CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple		1 Filer ID (Ethics Commi 00069218		2 Total pages fi	led: 26
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE I	USE ONLY
OFFICEHOLDER NAME	The Honorable	Briscoe R.			Date Received ELECTRONIC	ALLY FILED
	NICKNAME	LAST Cain		SUFFIX	10/28/2024	
		Calli				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
MAILING ADDRESS	P.O. Box 7				Receipt #	Amount
Change of Address	Deer Park, TX 77536				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-	
TREASURER NAME	Mrs.	Tanya				
	NICKNAME	LAST		SUFFIX		
		Robertson				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX DI EASE).	ΔD	T / SUITE #; CITY	/·	ATE; ZIP CODE
TREASURER ADDRESS	1110 Appleford Drive	DOXT LENGE),	7.4	17 JOHE 11, JOHN 1	, 317	VIE, 211 CODE
(Residence or Business)	Taylor Lake Village, TX 77	586				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (832) 687-4192	E NUMBER E	EXTENSION			
8 REPORT TYPE	January 15	30th day before		Runoff Exceeded modified	15th day after ca appointment (offi	ceholder only)
	Suly 15	. J our day before t	Siection	reporting limit	Tinai Neport (Aut	acii C/OH-i ity
9 PERIOD COVERED	Month Day Year	T. I	IDOLIOLI	Month Day		
COVERED	09/27/2024	IH	IROUGH	10/26/20	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE	□ out	
	Month Day Year 11/05/2024		rimary	Runoff	Other	
	11/00/2021	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	l		12 OFFICE SOUGH	T (if known)	
	State Representative Distr	ict 128		State Represer	ntative District 128	
				1		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 26

13 C / OH NAME	Cain, Briscoe R. (The	Honorable)	14 Filer ID 00069218	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Alliance for Life PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Drive Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		4505 Corazon Cv		
		Round Rock, TX 78661		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 27,521.51
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 17,055.48
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 131,298.75
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP 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 penal true and correct and includes under Title 15, Election Code.		
		The Hor	orable Briscoe R. Cai	in
		Signature o	f Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subs	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 office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER SH	EET PG 3 3 of 26
I	ER NAM	ME coe R. (The Honorable)	19 Filer ID 00069218	(Ethics Comr	nission Filers)
	HEDUL	SUBTO	TAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	27,271.51
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	250.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	17,055.48
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		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 Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/26		
2	FILER NAME Cain, Brisco	e R. (The Honorable)				3	Filer ID (Ethics Commission 00069218	n Filers)	
4	Date 10/01/2024	5 Full name of contributor		7	Amount of Contribution (\$)	\$5,000.00			
8	Principal occu	Dallas, TX 75254 pation / Job title (See Instructions	s) <u>[</u> 5	9	Employer (See Instructions	 - s)			
	CEO				Ashford Inc				
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Brentwood Public Affairs Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00				
	Austin, TX 78701				(C lastti	<u></u>			
	Principal occupation / Job title (See Instructions) Employer (See Instructions)				Employer (See Instructions	5)			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:) Charter Communications, Inc Texas PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78701-5007							
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)			
	Date 10/15/2024	Full name of contributor Giesinger, Ross Contributor address; City; St Austin, TX 78757-1440)		Amount of Contribution (\$)	\$200.00	
	Principal occu Government	pation / Job title (See Instructions Affairs	5)		Employer (See Instructions Self	5)			
	Date 10/15/2024	Full name of contributor Holzheauser, Craig Contributor address; City; St Austin, TX 78757-1440	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00	
	Principal occu Government	pation / Job title (See Instructions Affairs	(3)		Employer (See Instructions Self	5)			

