CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction (Guide explains how to comp	plete this form.	1 Filer ID (Ethics Commi 00088236		2 Total pages fi	led: L5
3	CANDIDATE /	MS / MRS / MR	FIRST	-	MI		USE ONLY
	OFFICEHOLDER	Ms.	Stacey R.				USE ONET
	NAME		2			Date Received	
						ELECTRONIC	ALLY FILED
		NICKNAME	LAST		SUFFIX	10/28/2024	
			Swann				
4	CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	TY;	ZIP CODE	Date Hand-delivered of	or Date Postmarked
	OFFICEHOLDER	P.O. Box 1023	· , -	,			
	MAILING ADDRESS	1.0. DOX 1020				Receipt #	Amount
	Change of Address	Lampasas, TX 76550				Date Processed	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI	-	
	TREASURER NAME	Ms.	Stacey R.				
		NICKNAME	LAST		SUFFIX		
			Swann				
6	CAMPAIGN	STREET ADDRESS (NO P		۸D-	T / SUITE #; CITY;		ATE; ZIP CODE
ľ	TREASURER	1294 County Rd. 1205	O BOX FLEASE),	AF	TTSUTE#, CITT,	31/	ATE, ZIF CODE
	ADDRESS	1294 County Ru. 1205					
	(Residence or Business)						
		Lampasas, TX 76550					
7	CAMPAIGN	AREA CODE PHC	NE NUMBER	EXTENSION			
Ľ	TREASURER			EXTENSION			
	PHONE	(512) 270-1265					
8	REPORT						
°	TYPE	January 15	30th day before		Runoff	1 15th day after ca	mpaign treasurer
						appointment (offi	
		July 15	X 8th day before	election	Exceeded modified	Final Report (Atta	ach C/OH-FR)
					reporting limit	-	
9	PERIOD	Month Day Year			Month Day	Year	
	COVERED	09/27/2024	TI	HROUGH	10/26/2024	4	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
		Month Day Year	F	Primary	Runoff	Other	
		11/05/2024		General	Special	_	
						(;f	
111	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT State Representa		
					State Representa	alive District 00	
			GO ⁻	TO PAGE 2			
	rms provided by To	xas Ethics Commission		thics.state.tx.u	ç	Vare	ion V4.1.0.48da51f7
1 01	mo provided by Te	AU3 LUIIU3 COUTITIISSION	vvvvv.e	ແມ່ນວ່າວເຜເຕົາໄດ້ເປ	J	vel3	1011 V4.1.0.40UaJ11/

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 2 of 15

13 C / OH NAME	Swann, Stacey R. (M	Ethics Commission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditu These expenditures may have been made without officeholders are required to report this information	the candidate's or office	holder's knowledge or			
Additional Pages							
	X GENERAL	Blue Horizon Texas PAC					
	X GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	PO Box 780162					
		San Antonio, TX 78278					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Barnett, Clair					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		PO Box 780162					
		San Antonio, TX 78278					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 25.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 4,020.00			
EXPENDITURE TOTALS		\$ 0.00					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 5,908.54			
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 858.77			
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 penalty true and correct and includes a under Title 15, Election Code.					
			Stacey R. Swann				
		Signature of	Candidate or Officehold	der			
AFFIX NOT	TARY STAMP / SEAL ABO	DVE					
Sworn to and subso	ribed before me, by the sa	aid	, this the	day			
		ertify which, witness my hand and seal of office.	, *******				
Signature of offic	er administering	Printed name of officer administering	Title of officer	administering oath			
Forms provided by Tex	vas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7			

SUBTOTALS - C/OH	co	FORM C/OH OVER SHEET PG 3 3 of 15
18 FILER NAME Swann, Stacey R. (Ms.)	19 Filer ID 00088236	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 3,270.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 750.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 5,908.54
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	\$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/4 Rpt: 4/15 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Swann, Stacey R. (Ms.) 00088236 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/10/2024 Beshara, Angella \$25.00 6 Contributor address; City; State; Zip Code Austin, TX 78745 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/02/2024 \$50.00 Bird, Sarah Contributor address; City; State; Zip Code Austin, TX 78731 Principal occupation / Job title (See Instructions) Employer (See Instructions) Writer Self Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/23/2024 Bullard, Michael \$100.00 Contributor address; City; State; Zip Code Early, TX 76802 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Telephone Service Bullard Telephone Services** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/17/2024 \$300.00 Burleson, Cynthia Contributor address; City; State; Zip Code Kempner, TX 76539 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self-Employed Self Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/30/2024 \$25.00 Cobb, May Contributor address; City; State; Zip Code Austin, TX 78756 Principal occupation / Job title (See Instructions) Employer (See Instructions) Writer Self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/4 Rpt: 5/15 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Swann, Stacey R. (Ms.) 00088236 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/16/2024 Coppage, Walter \$100.00 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76301 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) CPA Self Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/19/2024 \$100.00 El Kouri, Zahie Contributor