McAllen, TX 78503 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/07/2024 | Payee name Pink Ape Media | |
| Amount (\$) \$1,600.00 | Payee address; City; State; Zip Code 1018 E. Washington St Brownsville, TX 78520 | |
| 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 Text Campaign |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 10/15 Rpt: 29/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/11/2024 | 5 Payee name Pink Ape Media | |
| 6 Amount (\$) \$8,200.00 | 7 Payee address; City; State; Zip Code 1018 E. Washington St Brownsville, TX 78520 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/21/2024 | Payee name Pink Ape Media | |
| Amount (\$) \$7,100.00 | Payee address; City; State; Zip Code 1018 E. Washington St Brownsville, TX 78520 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/15/2024 | Payee name Republican Party Of Texas | |
| Amount (\$) \$115,000.00 | Payee address; City; State; Zip Code PO Box 2206 Austin, TX 78768 | |
| 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 Direct Mail Campaign |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 11/15 Rpt: 30/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 09/30/2024 | 5 Payee name Ricardo's Restaurant | |
| 6 Amount (\$) \$2,533.06 | 7 Payee address; City; State; Zip Code 3201 S. Expressway 83 Unit C Harlingen, TX 78550 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Food for Drive-through Meet and Greet |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/30/2024 | Payee name Ricardo's Restaurant | |
| Amount (\$) \$2,533.06 | Payee address; City; State; Zip Code 3201 S. Expressway 83 Unit C Harlingen, TX 78550 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Food for Drive-through Meet and Greet |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/16/2024 | Payee name Salinas, Isreal | |
| Amount (\$) \$2,500.00 | Payee address; City; State; Zip Code 4023 Oak Bay Dr #M Corpus Christi, TX 78413 | |
| 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 Contract Worker |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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|------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 12/15 Rpt: 31/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
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| 4 Date 10/04/2024 | 5 Payee name Solutions for Texas in Fundraising LLC |
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| 6 Amount (\$) \$51,752.50 | 7 Payee address; City; State; Zip Code 4238 Lomo Alto Ct Dallas, TX 75219 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising |
|---------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 10/25/2024 | Payee name Solutions for Texas in Fundraising LLC |
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| Amount (\$) \$37,194.01 | Payee address; City; State; Zip Code 4238 Lomo Alto Ct Dallas, TX 75219 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Expense |
|-------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|--------------------------------------|
| Date 09/27/2024 | Payee name The Print Shop Digital |
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|---------------------------|-------------------------------------------------------------------------------------|
| Amount (\$) \$1,623.75 | Payee address; City; State; Zip Code 3906 S Jackson Rd Edinburg, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water bottle labels |
|-------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| 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: 13/15 Rpt: 32/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 10/01/2024 | 5 Payee name VDC Weslaco | |
| 6 Amount (\$) \$869.26 | 7 Payee address; City; State; Zip Code 260 South Texas Blvd Suite 400 Weslaco, TX 78596 | |
| 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 Campaign Headquarters Office Rent |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/16/2024 | Payee name Watson, Brenda | |
| Amount (\$) \$1,500.00 | Payee address; City; State; Zip Code 51 Alberta Dr Brownsville, TX 78526 | |
| 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 Staff Contract Wages |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/10/2024 | Payee name Weeks and Company | |
| Amount (\$) \$10,000.00 | Payee address; City; State; Zip Code 1 East Greenway Plaza Suite 225 Houston, TX 77046 | |
| 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 Video Shoot |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 14/15 Rpt: 33/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
| 4 Date 09/27/2024 | 5 Payee name Weeks and Company | |
| 6 Amount (\$) \$117,563.00 | 7 Payee address; City; State; Zip Code 1 East Greenway Plaza Suite 225 Houston, TX 77046 | |
| 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 TV Ads |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/10/2024 | Payee name Weeks and Company | |
| Amount (\$) \$25,000.00 | Payee address; City; State; Zip Code 1 East Greenway Plaza Suite 225 Houston, TX 77046 | |
| 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 Audio / Visual Commercial Production |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/02/2024 | Payee name Weeks and Company | |
| Amount (\$) \$108,008.00 | Payee address; City; State; Zip Code 1 East Greenway Plaza Suite 225 Houston, TX 77046 | |
| 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 TV Ads |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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|------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 15/15 Rpt: 34/34 | 2 FILER NAME Hinojosa, Adan (Mr.) | 3 Filer ID (Ethics Commission Filers) 00086098 |
|------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------|

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| 4 Date 10/10/2024 | 5 Payee name Weeks and Company |
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| 6 Amount (\$) \$108,148.00 | 7 Payee address; City; State; Zip Code 1 East Greenway Plaza Suite 225 Houston, TX 77046 |
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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 TV Ads |
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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 Weeks and Company |
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| Amount (\$) \$118,310.00 | Payee address; City; State; Zip Code 1 East Greenway Plaza Suite 225 Houston, TX 77046 |
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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 TV Ads |
|------------------------|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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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 10/26/2024 | Payee name Weeks and Company |
|--------------------|---------------------------------|

| | |
|-----------------------------|-------------------------------------------------------------------------------------------------|
| Amount (\$) \$117,462.00 | Payee address; City; State; Zip Code 1 East Greenway Plaza Suite 225 Houston, TX 77046 |
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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 TV Ads |
|------------------------|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|