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/26	
2	FILER NAME Cain, Brisco	e R. (The Honorable)		3	Filer ID (Ethics Commission 00069218	n Filers)
4	Date 10/24/2024	Full name of contributor		7	Amount of Contribution (\$)	\$20.00
8	Principal occu	La Porte, TX 77571 pation / Job title (See Instructions)	9 Employer (See Instructions)		
_	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Law - PAC				Amount of Contribution (\$)	\$500.00
		Contributor address; City; State; Zip Code				
Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions))		
	Date 10/15/2024	10/15/2024 Law Office of A. Craig Eiland PC Austin Account Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 McRae, Cody Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$167.00
Houston, TX 77042 Principal occupation / Job title (See Instructions) Employer (See Instruction)		
	Date 10/15/2024				Amount of Contribution (\$)	\$167.00
	Principal occu	Kingwood, TX 77345 pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A	L	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/26	
2	FILER NAME Cain, Brisco	e R. (The Honorable)		3	Filer ID (Ethics Commission Filers 00069218)
4	Date 10/15/2024	Full name of contributor		7	Amount of Contribution (\$) \$500	0.00
8	Principal occu	San Antonio, TX 78258 pation / Job title (See Instructions)	9 Employer (See Instructions			
			2 Employer (See instructions	,		
	Date Full name of contributor out-of-state PAC (ID#:) 10/07/2024 Oncor Texas State Political Action Committee of Oncor Electric Delivery Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000	0.00	
	Dallas, TX 75202-1234 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
	Date 10/15/2024				Amount of Contribution (\$) \$500	0.00
		Tulsa, OK 74102				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Date Full name of contributor out-of-state PAC (ID#:) 10/16/2024 PharmPAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000	0.00	
Austin, TX 78757 Principal occupation / Job title (See Instructions) Employer (See Instructions))		
	Date 10/15/2024 Full name of contributor out-of-state PAC (ID#:) Political Action Committee of the Independent Insurance Agents of Texas Contributor address; City; State; Zip Code Austn, TX 78768			Amount of Contribution (\$) \$250	0.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/26	
2	FILER NAME Cain, Brisco	e R. (The Honorable)		3	Filer ID (Ethics Commission 00069218	on Filers)
4	Date 10/15/2024	Full name of contributor		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78716 pation / Job title (See Instructions)	Employer (See Instructions)			
•	Principal occu	pation / Job title (See instructions)	e Employer (See instructions	<i>)</i>		
	Date 10/15/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
Austin, TX 78702 Principal occupation / Job title (See Instructions) Employer (See Instructions))		
	Date 10/24/2024	24/2024 Stachmus, Frank Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$520.51
	Principal occu	Spring, TX 77381 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ TBA Bank PAC - State Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ TNLA PAC Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$1,250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDUI	LE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/26	
2	FILER NAME Cain, Brisco	e R. (The Honorable)		3	Filer ID (Ethics Commission 00069218	on Filers)
4	Date 10/11/2024	5 Full name of contributor out-of-state PAC (ID#:) Teter, Rex 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$30.00
8	Principal occu	Pasadena, TX 77503 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/15/2024	te Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$5,500.00
Principal occupation / Job title (See Instructions) Employer (See Instructions))		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:) 1/2024 Texas Agricultural Co-op Council - PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: Texas Association of Crane Owners PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
Austin, TX 78716 Principal occupation / Job title (See Instructions) Employer (See Instructions))		
	Date Full name of contributor out-of-state PAC (ID#:) 10/07/2024 Texas Farm Bureau Agfund Contributor address; City; State; Zip Code Waco, TX 76702-2689			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/26		
2	FILER NAME Cain, Brisco	e R. (The Honorable)		3	Filer ID (Ethics Commission 00069218	on Filers)	
4	Date 10/15/2024	5 Full name of contributor out-of-state PAC (ID#:) Texas Poultry PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00	
_		Round Rock, TX 78781					
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 The Cigna Group Employee PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
	Philidelphia, PA 19192						
Principal occupation / Job title (See Instructions) Employer (See Instructions))			
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Tracy, Charles Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$167.00	
		Houston, TX 77005-2441					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: Wholesale Beer Distributors of Texas Political Ac Contributor address; City; State; Zip Code Austin, TX 78701	tion Committee		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