address; City; State; Zip Code Austin, TX 78704 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed not employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/02/2024 Filipelli, Laurie \$25.00 Contributor address; City; State; Zip Code Austin, TX 78745 Principal occupation / Job title (See Instructions) Employer (See Instructions) College Counselor Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/11/2024 \$250.00 Gavin, Jim Contributor address; City; State; Zip Code Orange, CA 92865 Principal occupation / Job title (See Instructions) Employer (See Instructions) Writer Self Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/28/2024 \$100.00 Haram, Michele Contributor address; City; State; Zip Code Austin, TX 78749 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	The Instru	ction Guide explains how to com	1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/15				
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)		
	Swann, Stac	ey R. (Ms.)				00088236	,
4	Date	5 Full name of contributor 🔲 out-of	of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/01/2024	Hundley, Polly					\$50.00
	1	6 Contributor address; City; State; Zip C	Code				
		1					
	ļ	1					
		Austin, TX 78748			_		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Pharmacist			Novartis			
	Date	Full name of contributor out-of	of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/26/2024	Johnson, William					\$1,000.00
		Contributor address; City; State; Zip C	Code				
		1					
		1					
	1	Kyle, TX 78640					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Investor			Self			
╞	Date	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/01/2024	Lampasas County Democratic Par				.,	\$500.00
		Contributor address; City; State; Zip C					• - ·
	ļ		2000				
		1					
	ļ	Lampasas, TX 76550					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	-	-		• • •			
╞	Date	Full name of contributor 🛛 out-of	of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	McDowell, Jessica		/		,	\$30.00
	10, 20, 2	Contributor address; City; State; Zip C	Code				***
			Jue				
	ļ	1					
	ļ	Graham, TX 76450					
⊢	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions)		
	Pet Care Sei			Self			
⊨	Date	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/14/2024	McKim, Kristi		/		,	\$25.00
		Contributor address; City; State; Zip C	Code				·
	ļ		2006				
	ļ	1					
		Little Rock, AR 72205					
┢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions)		
	Professor	-		Hendrix College			
⊢			I	-			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/15		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Swann, Stac	ey R. (Ms.)			00088236	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/26/2024	McSwain, Sandra				\$100.00
		6 Contributor address; City; State; Zip Code				
		Brownwood, TX 76801				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	not employed	d	not employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/22/2024	Milfeld, Kent				\$40.00
		Contributor address; City; State; Zip Code		1		
		austin, TX 78759				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Research Sc	;ientist	University of Texas			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/18/2024	Oliver, Becka				\$300.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78723				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Non-profit		WLT			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/02/2024	Perri, Shannon				\$100.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78745	1	Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Marketing		Chris Perri Law			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	10/17/2024	Sailer, Cecily				\$25.00
		Contributor address; City; State; Zip Code				
		Auguin TV 7074E				
	D i sin diagon	Austin, TX 78745	Employer (See Instructions	Ĺ		
		pation / Job title (See Instructions)	5)			
	Creativity Co	,acn	self-employed			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A	\2
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	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/15			
2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Swann, Sta	cey R. (Ms.)			00088236		
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5	Date 10/21/2024	 Full name of contributor out-of-state PAC (ID#: Young County Democratic Association Contributor address; City; State; Zip Code Graham, TX 76450)	8	Amount of contribution (\$) \$750.00 Paid to print op ed authored by me into the Graham Leader and Jacksboro Newspaper		
10	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JU			
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)				
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)		
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

			EXPENDITURE (CATEGORIES FO	OR BO	DX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
			The Instruction Guide	e explains how to o	ompl	ete this form.					
1	Total pages Schedule F1:	2 FILEF	RNAME				3	Filer ID	(Ethics Commission Filers))	
	Sch: 1/7 Rpt: 9/15	Swai	nn, Stacey R. (Ms.)					00088236			
4	Date	5 Paye	e name								
	10/03/2024	Act E	llue								
6	Amount (\$)	7 Paye	e address; City;	State; Zip C	Code						
	\$250.00	ActB	ue Technical Services 36	6 Summer Stre	et						
		Som	erville, MA 02114								
8	PURPOSE	(a) Cater	Ory (See Categories listed at the to	an of this schodula)	(b)	Description					
			Repayment/Reimbursen			·	outsi	de of Texas. Com	plete Schedule T.		
