CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction (Guide explains how to con	nplete this form.	1 Filer ID (Ethics Commi 00088331		2 Total pages fi	led: 8
3	CANDIDATE /	MS / MRS / MR	FIRST	•	MI		USE ONLY
	OFFICEHOLDER NAME	Mr.	Timothy W.				
	NAME					Date Received	
		NICKNAME	LAST		SUFFIX	10/28/2024	
			Gassaway				
4	CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered o	or Date Postmarked
	OFFICEHOLDER MAILING	P.O. Box 3484					
	ADDRESS					Receipt #	Amount
	Change of Address	Amarillo, TX 79116					
						Date Processed	
							
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>	
	TREASURER	Mr.	Timothy W.				
	NAME						
		NICKNAME	LAST		SUFFIX		
			Gassaway		30111X		
			Cassaway				
6	CAMPAIGN	STREET ADDRESS (NO		۸D.	T / SUITE #; CITY;		ATE; ZIP CODE
°	TREASURER	900 N. Hughes	PU BUX PLEASE),	AP	T/SUITE#, CITT,	517	ATE, ZIP CODE
	ADDRESS	900 N. Hughes					
	(Residence or Business)						
		Amarillo, TX 79107					
7	CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
	TREASURER	(806) 486-1151					
	PHONE						
8	REPORT						
	TYPE	January 15	30th day before	e election	Runoff	15th day after ca	mpaign treasurer
		1 July 15	Rth day before		Evocoded modified	appointment (offi	
		July 15	X 8th day before		Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9	PERIOD	Month Day Yea	or .		Month Day	Year	
9	COVERED	Month Day Yea 09/27/2024		HROUGH	Month Day 10/26/2024		
		09/2/12024			10/20/2024	+	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
1	LLLCHON	Month Day Yea		Primary		Other	
		11/05/2024		-			
				General	Special		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
					State Representa	ative District 87	
					•		
			GO ⁻	TO PAGE 2			
	rms provided by To	xas Ethics Commission		thics.state.tx.u	s	Verei	ion V4.1.0.48da51f7
1 0	Ins provided by Te	AUD CUIIOD COUIIIIIDDIUII	vvvvv.e	ວ.ວເຜເຕ.ເ∧.U	5	v CI S	ion v +. I. V. +OUAJII/

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 8

I

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 325.00 EXPENDITURE TOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 1,634.70 CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,356.48	13 C / OH NAME	Gassaway, Timothy V	V. (Mr.)	14 Filer ID 000883	•	Commission Filers)			
Additional Pages COMMITTEE TYPE COMMITTEE NAME	FROM POLITICAL	ROM candidate / officeholder. These expenditures may have been made without the candidate's or officeholders. Candidates and officeholders are required to report this information only if they receive a							
		_	COMMITTEE NAME						
			COMMITTEE 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) \$ 325.00 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 325.00 2. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 0.00 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 1.634.70 BALANCE 6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 3.000.00 17 AFFIDAVIT I Swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Mr. Timothy W. Gassaway ISignature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Swom to and subscribed before me, by the said									
TOTALS OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 325.00 EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 GONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 1.634.70 BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 1.356.48 OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY \$ 3.000.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Mr. Timothy W. Gassaway Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Swom to and subscribed before me, by the said			COMMITTEE CAMPAIGN TRE	ASURER ADDRESS					
CONTRIBUTIONE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 FOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 1.634.70 CONTRIBUTION 5. TOTAL POLITICAL EXPENDITURES \$ 1.634.70 BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 1.356.48 OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY \$ 3.000.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Mr. Timothy W. Gassaway Mr. Timothy W. Gassaway Gignature of Candidate or Office administering Officer administering Outer the said of colspan="2">Candidate or officer administering oath				0.00					
TOTALS Image: Constrained of the constraint of the const									
Signature of officer administering 9 1,034.70		3. TOTAL UNITEM	ZED POLITICAL EXPENDITURI	\$	0.00				
BALANCE REPORTING PERIOD \$ 1,355.42 OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 3,000.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Mr. Timothy W. Gassaway AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officer officer administering Mr. this the day of , 20, to certify which, witness my hand and seal of office. Title of officer administering oath		4. TOTAL POLITIC	\$	1,634.70					
LOAN TOTALS OF THE REPORTING PERIOD \$ 3,000.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Mr. Timothy W. Gassaway Mr. Timothy W. Gassaway Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said, to certify which, witness my hand and seal of office.			F THE \$	1,356.48					
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. Timothy W. Gassaway Gignature of Candidate or Officeholder Sworn to and subscribed before me, by the said, this the, this the day of, 20, to certify which, witness my hand and seal of office. Signature of officer administering				IDING LOANS AS OF THE LA	ST DAY	3,000.00			
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	17 AFFIDAVIT		true and corr	ect and includes all information					
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									
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						-			

