FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016982 3 COMMITTEE NAME **OFFICE USE ONLY** Jackson Walker L.L.P. Political Action Committee Date Received **ELECTRONICALLY FILED** 11/27/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 100 Congress Ave. #1100 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Jonathan NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Neerman CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 2323 Ross Avenue, Suite 600 STREET **ADDRESS** (Residence or Business) Dallas, TX 75201-2725 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address TX **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (214) 953-5822 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 10/26/2024 11/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Jackson Walker L.L.F	P. Political Action Commi	ttee	0001698	82
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Sarah Eckhardt State Senator	r	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	38,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	55,652.26
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	2,066.43
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all info under Title 15, Election Code.	erjury, that th rmation requi	e accompanying report is ired to be reported by me
		Mr. Jonath	nan Neerma	an
		Signature of Ca		
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _	,1	this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of c	officer administering oath
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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Jackson Walker L.L.P. Poli	itical Action Committe	ee		00016982	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Todd McCray Court Of Appeal	s, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Lori Massey Court Of Appeals,	Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Adrian Spears Court Of Appea	ls, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	applicable, classify by party.)				

L2 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Jackson Walker L.L.P. Polit	ical Action Committe	ee			00016982	
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	ed Justin Joch (Court Of Appeals, J	ustice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	I			
	2. Measures	A. Supporte	ed			
	(Describe by date and location of election and nature of issue.)					
		B. Opposed	I			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	Candidates	A. Supporte	ed Jessica Lewis	Court Of Appeals	Justice	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Jessica Lewis	Court Of Appeals	, ouslice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	I			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed			
		B. Opposed	I			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
ACTIVITY	Candidates (Identify by name or, if		ed Cynthia Barba	are Court Of Appea	als, Justice	
	applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	I			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed			
		B. Opposed	I			
	3. Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					

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12 COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
Jackson Walker L.L.P. Poli	itical Action Committ	tee				00016982	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Supported	Matthew Kolodos	ski Court Of Ap	peals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		В.	Opposed				
	2. Measures	Α. :	Supported				
	(Describe by date and location of election and nature of issue.)						
		В.	Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.))					
COMMITTEE	Candidates	!	Supported	Earl Jackson Co	ourt Of Anneals	Justice	
ACTIVITY	(Identify by name or, if applicable, classify by party.)			Lan dad Noon Co	ant or rippedies,	oustice	
(Attach lists on plain paper to complete this report if necessary.)		В.	Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	Α. :	Supported				
		В.	Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.))					
COMMITTEE	1. Candidates	\leftarrow	Supported	Gino Rossini Co	ourt Of Appeals.	Justice	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				art or Appoint,	0.00	
(Attach lists on plain paper to complete this report if necessary.)		В.	Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. :	Supported				
		В.	Opposed				
	3. Officeholders Assisted						
	(Identify by name or, if applicable, classify by party.))					

FORM MPAC

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Jackson Walker L.L.P. P	olitical Action Committ	ee			00016982	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mike Lee [District Judge		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)	,				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Toni Rose	State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Glenn Hega	ar Comptroller		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					