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: 10/26 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Cain, Briscoe R. (The Honorable) 00069218 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/15/2024 TREPAC-Texas Realtors Political Action Committee \$250.00 Advertising for fundraising 7 Contributor address; City; State; Zip Code event. Austin, TX 78768-2246 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 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)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Pri Sa	_	nse es/Contract Labor	Travel in Di Travel Out o OTHER (en	
1	Total pages Schedule F1:	2 FILER NAME	Ī.				3 Filer ID	(Ethics Commission Filers)
	Sch: 1/16 Rpt: 11/26	Cain, Brisco	oe R. (The Honorab	le)			000692	18
4	Date	5 Payee name						
	10/18/2024	AT&T						
6	Amount (\$)	7 Payee addre	ss; City;	State; Z	ip Code			
	\$75.27	208 S Akar	d St					
		Dallas, TX	75202					
8	PURPOSE	(a) Category (S	ee Categories listed at the top	p of this schedule	e) (b) Description		
	OF EXPENDITURE		head/Rental Expen					Complete Schedule T.
						campaign int	ı, TX, officeholder ernet servic e	
9	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Offic	e sough	t	Offic	e held
	Date	Payee name						
	10/01/2024	Adobe						
	Amount (\$)	Payee addre	ss; City;	State; Z	ip Code			
	\$14.06	1221 Peach	ntree Street NE					
		Ste 150						
		Atlanta, GA	30361					
	PURPOSE	(a) Category (S	ee Categories listed at the top	p of this schedule	e) (b) Description		
	OF EXPENDITURE	Office Over	head/Rental Expen	se		<u> </u>	outside of Texas. , TX, officeholder	Complete Schedule T.
						software serv		
							·	
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Offic	ce sough	t	Offic	e held
	Date	Payee name						
	10/24/2024	Amazon						
	Amount (\$)	Payee addre	ss; City;	State; Z	ip Code			
	\$121.55	410 Terry A	ve N					
		Seattle, WA	x 98109					
	PURPOSE OF		ee Categories listed at the top	p of this schedule	e) (b) Description		
	EXPENDITURE	Event Expe	nse			ш	outside of Texas. , TX, officeholder	Complete Schedule T. living expense
						campaign ev		
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Offic	e sough	t	Offic	e held
_								

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 2/16 Rpt: 12/26	Cain, Briscoe R. (The Honorable) 00069218
4	Date	5 Payee name
	10/01/2024	Baytown Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.00	825 Rollingbrook Dr
		Baytown, TX 77521
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		event ticket for campaign staff
		event ticket for earnpaight stain
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	10/15/2024	Ben Bumgarner Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2201 Spinks Rd
	•	Ste 250
		Flower Mound, TX 75022
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/15/2024	Blank Rope Hats
	Amount (\$)	Payee address; City; State; Zip Code
	\$248.73	3420 N F 81
		Runge, TX 78151
	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
		Hats to be embroidered for campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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