	EXPENDITURE							officeholder living			
						Partial Reimb Blue, for GO			ue Horizon, through A	ct	
						Blue, IOI GO		ext banking			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate/Officeholder name	Office so	ought			Office he	ld		
	Date	Paye	e name								
	10/23/2024	Act E	lue								
	Amount (\$)	Paye	e address; City;	State; Zip C	Code						
	\$500.00	ActB	ue Technical Services 36	6 Summer Stre	et						
		Som	erville, MA 02114								
	PURPOSE OF		Ory (See Categories listed at the te		(b)	Description					
	EXPENDITURE		ributions/Donations Made lidate/Officeholder/Politic					de of Texas. Comp officeholder living			
				arcommitee					ough Act Blue for GO	тν	
						Texting			C C		
	Complete ONLY if direct	L Candic	ate/Officeholder name	Office so	ught			Office he	ld	\neg	
	expenditure to benefit C/OI	Н			0						
	Date	Pave	e name							=	
	10/26/2024	Act E									
	Amount (\$)		e address; City;	State; Zip C	`odo					_	
	\$110.40		ue Technical Services 36	•							
	φ110.40			o Summer Sue							
		Som	erville, MA 02114								
	PURPOSE	(a) Cateo	Ory (See Categories listed at the te	op of this schedule)	(b)	Description					
	OF EXPENDITURE	Fees						de of Texas. Com			
						Act Blue Perc		officeholder living			
							2011	ומשב רבצג, וו			
	Complete ON! V if direct	Condia	ato/Officabolder name	Office	u abt			Office be	ld		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate/Officeholder name	Office so	ugnt			Office he	au		
										-	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	EII ER NAME	3 Filer ID (Ethics Commission Filers)					
1	Sch: 2/7 Rpt: 10/15	Swann, Stacey R. (Ms.)	00088236					
	Date		0000200					
4	10/15/2024	Payee name Brown County Broadcasting						
_								
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code 300 Carnegie Boulevard Brownwood, TX 76801						
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 Digital Ads on koxe.com 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/15/2024	Brownwood News						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$695.00	114 Center Avenue, Suite 305 Brownwood, TX 76801						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense nd Advertorial					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/25/2024	Comanche Chief						
	Amount (\$) \$204.75	Payee address;City;State;ZipCode203 W Grand Ave						
		Comanche, TX 76442						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ad					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (I	Ethics Commission Filers)
	Sch: 3/7 Rpt: 11/15		Swann, Stacey R. (Ms.)					00088236	
4	Date	5	Payee name						
	10/18/2024		Constant Contact						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le			
	\$36.89		1601 Trapelo Road						
			Waltham, MA 02451						
8	PURPOSE OF	(a)	Category (See Categories listed at the	e top of this sche	edule)	(b) Description			
	EXPENDITURE		Advertising Expense					de of Texas. Complet	
							, 17,	officeholder living ex	pense
						CIUM			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C)ffice sou	Jht		Office held	
	Date		Payee name						
	10/25/2024		Eastland County News						
	Amount (\$)		Payee address; City;	State;	Zip Co	le			
	\$207.00		15 S Seaman St.						
			Eastland, TX 76448						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Advertising Expense	e top of this sche	edule)		, TX,	de of Texas. Complet , officeholder living ex	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Jht		Office held	
	Date		Payee name						
	10/15/2024		Gainesville Daily Register						
	Amount (\$)		Payee address; City;	State:	Zip Co	le			
	\$9.99		PO Box 309	O tato,	p 00				
			Gainesville, TX 76241						
	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Description			
	EXPENDITURE		Advertising Expense					de of Texas. Complet	
								officeholder living ex	
						And the purcha	ase	for social med	ua shahiy
			Non-dialata (Offill-l			- la 4		0#	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Int		Office held	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			nmittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
				le explains	how to cor	nplet	te this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID (Ethics Commission File	ers)
	Sch: 4/7 Rpt: 12/15		Swann, Stacey R. (Ms.)						00088236	
4	Date	5	Payee name							
	10/18/2024		Gainesville Daily Register							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le				
	\$475.00		PO Box 309		•					
			Gainesville, TX 76241							
_	5055005					<u> </u>				
8	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sch	edule)	(a) 1	Description	outei	de of Texas. Complete Schedule T.	
