CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction (Guide explains how to co	mplete this form.	1 Filer ID (Ethics Commis 00081965		2 Total pages	filed: 20
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
	OFFICEHOLDER NAME	The Honorable	Bradley L.			Date Received	
l						ELECTRONI	CALLY FILED
l		NICKNAME	LAST		SUFFIX	10/28/2024	
		Brad	Buckley				
4	CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered	d or Date Postmarked
	OFFICEHOLDER MAILING ADDRESS	7321 FM #2843				Receipt #	Amount
	Change of Address	Salado, TX 76571				Date Processed	
	_					Dute 1 10003500	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
	TREASURER NAME	Mr.	Wayne C.				
		NICKNAME	LAST		SUFFIX		
		MORIVAINE	Zeh		301117		
6	CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	AP	r / SUITE #; CITY	; S	TATE; ZIP CODE
	TREASURER ADDRESS	1297 Mission Trail					
	(Residence or Business)	Salado, TX 76571					
7	CAMPAIGN	AREA CODE PI	HONE NUMBER	EXTENSION			
	TREASURER PHONE	(254) 681-2559					
L	FIIONL						
8	REPORT TYPE	January 15	30th day befor	ra alastian	Runoff	15th day ofter	campaign treasurer
		January 15	Solii day beloi	e election	Kulloli		officeholder only)
		July 15	X 8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)
9	PERIOD	Month Day Ye	ar		Month Day	Year	
	COVERED	09/27/2024	Т	HROUGH	10/26/202	24	
10	ELECTION	ELECTION DATE	<u>-</u> l		ELECTION TYPE		
"	ELECTION	Month Day Ye		Primary	Runoff	Other	
		11/05/2024		-		Ш	
				General	Special		
11	OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	Γ (if known)	
		State Representative I	District 54		State Represen	tative District 54	1
L							
			GO '	TO PAGE 2			
I							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 20

13 C / OH NAME	Buckley, Bradley L.	The Honorable)	14 Filer ID (I	Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditual These expenditures may have been made without distributed officeholders are required to report this information	the candidate's or office	holder's knowledge or		
Additional Pages	COMMITTEE TYPE COMMITTEE NAME					
Ш	X GENERAL	TEXAS ALLIANCE FOR LIFE PAC				
		COMMITTEE ADDRESS				
	SPECIFIC	8000 Centre Park Drive				
		STE 380				
		Austin, TX 78754				
		COMMITTEE CAMPAIGN TREASURER NAME				
		SHAW, JAMES				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		8000 CENTRE PARK DRIVE				
		STE 380				
		AUSTING, TX 78754				
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 49,185.78		
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 114,602.96		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 275,763.89		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.				
		The Honor	able Bradley L. Buckl	ley		
		Signature o	Candidate or Officehold	der		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subso	cribed before me, by the s	aid	, this the	day		
		ertify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath		
- 5	-			5		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER SHEET	PG 3 3 of 20
	LER NAI uckley,	ME Bradley L. (The Honorable)	19 Filer ID 00081965	(Ethics Commission	n Filers)
20 S	CHEDUL	E SUBTOTALS			
N.	AME OF	SCHEDULE		SUBTOTAL A	MOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	42,405.60
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	6,780.18
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	114,602.96
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10). <u> </u>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
13	L. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	2.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
				,	

	MONET	ARY POLITICAL C	SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/20	
2	FILER NAME Buckley, Bra	dley L. (The Honorable)			3	Filer ID (Ethics Commission 00081965	on Filers)
4	Date 10/17/2024	5 Full name of contributorABC PAC6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
Ω	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	I _a .	Employer (See Instructions	.)		
0	Fillicipal occu	pation / 300 title (3ee instructions)	9	Employer (See instructions	')		
	Date 10/24/2024	Full name of contributor BEEF PAC Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
		Amarillo, TX 79106					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 10/09/2024	Full name of contributor Bloomer, Randy Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$2,401.50
		Salado, TX 76571	1				
	Principal occu Self-Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Bloomers Trailers	5)		
	Date 10/17/2024	Full name of contributor CEPAC Contributor address; City; Sta San Ramon, CA 94583	x out-of-state PAC (ID#: COC te; Zip Code	0035006		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/18/2024	Full name of contributor Charter Schools Now PAC Contributor address; City; Sta Austin, TX 78704	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			<u> </u>				

