CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commiss 00067717	ion Filers)	2 Total pages fil	led: 21		
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE I	JSE ONLY		
OFFICEHOLDER NAME	The Honorable	Steven H.			Date Received			
					ELECTRONIC	ALLY FILED		
	NICKNAME	LAST		SUFFIX	01/13/2025			
	Steve	Toth						
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked		
OFFICEHOLDER MAILING ADDRESS	67 Chestnut Meadow Dr.				Receipt #	Amount		
Change of Address	Conroe, TX 77384							
enange of Auditors	Collide, 1X 11304				Date Processed			
					Date Imaged			
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-			
TREASURER NAME	Mr.	James P.						
	NICKNAME	LAST		SUFFIX				
		McCann						
C CAMPAIGN	CTREET ARRESC (ALC RO	DOV DI EACE	ADT	/ CUITE //	CT.	TE 70 000		
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO 596 Fairway Ct.	BOX PLEASE);	APT	/ SUITE #; CITY;	517	ATE; ZIP CODE		
(Residence or Business)	Conroe, TX 77302							
7 CAMPAIGN TREASURER	AREA CODE PHON (713) 822-2236	IE NUMBER E	EXTENSION					
PHONE	(. 25) 622 226							
8 REPORT TYPE	X January 15	30th day before	election F	Runoff	15th day after ca			
		8th day before e	election \square F	Exceeded modified	appointment (offi			
			ri	eporting limit				
9 PERIOD	Month Day Year			Month Day	Year			
COVERED	07/01/2024	TH	IROUGH	12/31/202	4			
10 ELECTION	ELECTION DATE			ELECTION TYPE				
	Month Day Year		rimary	Runoff	Other			
	11/05/2024	XG	eneral	Special				
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)			
	State Representative Distr	rict 15 Montgom		State Representa				
	GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 121

13 C / OH NAME	Toth, Steven H. (The	Honorable)	14 Filer ID (00067717	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political These expenditures may have been made officeholders are required to report this in	e without the candidate's or office	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
Ŭ ,	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER	NAME				
		COMMITTEE CAMPAIGN TREASURER	ADDRESS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTI ES OF LOANS, OR CONTRIBUTIONS M.		\$ 0.00			
	DF LOANS)	\$ 167,535.66					
EXPENDITURE TOTALS							
	4. TOTAL POLITIC		\$ 80,866.00				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS (RIOD	OF THE LAST DAY OF THE	\$ 113,401.72			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOTING PERIOD	DANS AS OF THE LAST DAY	\$ 0.00			
17 AFFIDAVIT			ler penalty of perjury, that the acc ncludes all information required to n Code.				
			The Honorable Steven H. Tot	h			
		Siç	gnature of Candidate or Officehol	der			
AFFIX NO	TARY STAMP / SEAL ABO	DVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
of	, 20, to ce	ertify which, witness my hand and seal of o	office.				
Signature of offi	cer administering	Printed name of officer administerin	g Title of office	r administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

		CC	OVER SHEET PG 3 3 of 121
18 FILER NAME		19 Filer ID 00067717	(Ethics Commission Filers)
20 SCHEDULE SUI	H. (The Honorable)	00007717	Τ
NAME OF SCHE			SUBTOTAL AMOUNT
1. X SC	HEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 167,535.66
2. SCI	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCF	HEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCF	\$		
5. X SC	HEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 80,866.00
6. SCF	HEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCF	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	ONS	\$
8. SCI	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCH	HEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCH	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$
11. SCF	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
	HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F FILER	RETURNED	\$ 58.12