	EXPENDITURE		Advertising Expense			I			officeholder living expense	
						1	ш Newspaper A			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Dffice soug	jht			Office held	
	Date		Payee name							
	10/11/2024		Hotels.com							
	Amount (\$)		Payee address; City;	State:	; Zip Coo	le				
	\$710.70		5400 LBJ Freeway. Suite 50		, <u>Lip</u> 000					
	\$110.10		0400 Ebo Freeway. Gaile 00	0						
			Dallas, TX 75240							
	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sch	edule)	(b)	Description			
	EXPENDITURE		Travel In District			l			de of Texas. Complete Schedule T. , officeholder living expense	
						I			ville (high price due to OU Game	e)
										,
	Complete ONLY if direct		Candidate/Officeholder name		 Office soug	iht			Office held	
expenditure to benefit C/OH										
-	Date Pavee name									
	10/03/2024		Payee name Lamar Advertising							
_				Ctata	710 000	10				
	Amount (\$) \$1,500.00		Payee address; City;	State,	; Zip Coo	je				
	\$1,500.00		1112 W Commerce St							
			Brownwood, TX 76801							
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Advertising Expense			ļ			de of Texas. Complete Schedule T.	
						I	Billboard	, IX,	officeholder living expense	
							Dilibualu			
		Ļ	andidata/Offica halder ram-			ht			Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	jrit			Office held	
	-									

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reim Fees Office Overhead/Renta Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense nmittee Legal Services Salaries/Wages/Contra	I Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ct Labor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 5/7 Rpt: 13/15	Swann, Stacey R. (Ms.)	00088236				
4	Date	Payee name					
	10/21/2024	Lampasas Radio					
6	Amount (\$)	Payee address; City; State; Zip Code					
	\$220.00	505 N Key Ave					
		Lampasas, TX 76550					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if Austin, TX, officeholder living expense Letter/Ad in Radiogram Check if Austin, TX, officeholder living expense Letter/Ad in Radiogram							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/09/2024	REACH Progress PBC					
	Amount (\$)	Payee address; City; State; Zip Code					
\$200.00 4821 40th St Apt 1B							
		Sunnyside, NY 11104					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) For Relational Canvassing (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Relational Canvassing and Voter Outreach							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
Date Payee name							
	09/30/2024	United States Postal Service					
	Amount (\$) \$21.27	Payee address; City; State; Zip Code 11900 Jollyville Rd					
		Austin, TX 78759					
	PURPOSE OF EXPENDITURE		rription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense cage for postcards				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Exp Gift/Awards/Memor Legal Services	ense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/F rhead/R pense pense ages/Co	Reimbursement rental Expense		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 6/7 Rpt: 14/15	I		cey R. (Ms.)						00088236	
4	Date 10/01/2024		Payee name United State	es Postal Serv	/ice						
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de				
Ū	\$10.60		Austin, TX 7	ville Rd	State,	, 20 00					
8	PURPOSE OF EXPENDITURE		Category _{(Se} Advertising		at the top of this sch	iedule)			, тх,	officeholder living	plete Schedule T. J expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld
	Date		Payee name								
	10/04/2024		United State	es Postal Serv	/ice						
	Amount (\$) \$178.48		Payee addres		State;	; Zip Co	de				
			Austin, TX 7	78759							
	PURPOSE OF EXPENDITURE		Category _{(Se} Advertising		at the top of this sch	iedule)		Check if Austin,	, TX,	officeholder living	plete Schedule T. gexpense sh Cards to County
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Dffice sou	ght			Office he	eld
Date Payee name											
	10/10/2024			es Postal Serv							
	Amount (\$) \$5.46		Payee addres 11900 Jolly		State;	; Zip Co	de				
			Austin, TX 7	78759							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if Austin, TX, officeholder living expense Shipping post cards to volunteers						, expense					
L	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Dffice sou	ght			Office he	eld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Candidate/Officeholder Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Made By - Offit/Wavards/Memorials Expense Printing Expense Travel in District /Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule Sch: 7/7 Rpt: 15/	
4 Date 10/04/2024	5 Payee name Walgreens
10/04/2024	
6 Amount (\$) \$73	7 Payee address; City; State; Zip Code 3.00 Austin, TX 78759
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 Postcard Stamps
9 Complete <u>ONLY</u> if dia expenditure to benefi	
Date	Payee name
10/16/2024	Young County Dem Assc
Amount (\$) \$25(Payee address; City; State; Zip Code D.00 PO Box 91 Newcastle, TX 76327
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation for GOTV efforts in Young County
Complete <u>ONLY</u> if din expenditure to benefi	rect Candidate/Officeholder name Office sought Office held t C/OH