					Page 7 of 20
				13 Filer ID	(Ethics Commission Filers)
litical Action Committ	iee			00016982	
Candidates (Identify by name or, if applicable, classify by party.)		d Donna Howar	d State Represen	ntative	
	B. Opposed	ı			
Measures (Describe by date and location of election and	A. Supporte	ed			
nature or issue.)	B. Opposed	l			
3. Officeholders Assisted (Identify by name or, if					
	+	Cocor Planco	Ctata Danracant	ativo	
(Identify by name or, if		d Cesai Bianco	State Represent	ative	
	B. Opposed				
2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ıd			
	B. Opposed	1			
Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
Candidates (Identify by name or, if	A. Supporte	d Lois Kolkhorst	State Senator		
	B. Opposed	I			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	:d			
	B. Opposed	ı			
Officeholders Assisted (Identify by name or, if					
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.)	(Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 4. Supported (Identify by name or, if applicable, classify by party.) 5. A. Supported (Identify by name or, if applicable, classify by party.) 6. Opposed (Identify by name or, if applicable, classify by party.) 7. Candidates (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.) 8. Opposed (Identify by name or, if applicable, classify by party.)	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Describe by date and location of election and nature of issue.) B. Opposed A. Supported Cesar Blanco (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported Cesar Blanco Composed A. Supported Cesar Blanco A. Supported Cesar Blanco Composed A. Supported Donna Howard A. Supported Cesar Blanco Cesar Blanco A. Supported Doposed A. Supported Donna Howard A. Supported Cesar Blanco A. Supported Doposed A. Supported Doposed A. Supported Lois Kolkhorst A. Supported Donna Howard A. Supported	1. Candidates (identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (identify by name or, if applicable, classify by party.) 1. Candidates (identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported Cesar Blanco State Representational Cesar Blanco Stat	Ititical Action Committee 1. Candidates (deemity by name or, if applicable, classify by party) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (deemity by name or, if applicable, classify by party) 1. Candidates (deemity by name or, if applicable, classify by party) 3. Officeholders Assisted (deemity by name or, if applicable, classify by party) 4. Supported Cesar Blanco State Representative (deemity by name or, if applicable, classify by party) 5. Opposed 2. Measures (Describe by date and location of election and nature of issue.) 6. Opposed 3. Officeholders Assisted (deemity by name or, if applicable, classify by party) 6. Opposed 5. Opposed 4. Supported Cesar Blanco State Representative (deemity by name or, if applicable, classify by party) 6. Opposed 7. Candidates (deemity by name or, if applicable, classify by name or, if applicable, classify by party) 8. Opposed 7. Candidates (deemity by name or, if applicable, classify by party) 8. Opposed 8. Opposed 7. Candidates (deemity by name or, if applicable, classify by party) 8. Opposed 8. Opposed 7. Candidates (deemity by name or, if applicable, classify by party) 8. Opposed 8. Opposed 8. Opposed 8. Opposed

Jackson Walker L.L.P. Political Action Committee 00016982							Page 8 of 20
A Supported Charles Perry State Senator (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Cocyribe by date and location of direction and nature of drace) 3. Office-holders Assisted (Cocyribe by date and location of drace) 3. Office-holders Assisted (Cocyribe by date and location of drace) 3. Office-holders Assisted (Cocyribe by date and location of drace) 3. Office-holders Assisted (Cocyribe by date and location of drace) 4. Supported David Gunn Court Of Appeals, Justice (Cocyribe by date and location of drace) 5. Opposed 2. Measures (Cocyribe by date and location of drace) 2. Measures (Cocyribe by date and location of drace) 3. Office-holders Assisted (Contribe by date and location of drace) 4. Supported COMMITTEE ACTIVITY 2. Measures (Cocyribe by date and location of drace) 3. Office-holders Assisted (Contribe by date and location of drace) 4. Supported 5. Opposed 6. Opposed 6. Opposed 6. Opposed COMMITTEE ACTIVITY 2. Measures (Cocyribe by date and location of drace) (Altach lists on plain paper to complete this report if necessary.) 2. Measures (Cocyribe by date and location of drace) (Altach lists on plain paper to complete this report if necessary.) 3. Office-holders Activity 4. Supported 5. Opposed 6. Opposed 6. Opposed 6. Opposed	L2 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
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2. Measures Describe by date and return of deciden and return of d	14 COMMITTEE ACTIVITY	(Identify by name or, if		Charles Perry	State Senator		
Committee Comm	paper to complete this		B. Opposed				
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COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identity by name or, if applicable, classify by party.) COMMITTEE ACTIVITY COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported David Gunn Court Of Appeals, Justice B. Opposed A. Supported Describe		Assisted (Identify by name or, if					-
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and Inature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported (Katy Boatman Court Of Appeals, Justice (Identify by name or, if applicable, classify by party.) B. Opposed 4. Supported (Identify by name or, if applicable, classify by party.) B. Opposed (Identify by name or, if applicable, classify by party.) A. Supported (Katy Boatman Court Of Appeals, Justice (Identify by name or, if applicable, classify by party.) B. Opposed (Identify by name or, if applicable, classify by party.) B. Opposed (Identify by name or, if applicable, classify by party.) B. Opposed (Identify by name or, if applicable, classify by party.) B. Opposed (Identify by name or, if applicable, classify by party.) B. Opposed (Identify by name or, if applicable, classify by party.)		applicable, classify by party.)					
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(Obescribe by date and location of electron and nature of issue.) B. Opposed 3. Officeholders	paper to complete this		B. Opposed				
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paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if		Candidates (Identify by name or, if	A. Supported	Katy Boatman	Court Of Appeals	s, Justice	
(Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if	paper to complete this		B. Opposed				
3. Officeholders Assisted (Identify by name or, if		(Describe by date and location of election and	A. Supported				
Assisted (Identify by name or, if			B. Opposed				
applicable, classify by party.)		Assisted (Identify by name or, if					
		applicable, classify by party.)	<u>) </u>				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Jackson Walker L.L.P. Pol	itical Action Committe	.ee		00016982	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.))	Ryan Guillen State Represent	tative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Dan Patrick Lieutenant Gover	nor	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Joan Huffman State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	approach, stately by party,	<u>I</u>			