	MONET	ARY POLITICAL CONT	SCHEDULE A1				
	The Instruc	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 5/20	
2	FILER NAME Buckley, Bra	dley L. (The Honorable)			3	Filer ID (Ethics Commission 00081965	n Filers)
4	Date 10/01/2024 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$2,000.00		
8	Principal occu	Boerne, TX 78015 pation / Job title (See Instructions)	la la	Employer (See Instructions	;) 		
	Managing Pa			Captiol Chairman's Allia		•	
	Date Full name of contributor out-of-state PAC (ID#:) 10/10/2024 Dealon LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$	10,000.00		
	Principal occu	Amarillo, TX 79102 pation / Job title (See Instructions)	1	Employer (See Instructions	·)		
	r illicipai occu	oalion / Job title (See Instructions)		Employer (See instructions	9)		
	Date 09/28/2024	Full name of contributor out-of Delano, Terry Contributor address; City; State; Zip C	f-state PAC (ID#:		•	Amount of Contribution (\$)	\$104.10
		Harker Heights, TX 76548					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 10/01/2024	Friends of Baylor Med	f-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/01/2024	Full name of contributor out-of Good Government Fund Contributor address; City; State; Zip C	f-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL (SCHEDULE A1			
	The Instru	ction Guide explains how	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/20	
2	FILER NAME Buckley, Bra	dley L. (The Honorable)			3	Filer ID (Ethics Commission 00081965	on Filers)
4	Date 10/10/2024					Amount of Contribution (\$)	\$50.00
_		Killeen, TX 76541			Ĺ		
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Norris, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
	Principal occu	Salado, TX 76571	e)	Employer (See Instruction	<u>=,</u>		
	Principal occupation / Job title (See Instructions) Employer (See Instruction retired retired			>)			
Date Full name of contributor out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$500.00		
		Austin, TX 78741					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
	Date 10/24/2024	Full name of contributor TBA Bank PAC Contributor address; City; S Austin, TX 78701)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
	Date 10/17/2024	Full name of contributor TXCPA PAC Contributor address; City; S Addison, TX 75001	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/20		
2	FILER NAME Buckley, Bra	dley L. (The Honorable)		3	Filer ID (Ethics Commission 00081965	on Filers)	
4	Date 09/27/2024			7	Amount of Contribution (\$)	\$350.00	
_		Round Rock, TX 78664					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 10/17/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Assn of Pawn Brokers Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
		Crawford, TX 76638		<u></u>			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 10/17/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Automobile Dealer's Assn PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00	
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Farm Bureau Ag Fund Contributor address; City; State; Zip Code Waco, TX 76702		•	Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)			
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705)	•	Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 8/20 3 Filer ID (Ethics Commission Filers) FILER NAME 00081965 Buckley, Bradley L. (The Honorable) \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 10/17/2024 DADE PHELAN CAMPAIGN \$6,750.00 POLLING 7 Contributor address; City; State; Zip Code **AUSTIN, TX 78763** 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) 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 Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 10/17/2024 **TREPAC** \$25.00 I ADVERTISING Contributor address; City; State; Zip Code

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/12 Rpt: 9/20	Buckley, Bradley L. (The Honorable) 00081965
4	Date	5 Payee name
	09/30/2024	Burkett Media
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	PO Box 163266
		Austin, TX 78716
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Advertising
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	·	
	Date	Payee name
	09/28/2024	Country Donuts
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.50	108 West Village Rd
		Salado, TX 76571
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Event expense- block walking
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	10/12/2024	Country Donuts
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.50	108 West Village Rd
		Salado, TX 76571
-	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Event expense- block walking
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	•