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: 3/16 Rpt: 13/26	Cain, Briscoe R. (The Honorable) 00069218
4	Date	5 Payee name
	10/15/2024	Burlebo LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$191.60	10 Russell Lane
		Bldg C
		Dripping Springs, TX 78620
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Clothing to be embroidered for candidate
		and staff
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	10/02/2024	Campaign Monitor
	Amount (\$)	Payee address; City; State; Zip Code
	\$436.00	11 Lea Ave
	Ψ100.00	11 2507 110
		Nashville, TN 37210
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign email software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/15/2024	Caroline Harris Davila Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 700
		Round Rock, TX 78680
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	-	Candidate/Officeholder/Political Committee
		Donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica 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: 4/16 Rpt: 14/26	Cain, Briscoe R. (The Honorable) 00069218			
4	Date	5 Payee name			
	10/15/2024	Cloudways Ltd			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$12.37	Junction Business Center			
		1st Floor Sqaq			
	l	Saint Julian's STJ3334 Malta			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
	LA LIBITORE	Check if Austin, TX, officeholder living expense			
		cloud hosting for campaign website			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
3	expenditure to benefit C/O				
_	Date	Payee name			
	10/16/2024	Crosby-Huffman Chamber of Commerce			
_	Amount (\$)	Payee address; City; State; Zip Code			
	\$25.00	5317 1st Street			
	Ψ20.00	5517 1St Street			
		Crosby, TX 77532			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	!	event ticket for candidate			
	!				
H	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O				
H	Date	Payee name			
	10/02/2024	Delano Strategies LLC			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$150.00	1415 S Voss Rd			
	!	Ste 110-329			
	!	Houston, TX 77057			
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Consulting Expense Consulting Expense Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Media consulting for campaign			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
		<u>'</u>			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense 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	al 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:				
Sch: 5/16 Rpt: 15/26	Cain, Briscoe R. (The Honorable) 00069218			
4 Date	5 Payee name			
10/15/2024	Denise Villalobos Campaign			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$500.00	10330 Kingsbury Dr			
	Corpus Christi, TX 78410			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Contributions/Donations Made By			
EXPENDITURE	Candidate/Officeholder/Political Committee			
	Donation			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				
Date	Payee name			
10/15/2024	Don McLaughlin Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$250.00	PO Box 1707			
	Uvalde, TX 78802			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
EXPENDITORE	Candidate/Officeholder/Political Committee			
	Donation			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
SAPORGICATO TO BOTTOTIC OFOI				
Date	Payee name			
09/30/2024	Don McLaughlin Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	PO Box 1707			
	Uvalde, TX 78802			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
LAI LINDITORE	Candidate/Officeholder/Political Committee			
	Donation			
Commission ONUVIVIII	Condidate/Officeholder name			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
- p - 1.13.12 12 20.10.11 0/01	Oxponiation to Bottonic Orott			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 6/16 Rpt: 16/26	Cain, Briscoe R. (The Honorable) 00069218
4	Date	5 Payee name
	10/11/2024	Duncan Floral
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$282.61	1402 West Oak
		Duncan, OK 73533
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Flowers for campaign supporters funeral
		Thomas for campaign supporters functual
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	10/07/2024	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$162.50	4402 Underwood Road
		La Porte, TX 77571
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign storage
		Campaign storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/30/2024	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$144.00	4402 Underwood Road
		La Porte, TX 77571
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign storage
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
I		

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

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 7/16 Rpt: 17/26	Cain, Briscoe R. (The Honorable)	00069218
4	Date	5 Payee name	
	10/11/2024	Fairmont Dallas	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,049.80	1717 N Akard St	
		Dallas, TX 75201	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
		"	odging for campaign event
9	Complete ONL V if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol		Office field
_			
	Date	Payee name	
	10/04/2024	GoDaddy.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$45.34	14455 N Hayden Rd	
		Ste 226	
		Scottsdale, AZ 85260	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense Campaign domains purchase
			sampaigh domains parchase
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Cindo nola
_	Date	Davisa nama	
	10/02/2024	Payee name Google	
		<u> </u>	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.57	1600 Amphitheatre Pkwy	
		Mountain View, CA 94043	
	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			campaign email service and data storage
			, 5
_	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
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