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18 FILE			19 Filer ID	(Ethics Comm	3 of 8 hission Filers)
20 SCH	HEDULI	y, Timothy W. (Mr.) E SUBTOTALS	00088331	SUBTOT	AL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		¢	325.00
1.	X			\$	325.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,127.70
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		\$			
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
9.	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				507.00
10.	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH				
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
				•	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/8 2 FILER NAME Gassaway, Timothy W. (Mr.) 3 Filer ID (Ethics Commission 00088331 4 Date 10/04/2024 5 Full name of contributor out-of-state PAC (ID#:) 7 4 Date 10/04/2024 5 Full name of contributor out-of-state PAC (ID#:) 7 6 Contributor address; City; State; Zip Code Perryton, TX 79070 4	n Filers) \$50.00
Gassaway, Timothy W. (Mr.) 00088331 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 10/04/2024 Bozeman, Clem 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) Perryton, TX 79070 Perryton, TX 79070 100088331	
Gassaway, Timothy W. (Mr.) 00088331 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 10/04/2024 Bozeman, Clem 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) Perryton, TX 79070 Perryton, TX 79070 100088331	
10/04/2024 Bozeman, Clem 6 Contributor address; City; State; Zip Code Perryton, TX 79070	\$50.00
6 Contributor address; City; State; Zip Code Perryton, TX 79070	\$50.00
6 Contributor address; City; State; Zip Code Perryton, TX 79070	
8Principal occupation / Job title (See Instructions)9Employer (See Instructions)	
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
10/01/2024 Fulton, Juliann	\$100.00
Contributor address; City; State; Zip Code	
Bushland, TX 79012	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Social Worker BSA Hospital	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
10/17/2024 Nickerson, Jerry	\$50.00
Contributor address; City; State; Zip Code	
Amarillo, TX 79107	
Amarillo, TX 79107 Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) tech CNS Pantex	\$50.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) tech CNS Pantex Date Full name of contributor out-of-state PAC (ID#:) 10/04/2024 Seaman, John Amount of Contribution (\$)	\$50.00
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Principal occupation / Job title (See Instructions) Employer (See Instructions) tech CNS Pantex Date Full name of contributor out-of-state PAC (ID#:) 10/04/2024 Seaman, John Amount of Contribution (\$)	\$50.00
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Principal occupation / Job title (See Instructions) Employer (See Instructions) tech CNS Pantex Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/04/2024 Seaman, John Contributor address; City; State; Zip Code Perryton, TX 79070 Perryton, TX 79070 Perryton, TX 79070	\$50.00
Principal occupation / Job title (See Instructions) tech Employer (See Instructions) CNS Pantex Date Full name of contributor out-of-state PAC (ID#:) 10/04/2024 Seaman, John Amount of Contribution (\$) Contributor address; City; State; Zip Code Perryton, TX 79070 Principal occupation / Job title (See Instructions) Employer (See Instructions)	\$50.00
Principal occupation / Job title (See Instructions) tech Employer (See Instructions) CNS Pantex Date Full name of contributor out-of-state PAC (ID#:) 10/04/2024 Seaman, John Amount of Contribution (\$) Contributor address; City; State; Zip Code Perryton, TX 79070 Principal occupation / Job title (See Instructions) UGA/SREL Employer (See Instructions) UGA/SREL	\$50.00
Principal occupation / Job title (See Instructions) tech Employer (See Instructions) CNS Pantex Date Full name of contributor out-of-state PAC (ID#:) 10/04/2024 Seaman, John Amount of Contribution (\$) Contributor address; City; State; Zip Code Perryton, TX 79070 Principal occupation / Job title (See Instructions) UGA/SREL Employer (See Instructions) UGA/SREL Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor out-of-state PAC (ID#:)	
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Principal occupation / Job title (See Instructions) tech Employer (See Instructions) CNS Pantex Date Full name of contributor out-of-state PAC (ID#:) 10/04/2024 Seaman, John Amount of Contribution (\$) Contributor address; City; State; Zip Code Perryton, TX 79070 Principal occupation / Job title (See Instructions) UGA/SREL Employer (See Instructions) UGA/SREL Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/25/2024 Seaman, John Contributor address; City; State; Zip Code Amount of Contribution (\$) Perryton, TX 79070 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 5/8 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Gassaway, Timothy W. (Mr.) 00088331 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 10/13/2024 \$25.00 Tanner, Louis 6 Contributor address; City; State; Zip Code Austin, TX 78744 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/01/2024 \$25.00 Zavala, Amy Contributor address; City; State; Zip Code Fritch, TX 79036 Principal occupation / Job title (See Instructions) Employer (See Instructions) Occupational Health Nurse CPCHEM