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Candidates (Identify by name or, if					
(Identify by name or, if				00016982	
applicable, classify by party.)		Cody Vasut	State Representativ	/e	
	B. Opposed				
Measures (Describe by date and location of election and nature of issue.)	A. Supported				
	B. Opposed				
3. Officeholders Assisted					
applicable, classify by party.)					
Candidates (Identify by name or, if applicable, classify by party.)		Dan Patrick	Lieutenant Governo	or	
	B. Opposed				
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
	B. Opposed				
3. Officeholders Assisted					
	(Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted	2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed	2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Dan Patrick Lieutenant Governor applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Dan Patrick Lieutenant Governor B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if election and nature of issue.)

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				11 of 20
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commission Filers)
Jac	ckson V	Valker L.L.P. Political Action Committee	00016982	,
10 50	HEDIIII	E SUBTOTALS		1
l		SCHEDULE		SUBTOTAL AMOUNT
- 147 (1	IVIL OI			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 38,500.00
				Φ σο,σσσ.σσ
		COLIEDURE AS, NON MONETARY (IN KIND) POLITICAL CONTRIBUTIONS		
2.	Ш	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		 \$
4.	П	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO)R	 \$
	<u> </u>	ORGANIZATION		_
_		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	
5.	Ш	LABOR ORGANIZATION		\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	П	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR	!	\$
l ''	ш	ORGANIZATION		3
8.	Ш	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	 \$
9.	П	SCHEDULE E: LOANS		 \$
				·
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 55,652.26
10.		SCHEDULE II. I SEITIGAL EAR ENDITORES I ROIMT SEITIGAL CONTRIBUTION	5	33,032.20
11.	Ш	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		 \$
12.	П	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	 \$
				Ť
1.2		COLIEDIUS EA. EVDENDITUDES MADE DV CDEDIT CADD		
13.	Ш	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	 \$
15.	П	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	 \$
	<u> </u>	10 FILER		<u> </u>
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	JLE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 12/20	
2	FILER NAME Jackson Wa	lker L.L.P. Political Action Committee		3	Filer ID (Ethics Commiss 00016982	sion Filers)
4	Date 11/06/2024					\$20,500.00
		Dallas, TX 75201				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#: Jackson Walker LLP Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$15,000.00
		Dallas, TX 75201	1	Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#: Jackson Walker LLP Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$3,000.00
		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	l 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: 1/8 Rpt: 13/20	Jackson Walker L.L.P. Political Action Committee 00016982
4 Date	5 Payee name
11/06/2024	Barbare, Cynthia
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	P. O. Box 26
Expenditure from corporate funds	Walnut Springs, TX 76690
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAFENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/12/2024	Blanco, Cesar
Amount (\$)	
\$1,500.00	P. O. Box 929
Expenditure from	
corporate funds	El Paso, TX 79946
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/18/2024	Boatman, Katy
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1347 Lamonte Lane
Ψ2,300.00	10 II Lamonto Lano
Expenditure from	
corporate funds	Houston, TX 77018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	1

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/8 Rpt: 14/20	Jackson Walker L.L.P. Political Action Committee 00016982
4 Date	5 Payee name
10/28/2024	Eckhardt, Sarah
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	P. O. Box 301586
Expenditure from corporate funds	Austin, TX 78703
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
	Campaign contribution
O Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/12/2024	Guillen, Ryan
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	5346 E. US Highway 83
	Building A, Suite 5-A
Expenditure from corporate funds	Rio Grande City, TX 78582
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
0 1: 0:11:24:4:1	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/18/2024	Gunn, David
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 684281
Expenditure from corporate funds	Austin, TX 78768
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: Sch: 3/8 Rpt: 15/20	2 FILER NAME Jackson Walker L.L.P. Political Action Committee 3 Filer ID (Ethics Commission Filers) 00016982
4 Date	5 Payee name
11/12/2024	Hegar, Glenn
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip CodeP. O. Box 1008
φ2,500.00	F. O. Bux 1000
Expenditure from corporate funds	Katy, TX 77492
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaign commoder
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
11/12/2024	Howard, Donna
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	P. O. Box 5375
Expenditure from corporate funds	Austin, TX 78763
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaign continuation
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Huffman, Joan
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	3733-W Westheimer #40
Expenditure from corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign continuution
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 Committee