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Mages/Contract Labor

	Candidate/Officeholder/Politica			Giff/Awards/Memorials Legal Services		Salaries/W		e /Contract Labor		OTHER (enter	istrict a category not listed a	bove)
	Credit Card Payment			The Instruction G	uide explains ho	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 2/12 Rpt: 10/20		Buckley, Bra	adley L. (The F	lonorable)					00081965		
4	Date	5	Payee name						<u> </u>			
	10/06/2024		Custom Ink									
6	Amount (\$)	7	Payee addres	ss; City;	State:	Zip Co	de					
ľ	\$896.27	ľ		t Ave STE 300	olaic,	Zip 00	uc					
	Φ000.21		2010 010010	17WC 01E 000								
			Fairfay \/A	22021								
		L	Fairfax, VA			-						
8	PURPOSE OF	(a)		e Categories listed at t	the top of this sched	dule)	(b)	Description				
	EXPENDITURE		Advertising I	Expense						de of Texas. Cor officeholder livin	nplete Schedule T.	
								advertising- ts			ig expense	
								3				
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Of	fice sou	aht			Office h	ield	
	expenditure to benefit C/OI	Н				•	•					
_	Date	Π	Payee name									
	10/16/2024		Custom Ink									
_	Amount (\$)	┝	Payee addres	ss; City;	State:	Zip Co	dь					
	\$384.64		•	t Ave STE 300	olulo,	2.p 00	uc					
	Ψ004.04		2310 DISTITO	17WC 31E 300								
			Coirfox \/A	22021								
		_	Fairfax, VA			-						
	PURPOSE OF	(a)		e Categories listed at t	the top of this sched	dule)	(b)	Description	outoi	do of Toyon Cor	nplete Schedule T.	
	EXPENDITURE		Advertising I	Expense				=		officeholder livin		
								advertising- ts	shii	rts		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	ield	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	10/09/2024		DM Advertis	ing								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$1,200.00		904 Leifeste	r Circle								
			Killeen, TX	76549								
	PURPOSE	(a)		e Categories listed at t	the ten of this cohed	dulo)	(b)	Description				
	OF	``	Advertising I		ine top of this sched	iule)	(,		outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE		3							officeholder livin	ig expense	
								advertising ex	xpe	ense		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	ield	
	experiorale to belieff C/OI											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 3/12 Rpt: 11/20	Buckley, Bradley L. (The Honorable) 00081965					
4	Date	5 Payee name					
	10/18/2024	Denison, Sarah					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$263.98	P O Box 2910					
		Austin, TX 78768					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		staff travel expense - mileage					
_							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	09/30/2024	Diem, Jessica					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$4,000.00	3013 Saint Matthew St					
		Salado, TX 76571					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor					
	EXI ENDITORE	Check if Austin, TX, officeholder living expense					
		campaign salary					
	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H					
	Date	Payee name					
	10/11/2024	FCA Heart of Texas West					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$157.00	2911 Herring Avenue STE 203					
		Waco, TX 76708					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Event sponsorship- FCA Community Lunch					
		Event sponsorship- FCA Community Editor					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/12 Rpt: 12/20	Buckley, Bradley L. (The Honorable) 00081965
4	Date	5 Payee name
	10/25/2024	Fast Signs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,790.14	904 South 31st St
		Temple, TX 76504
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense advertising - signs
		advertising signs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/02/2024	HEB
H	Amount (\$)	Payee address; City; State; Zip Code
	\$68.33	2509 North Main St
		Belton, TX 76513
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event expense- Moffatt Meet and Greet
		Event expense monat meet and erect
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/14/2024	Hope House Ministry
	Amount (\$)	Payee address; City; State; Zip Code
	\$850.00	627 Hope for the Hungry St
		Belton, TX 76513
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event sponsorship- BBJ Classic
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 5/12 Rpt: 13/20	2 FILER NAME Buckley, Bradley L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081965
4	Date	5 Payee name
	10/18/2024	Johnny's Steaks and BBQ
6	Amount (\$) \$47.00	7 Payee address; City; State; Zip Code 301 Thomas Arnold Rd Salado, TX 76571
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		event expense- campaign meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/09/2024	Killeen Daily Herald
	Amount (\$)	Payee address; City; State; Zip Code
	\$779.00	PO Box 1300
		Killeen, TX 76540
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		advertising expense- print
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2024	Killeen ISD Education Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 967
		Killeen, TX 76540
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		event sponsorship
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