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		nmittee	Event Exp Fees Food/Bev Gift/Award Legal Ser	oense erage Expense ds/Memorials Expe	nse	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	ymer rhead pense pens ages	ht/Reimbursement d/Rental Expense e /Contract Labor		Transportat Travel in Di Travel Out	Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel in District Fravel Out of District DTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2		=						2	Filer ID		(Ethics Commission Filers)
1	Sch: 1/1 Rpt: 6/8		Gassaway,		\sqrt{M} (Mr)					ľ	000883	21	
			Gassaway,	TITIOUT	y vv. (ivii.)						000883	51	
4	Date	5	Payee name										
	10/10/2024		Blue Horizo	n Texa	s PAC								
6	Amount (\$) \$250.00		Payee addre PO Box 780	0162	City;	State;	Zip Co	de					
			San Antonio	o, TX 7	8278								
8	PURPOSE OF EXPENDITURE		Category _{(S} Advertising		ries listed at the top SE	o of this sche	edule)	(b)	Description Check if travel Check if Austin Check if Austin Text message	ı, ТХ,		•	expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Off	iceholde	r name	С	Office sou	ght			Offic	e he	ld
	Date		Payee name										
	10/21/2024		USPS										
_	Amount (\$)		Payee addre	55.	City;	State [.]	Zip Co	de					
	\$365.00		2301 Ross Amarillo, T)	ST		,	F						
	PURPOSE OF EXPENDITURE		Category _{(S} Advertising		ries listed at the top SE	o of this sche	edule)	(b)	Description Check if travel Check if Austin Check if Austin Stamps				olete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	iceholde	r name	C	Office sou	ght			Offic	e he	ld
	Date		Payee name										
	10/10/2024		VictoryStor										
	Amount (\$)		Payee addre		City;	State	Zip Co	de					
	\$512.70		5200 SW 3			State,	Ζιρ ου	ue					
			Davenport,										
	PURPOSE OF EXPENDITURE		Category _{(S} Advertising		ries listed at the top	o of this sche	edule)	(b)	Description Check if travel Check if Austin Yard Signs				elete Schedule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholde	r name	C)ffice sou	ght			Offic	e he	ld

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1 Total pages Schedule G: Sch: 1/2 Rpt: 7/8	2 FILER NAME Gassaway, Timothy W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088331					
4 Date 10/23/2024	5 Payee name Campaign Partner							
6 Amount (\$) \$49.00	\$49.00 P.O. Box 118 Reimbursement from political contributions							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					
Date Payee name 10/02/2024 United States Postal Service								
Amount (\$) \$73.00 Reimbursement from political contributions intended	Payee address; City; State; Zip C 505 E 9th Amarillo, TX 79105	ode						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					
Date 10/02/2024	Payee name United States Postal Service							
Amount (\$) \$73.00	Payee address; City; State; Zip C 505 E 9th	ode						
Reimbursement from political contributions intended Amarillo, TX 79105								
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					

POLITICAL EX	(PENDITURES FROM PERSON	AL FUNDS	SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing f	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 2/2 Rpt: 8/8	2 FILER NAME Gassaway, Timothy W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088331			
4 Date 10/15/2024	5 Payee name United States Postal Service		•			
6 Amount (\$) \$292.00 Reimbursement from political contributions intended	from					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description [[Stamps	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date 10/17/2024	Payee name United States Postal Service					
Amount (\$) \$20.00 Reimbursement from	Payee address; City; State; Zip C 505 E 9th	ode				
political contributions intended	Amarillo, TX 79105	-				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			