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	
4 7	
1 Total pages Schedule F1: Sch: 4/8 Rpt: 16/20	2 FILER NAME Jackson Walker L.L.P. Political Action Committee 3 Filer ID (Ethics Commission Filers) 00016982
4 Date	5 Payee name
11/06/2024	Jackson, Earl
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	416 N. Belt Line Road #161
Expenditure from corporate funds	Irving, TX 75035
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
	Campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Davies same
	Payee name
11/06/2024	Koch, Justin
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	11700 Preston Road
- Evnanditura from	Suite 660, #328
Expenditure from corporate funds	Dallas, TX 75230
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign contribution
0 1 0 0 1 0 0 1 0 0 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/12/2024	Kolkhorst, Lois
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P. O. Box 2546
Expenditure from corporate funds	Brenham, TX 77834
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
	Campaign continuution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	y

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

Consuling 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)
Sch: 5/8 Rpt: 17/20	Jackson Walker L.L.P. Political Action Committee 00016982
4 Date	5 Payee name
11/06/2024	Kolodoski, Matthew
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	4900 Airport Parkway #367
Expenditure from corporate funds	Addison, TX 75001
8 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.
EXI ENDITORE	Candidate/Officeholder/Political Committee Campaign contribution
O Committee ONII V if allowed	Our History (Office health and a second to the second to t
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/06/2024	Lee, Mike
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	4441 Norris Street
Expenditure from corporate funds	Dallas, TX 75214
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 Campaign contribution
	Campaign contribution
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/06/2024	Lewis, Jessica
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	129 N. Collins Road
	Suite 2210
Expenditure from corporate funds	Sunnyvale, TX 75182
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee Campaign contribution
	Campaign contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OF	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

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: 6/8 Rpt: 18/20	Jackson Walker L.L.P. Political Action Committee 00016982
4 Date	5 Payee name
11/06/2024	Massey, Lori
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	522 Avenue A, Suite 1207e
Expenditure from corporate funds	San Antonio, TX 78215
8 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/06/2024	McCray, Todd
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P. O. Box 830804
Expenditure from	
corporate funds	San Antonio, TX 78283
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
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/18/2024	Patrick, Dan
Amount (\$)	Payee address; City; State; Zip Code
\$7,500.00	P. O. Box 685085
•	
Expenditure from corporate funds	Austin, TX 78768
•	1
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense

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

Fees Food/Beverage Expense Gift/Awards/Memorials 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: 7/8 Rpt: 19/20	Jackson Walker L.L.P. Political Action Committee 00016982
4 Date	5 Payee name
11/25/2024	Patrick, Dan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$652.26	P. O. Box 685085
— Forest dit us from	
Expenditure from corporate funds	Austin, TX 78768
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Food and beverage expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief of or	·
Date	Payee name
11/13/2024	Perry, Charles
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	P. O. Box 94896
Expenditure from corporate funds	Lubbock, TX 79493
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/12/2024	Rose, Toni
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	P. O. Box 41867
Expenditure from corporate funds	Dallas, TX 75241
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution
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 Committe 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	
1 Total pages Schedule F1:	
Sch: 8/8 Rpt: 20/20	Jackson Walker L.L.P. Political Action Committee 00016982
4 Date	5 Payee name
11/06/2024	Rossini, Gino
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	P. O. Box 170122
— Farantina tana	
Expenditure from corporate funds	Irving, TX 75017
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
	Campaign contribution
O Commission ONLL V if disease	Constitute / Office helder mores Office accords
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
11/06/2024	Spears, Adrian
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	2834 Sierra Salinas
Expenditure from	
corporate funds	San Antonio, TX 78259
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Data	B
Date	Payee name
11/20/2024	Vasut, Cody
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P. O. Box 2724
Expenditure from	
corporate funds	Angleton, TX 77516
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
	Campaign continuution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	