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)

	Credit Card F dyment	The Instruction Guide explains how to complete this fo	rm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/12 Rpt: 14/20	Buckley, Bradley L. (The Honorable)	00081965
4	Date	5 Payee name	
	10/09/2024	Korean Weekly	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$420.00	PO Box 10125	
		Killeen, TX 76547	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE		x if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	I — I —	x if Austin, TX, officeholder living expense
		adverti	sing expense- print
_	0 1: 0.11.7.7.1.		0"
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/30/2024	Lamar Advertising	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7,714.00	5110 N General Bruce Drive	
		Temple, TX 76501	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE	Navertising Expense	c if travel outside of Texas. Complete Schedule T. c if Austin, TX, officeholder living expense
		adverti	
		443314	g
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	
	Date	Payee name	
	10/09/2024	Maynard, James	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$455.00	408 Fay Drive	
	Ψ-100.00	400 Lay Blive	
		Killeen, TX 76542	
	DUDDOCE		d
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	IION x if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Navertising Expense	k if Austin, TX, officeholder living expense
		adverti	sing expense- signs
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/12 Rpt: 15/20	Buckley, Bradley L. (The Honorable) 00081965
4	Date	5 Payee name
	09/28/2024	Muscovy Coffee Roasters
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$27.12	100 North Church St
L		Salado, TX 76571
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event expense- block walking
		Event expense block walking
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	10/12/2024	Muscovy
H	Amount (\$)	Payee address; City; State; Zip Code
	\$41.85	100 North Church St
	Ψ41.03	100 North Church St
		Colode TV 70F74
		Salado, TX 76571
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event expense- block walking
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/09/2024	Paper Graphics
H	Amount (\$)	Payee address; City; State; Zip Code
	\$325.19	904 South 31st St
	Ψ020.10	304 30ddi
		Temple, TX 76504
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		advertising expense- printing
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									
	oroun oura'r aymoni	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
	Sch: 8/12 Rpt: 16/20	Buckley, Bradley L. (The Honorable) 00081965								
4	Date	5 Payee name								
	09/30/2024	Rugely, Cash								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,409.91	16802 Sonoma Breeze Dr								
		Manor, TX 78653								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-							
	OF EXPENDITURE	Salaries/Wages/Contract Labor								
	EXPENDITURE	Check if Austin, TX, officeholder living expense	Check if Austin, TX, officeholder living expense							
		contract labor								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI									
	Date	Payee name								
	09/27/2024	Ryan Data and Research								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,500.00	PO Box 202675								
		Austin, TX 78720								
	DUDDOSE		_							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
		Data								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-							
	expenditure to benefit C/OI	-i								
	Date	Payee name	=							
	10/09/2024	Ryan Data and Research								
			_							
	Amount (\$)									
	\$3,000.00	PO Box 202675								
		Austin, TX 78720								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense								
		Data								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_							
	expenditure to benefit C/OI									
			_							
_										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 9/12 Rpt: 17/20	Buckley, Bradley L. (The Honorable) 00081965							
4	Date	5 Payee name							
	09/27/2024	Salado Community Foundation							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$150.00	2517 Winners Circle							
		Salado, TX 76571							
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	DUES Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		membership dues							
		memberen p adde							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
	Date	Payee name							
	10/16/2024	Salado Village Voice							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$560.00	PO Box 587							
		Salado, TX 76571							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense advertising- newspaper							
		αυνετισιής- πενισμαρεί							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·							
_	Data								
	Date	Payee name Stratonia Madia Placement							
	10/17/2024	Strategic Media Placement							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$80,000.00	7669 Stagers Loop							
		Delaware, OH 43015							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense advertising- television							
		auvertising-television							
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
_									