	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: 8/16 Rpt: 18/26	Cain, Briscoe R. (The Honorable) 00069218
4	Date	5 Payee name
	10/07/2024	Greater Houston Council of Federated Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.00	7941 Katy Freeway
		P.O. Box 272
		Houston, TX 77024
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		event ticket for candidate
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/02/2024	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.66	10019 S Interstate 35
		Austin, TX 78747
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		drinking water service for capitol office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	10/21/2024	Houston Area Pastor Council
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.00	11902 Jones Rd N
	Ψ1.00	11302 Julies Nu IV
		Houston, TX 77070
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Or	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 9/16 Rpt: 19/26	Cain, Briscoe R. (The Honorable) 00069218
4	Date	5 Payee name
	10/07/2024	Hyatt Lost Pines
6	Amount (\$) \$403.67	7 Payee address; City; State; Zip Code 575 Hyatt Lost Pines Rd
		Cedar Creek, TX 78612
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense lodging for campaign event and Republican Caucus Retreat
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/01/2024	John Lujan Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 14479
		San Antonio, TX 78214
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	John Lujan Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 14479
		San Antonio, TX 78214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Service		_	s/Contract Labor		THER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME				3 F	iler ID	(Ethics Commission Filers)
	Sch: 10/16 Rpt: 20/26	Cain, Briscoe R. (Th	e Honorable)			0	0069218	
4	Date	5 Payee name						
	10/03/2024	La Porte - Bayshore	Chamber of Commerc	e				
6	Amount (\$) \$100.00	7 Payee address; C Po Box 996 La Porte, TX 77572	ty; State; Zip	Code				
8	PURPOSE	(a) Category (See Categorie	s listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees						plete Schedule T.
					Check if Austin,			
					event ticket fo	Ji Cai	iiipaiyii Sta	111
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder	name Office	sought			Office he	eld
	Date	Payee name						
	10/01/2024	LaHoof for HD 121						
	Amount (\$)	Payee address; C	ty; State; Zip	Code				
	\$1,000.00	4014 McCullough A	<i>v</i> e					
		•						
		San Antonio, TX 782	212					
	PURPOSE OF	(a) Category (See Categorie		(b)	Description			
	EXPENDITURE	Contributions/Donat	ions Made By der/Political Committee		Check if travel of Check if Austin,			plete Schedule T.
		Candidate/Officerior	uei/Poilticai Committee	·	Donation	, 17, 01	neerioider nving	Схрепос
					Bonation			
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder	name Office	sought			Office he	eld
	Date	Payee name						
	10/01/2024	LaHoof for HD 121						
	Amount (\$)	Payee address; C	ty; State; Zir	Code				
	\$1,000.00	4014 McCullough A						
	,	ŭ						
		San Antonio, TX 782	212					
	PURPOSE	(a) Category (See Categorie		(b)	Description	_	_	
	OF EXPENDITURE	Contributions/Donat			=			plete Schedule T.
		Candidate/Officehol	der/Political Committee	•	Check if Austin, Donation	, тх, ог	ricenolaer living	expense
					Donation			
_	Complete ONLY if direct	Candidate/Officeholder	name Office	sought			Office he	ald.
	expenditure to benefit C/O		Tidenic Office	Jougnit			Onice He	JU.
\vdash								
L								

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 11/16 Rpt: 21/26	Cain, Briscoe R. (The Honorable)
4	Date	5 Payee name
	10/15/2024	LaHoof for HD 121
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	4014 McCullough Ave
		San Antonio, TX 78212
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	10/18/2024	Lands End
	Amount (\$)	Payee address; City; State; Zip Code
	\$239.31	1 Lands End Ln
		Dodgeville, WI 53595
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Clathing to be embraidered for compaign stoff
		Clothing to be embroidered for campaign staff
	Commission ONLL V if disposit	Condidate/Office helder no rec
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	·	
	Date	Payee name
	10/21/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$140.71	675 Ponce de Leon Ave NE
		Ste 5000
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		campaign email software
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to benefit C/Oi	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complet	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 12/16 Rpt: 22/26	Cain, Briscoe R. (The Honorable)	00069218
4	Date	5 Payee name	•
	10/25/2024	Monday.com	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$495.65	150 Market St	
		Denver, CO 80202	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
l			Check if Austin, TX, officeholder living expense Workflow software for campaign team
			working software for sampaight team
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	10/21/2024	Overton Hotel	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
l	\$243.41	2322 Mac Davis Ln	
l	42.01.12		
l		Lubbock, TX 79401	
┝	PURPOSE	T	Donald Maria
l	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Traver out or district	Check if Austin, TX, officeholder living expense
			lodging for campaign event
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			
	Date	Payee name	
L	10/24/2024	Parking Management Company	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$35.70	5925 Neighborly Ave	
l			
L		Nashville, TN 37209	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l			parking for campaign event
			. J p
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
l			