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/31 Rpt: 4/121	
2	FILER NAME Toth, Steven	H. (The Honorable)		3	Filer ID (Ethics Commission 00067717	n Filers)
4	Date 09/03/2024	 Full name of contributor out-of-state PAC (ID#:_A&M PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 12/07/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$35.00
	Principal occu	The Woodlands, TX 77380 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		(======================================		,		
	Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:American Pharmacy GPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Corpus Cristi, TX 78401				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/06/2024	Full name of contributor out-of-state PAC (ID#: Americas Future Together / Hon Tom Graves Ch Contributor address; City; State; Zip Code Athens, GA 30605			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Anderson , Elibabeth Contributor address; City; State; Zip Code SHENANDOAH, TX 77381)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/31 Rpt: 5/121	
2	FILER NAME Toth, Steven	H. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067717	
4	Date 08/22/2024	 Full name of contributor		7	Amount of Contribution (\$) \$500.	00
_	Dringing Lagor	Houston , TX 77092	Control of Control	<u></u>		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#:_ Associated General Contractors of Texas PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000.	00
	Princinal occur	Austin, TX 78768 pation / Job title (See Instructions)	Employer (See Instructions	:\ 		
	i illicipai occu	sation, cop title (coe instructions)	Employer (dee mandenorie	',		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_BLACKRIDGE Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2,500.	00
		AUSTIN, TX 78701				
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Beck, Dubbs Contributor address; City; State; Zip Code The Woodlands, TX 77385			Amount of Contribution (\$) \$50.	00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_Bresnen, Steven Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$250.	00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	lete this forn	n.	1	Total pages Schedule A1: Sch: 3/31 Rpt: 6/121	
2	FILER NAME Toth, Steven	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 12/09/2024)	7	Amount of Contribution (\$)	\$1,000.00
_		The Woodlands, TX 77381					
8	retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 12/14/2024	Brown, Patricia				Amount of Contribution (\$)	\$50.00
	Principal occu	Huntsville, TX 77350 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
		(,		
	Date 09/06/2024	Full name of contributor out-of-sta COLE, ADAM Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$2,000.00
		Conroe, TX 77304					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions COLE HEALTHCARE	i)		
	Date 09/08/2024	Cherney, Jay				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 09/19/2024	Full name of contributor out-of-star Chevron Employees PAC Contributor address; City; State; Zip Code San Ramon, CA 94583	ate PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			I				

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDU	ILE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/31 Rpt: 7/121	
2	FILER NAME Toth, Steven	n H. (The Honorable)			3	Filer ID (Ethics Commiss 00067717	ion Filers)
4	Date 09/19/2024	5 Full name of contributorChevron Phillips Chemica6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$500.00
		The Woodlands, TX 7738	i				
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instruction	ns)		
	Date 12/07/2024	Full name of contributor Childs, Mary Contributor address; City; S	ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	North Richland Hills, TX 7 pation / Job title (See Instructions		Employer (See Instruction	ns)		
	Date 12/11/2024	Full name of contributor Church, Graham Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
		Conroe, TX 77384 pation / Job title (See Instructions	s)	Employer (See Instructio	ns)		
	Date 08/28/2024	Full name of contributor Conservative Republican: Contributor address; City; Si Houston , TX 77234		retired		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instruction	ns)		
	Date 12/03/2024	Full name of contributor Dyer, Don Contributor address; City; S Austin, TX 78731	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$10,000.00
	Principal occu Owner	pation / Job title (See Instructions	s)	Employer (See Instruction PJ's	ns)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ON:	5		SCHEDU	LE A1
	The Instru	ction Guide explains hov	v to complete this f	form).	1	Total pages Schedule A1: Sch: 5/31 Rpt: 8/121	
2	FILER NAME Toth, Steven	H. (The Honorable)				3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 09/01/2024	5 Full name of contributor EN PAC Texas	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$4,000.00
		DALLAS, TX 75201						
8	Principal occu	pation / Job title (See Instruction:	5)	9 1	Employer (See Instructions	s)		
	Date 09/14/2024	Full name of contributor Earnest, Kenneth Contributor address; City; S	·)		Amount of Contribution (\$)	\$500.00
	Principal occu	The Woodlands, TX 7738 pation / Job title (See Instructions		T 1	Employer (See Instructions	 ;)		
	Branch Man				Fisher Arnold	,		
	Date 12/05/2024	Full name of contributor Eaton, Elise Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
		The Woodlands, TX 7738	30					
	Principal occu	pation / Job title (See Instructions	s)	E	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor Eiland, Craig Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction:	5)		Employer (See Instructions	5)		
	Date 09/12/2024	Full name of contributor Eisler, Robert Contributor address; City; S The Woodlands, TX 7738)		Amount of Contribution (\$)	\$500.00
	Principal occu Pres	pation / Job title (See Instructions	5)		Employer (See Instructions Eisler Consulting	5)		
				1				