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Com	nmittee	_egal Services	norials Expense		Wages	s/Contract Labor		Travel Out of I OTHER (enter	District a category not listed above)
Ļ	-	1.		ine mstructi	on Guide expla	una now to co	mpie	cte tills iUIIII.	1-		(EU): 0 : :	F1. \
1	Total pages Schedule F1:	1							3		(Ethics Commission	⊢ilers)
_	Sch: 10/12 Rpt: 18/20	 	Buckley, Bra	dley L. (T	he Honorabl	e)				00081965		
4	Date	1	Payee name									
	10/15/2024	1	TDCJ									
6	Amount (\$)	7	Payee addres	s; City;	S	tate; Zip Co	ode					
	\$660.33		PO Box 401	3								
			Huntsville, T	X 77342								
8	PURPOSE	₩	Category (Se		ed at the ton of thi	s schedule)	(b)	Description				
	OF		Event Exper		cu at the top of the	o soriculaic)			outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE							Check if Austin	, TX	officeholder livi	ng expense	
								Event sponso	orsl	nip donatio	n	
9	Complete ONLY if direct		andidate/Offic	eholder nar	ne	Office sou	ıght			Office I	neld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	10/25/2024		Tanner, Van	essa								
	Amount (\$)		Payee addres	s; City;	S	tate; Zip Co	ode					
	\$500.00		P O Box 291	.0								
		1										
			Austin, TX 7	8768								
	PURPOSE		Category (Se			s schedule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wa	ges/Contra	ıct Labor						mplete Schedule T.	
								—		officeholder livi	ng expense	
								campaign co	HILLO	מכנ ומטטו		
_	Operation ONE V. C. P.	<u> </u>	Name - 1000	- l l -l		04.					1 - 1	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	enolder nar	ne	Office sou	ıgnt			Office I	neia	
_		_										
	Date	1	Payee name									
L	10/18/2024	L	Temple Cha	mber of Co	ommerce							
	Amount (\$)		Payee addres	s; City;	S	tate; Zip Co	ode			-		
	\$500.00		201 Santa F	e Way STI	E 105							
		1										
			Temple, TX	76501								
	PURPOSE	(a)	Category (Se	e Categories lis	ed at the top of thi	s schedule)	(b)	Description				
	OF EXPENDITURE		Event Exper		•	•					mplete Schedule T.	
	EXPENDITURE		•					_		officeholder livi		
								event sponso	orsh	nip- military	luncheon	
							L					
	Complete ONLY if direct		andidate/Offic	eholder nar	ne	Office sou	ıght			Office I	neld	
	expenditure to benefit C/OI	H										

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/12 Rpt: 19/20	Buckley, Bradley L. (The Honorable) 00081965
4	Date	5 Payee name
	09/30/2024	Texas DPSOA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	5821 Airport Blvd
		Austin, TX 78752
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		event sponsorship
		Cvent opensorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨		
	Date	Payee name
	10/02/2024	Troy Education Enhancement Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	PO Box 98
		Troy, TX 76579
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense event expense- tickets
		event expense- tienets
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
H		
	Date	Payee name
	10/15/2024	Troy Lumberyard
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	28 E. Main Street
		Troy, TX 76579
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Event Expense- meet and greet
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to beliefft G/O	·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	ı - ıl Co	mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	pense	Polling Expens Printing Expen	ad/Rental Expense se se s/Contract Labor		Travel in District Travel Out of D		
	Credit Card Payment			The Instruction Guid	e explains	how to compl	ete this form.				
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)	
	Sch: 12/12 Rpt: 20/20		Buckley, B	radley L. (The Hor	norable)			l	00081965		
4	Date	5	Payee name								\dashv
	10/25/2024	ľ	Winred	•							
Ļ		-		City	Ctoto	7in Codo					\dashv
ľ	Amount (\$)	 ′	Payee addre		State;	Zip Code					
	\$118.20		1776 WIISO	on Blvd STE 503							
			Arlington, \	/A 22209							
8	PURPOSE	(a)	Category (9	See Categories listed at the	top of this sch	edule) (b)	Description				П
	OF EXPENDITURE			rhead/Rental Expe		,	Check if travel	outsi	ide of Texas. Cor	nplete Schedule T.	
	LAFENDITORE						_	n, TX,	, officeholder livin	g expense	
							FEES				
9	Complete ONLY if direct expenditure to benefit C/OI	_ (_	Candidate/Off	ficeholder name	C	Office sought			Office h	eld	
	experialture to benefit C/Oi										
l											
l											
l											