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Ĺ	Sch: 13/16 Rpt: 23/26	Cain, Briscoe R. (The Honorable)	,	
4	Date	5 Payee name		
L	10/15/2024	Poncho Outdoors		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$1,606.49	9411 Neils Thompson Dr		
		Austin, TX 78758		
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 Campaign Clothing to be embroidered for candida	ate	
		and staff		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
9	expenditure to benefit C/OI			
_	<u> </u>	T T		
	Date	Payee name		
	10/10/2024	Project Destined		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$521.15	1623 S St NW		
		Washington, DC 20009		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Candidate/Officeholder/Political Committee		
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	· ·		
\vdash	Date	Davida nama		
	Date 10/15/2024	Payee name Southwest Airlines		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$268.98	2702 Love Field Dr		
		Dallas, TX 75235		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Flight for Candidate to Lubbock for Campaign Ev	ent	
		I light for Sahadate to Eubbook for Sampaign Ev	J. IL	
	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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		,
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Ļ	Sch: 14/16 Rpt: 24/26	Cain, Briscoe R. (The Honorable)	00069218
4	Date 10/07/2024	5 Payee name Texas Values	
Ļ			
6	Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 900 Congress Ave	
	Φ23.00	Ste L115	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF	, , , , , , , , , , , , , , , , , , ,	tion k if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee	k if Austin, TX, officeholder living expense
		donatio	ווע
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
_	expenditure to benefit C/OF		Unite field
	Date	Payee name	
	10/11/2024	Thomas Schoenbein Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	6911 Silver Grove Ct	
		Decadona TV 77505	
	DUDDOCE	Pasadena, TX 77505	at
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	tion k if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made by	k if Austin, TX, officeholder living expense
		Donati	on
	0	Operation (Office 1 and Operation)	Off. 1. 1.
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
_	Data	Dayee name	
	Date 10/15/2024	Payee name Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$58.69	1455 Market St	
	Ψ00.00	Ste 400	
		San Francisco, CA 94103	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE	Transportation Equipment And Related	c if travel outside of Texas. Complete Schedule T.
	EAFEINDITUKE	Expense	k if Austin, TX, officeholder living expense
		ıransı	ortation in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF		Cinica Hold

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

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 15/16 Rpt: 25/26	Cain, Briscoe R. (The Honorable)	00069218		
4 Date	5 Payee name			
10/21/2024	Uber			
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de		
\$16.90	1455 Market St			
	Ste 400			
	San Francisco, CA 94103			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Transportation Equipment And Related	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Expense	Transportation to political event		
9 Complete ONLY if direct	Candidate/Officeholder name Office sout	ght Office held		
expenditure to benefit C/O	H			
Date	Payee name			
10/10/2024	Vistaprint			
Amount (\$)	Payee address; City; State; Zip Coo	de		
\$210.70	9 Hayden Ave			
	Lexington, MA 12421			
PURPOSE OF	(constant material and the constant)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Printing service for campaign materials		
Complete ONLY if direct	Candidate/Officeholder name Office soug	ght Office held		
expenditure to benefit C/O				
Date	Payee name			
10/25/2024	WinRed			
Amount (\$)	Payee address; City; State; Zip Coo	de		
\$42.18	1776 Wilson Blvd			
	Ste 530			
	Arlington, VA 22209			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Campaign fundraising platform service charge		
		Campaign fandraising platform service enarge		
Complete ONLY if direct	Candidate/Officeholder name Office soug	ght Office held		
expenditure to benefit C/O		, .		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Legal Serv	ds/Memorial vices	nse s Expense Guide expla	F		xpens Vages	e 'Contract L			Travel in District Travel Out of Dis OTHER (enter a		not listed above)
1	Total pages Schedule F1:	2	FILER NAM								T ₃	3	Filer ID	(Ethics	Commission Filers)
	Sch: 16/16 Rpt: 26/26		Cain, Brisc		he Hon	orable)							00069218	`	,
4	Date	5	Payee name												
	10/01/2024		Wingstop												
6	Amount (\$)	7	Payee addre	ss; (City;	S	tate;	Zip Co	de						
	\$45.88		3437 Spen	cer Hwy	/										
			Pasadena,	TX 775	05										
8	PURPOSE	(a)	Category (S	ee Categor	ies listed at	the top of thi	is sched	ule)	(b)	Descrip	tion				
	OF EXPENDITURE		Food/Beverage Expense							f travel outside of Texas. Complete Schedule T.					
	LXI LINDITORL									_			officeholder living	expense	
										meetin	g with c	on	stituents		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholde	r name		Off	ice sou	ght				Office he	eld	