	MONET	ARY POLITICAL (CONTRIBUTIO	N			SCHEDUI	LE A1
	The Instru	ction Guide explains hov	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 6/31 Rpt: 9/121	
2	FILER NAME Toth, Steven	n H. (The Honorable)				3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 11/23/2024	5 Full name of contributorElswick, Roger6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
		Houston, TX 77068						
8	Principal occu Owner	pation / Job title (See Instructions	5)	9	Employer (See Instructions Community Toyota	s)		
	Date 09/16/2024	Full name of contributor Erben & Yarbrough Contributor address; City; S	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	5)		Employer (See Instructions	 s)		
	Date 12/14/2024	Full name of contributor Farries, Kathryn Contributor address; City; S Spring, TX 77381	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions retired	<u> </u>		
	Date 11/30/2024	Full name of contributor Farris, Deborah Contributor address; City; S Conroe, TX 77302	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>(</u> 5)		
	Date 10/30/2024	Full name of contributor Farris, Deborah Contributor address; City; S Conroe, TX 77302	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/31 Rpt: 10/121	
2	FILER NAME Toth, Stever	H. (The Honorable)		3	Filer ID (Ethics Commission 00067717	ı Filers)
4	Date 09/30/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Conroe, TX 77302 pation / Job title (See Instructions)	9 Employer (See Instructions)) ;)		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_ Farris, Deborah Contributor address; City; State; Zip Code Conroe, TX 77302			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Date 07/30/2024	Full name of contributor out-of-state PAC (ID#:_ Farris, Deborah Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Conroe, TX 77302 pation / Job title (See Instructions)	Employer (See Instructions)	s)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_Fawn, Ken Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occurretired	Magnolia, TX 77354 pation / Job title (See Instructions)	Employer (See Instructions retired	<u> </u> 5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Flora, Dave Contributor address; City; State; Zip Code Montgomery, TX 77316)		Amount of Contribution (\$)	\$500.00
	Principal occu Pilot	pation / Job title (See Instructions)	Employer (See Instructions) United	5)		

	MONET	ARY POLITICAL C	CONTRIBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 8/31 Rpt: 11/121	
2	FILER NAME Toth, Stever	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 09/07/2024	5 Full name of contributor Flora, Dave6 Contributor address; City; State)	7	Amount of Contribution (\$)	\$2,000.00
		Montgomery, TX 77316					
8	Principal occu Pilot	pation / Job title (See Instructions	9	Employer (See Instructions United	5)		
	Date 09/06/2024	Full name of contributor Fordyce, Tommy Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	Huntsville, TX 77320 pation / Job title (See Instructions)	Employer (See Instructions retired	<u> </u> s)		
	Date 09/06/2024	Full name of contributor Fort, Donna Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	The Woodlands, TX 77382 pation / Job title (See Instructions		Employer (See Instructions	 - s)		
	Date 12/05/2024	Full name of contributor Frank, Jay Contributor address; City; St. Spring, TX 77382	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/01/2024	Full name of contributor Gastineau, Paul Contributor address; City; St Magnolia, TX 77355	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions		Employer (See Instructions retired	5)		
			.				

	MONET	ARY POLITICAL CONTRIB	UTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete	this forr	n.	1	Total pages Schedule A1: Sch: 9/31 Rpt: 12/121	
2	FILER NAME Toth, Steven	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 12/13/2024	 Full name of contributor out-of-state PA Gastineau, Paul Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_	Deignigal	Magnolia, TX 77355	lo.	Franks or (Cook batturations			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
	Date 09/06/2024	Full name of contributor out-of-state PA Gibbs, Shelly Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	The Woodlands, TX 77380 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Retired	,		Retired	,		
	Date 12/13/2024	Full name of contributor out-of-state PA Gonzalez, Edward Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$5,000.00
		The Woodlands, TX 77382					
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions self employed	s)		
	Date 10/21/2024	Full name of contributor out-of-state PAGore, Rex Contributor address; City; State; Zip Code Austin, TX 78709)		Amount of Contribution (\$)	\$1,200.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAGray, Brady Contributor address; City; State; Zip Code Brock, TX 76087)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			'				

	MONET	ARY POLITICAL CONTRIBUTION	NS	SCHEDULE A1	
	The Instru	ction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: Sch: 10/31 Rpt: 13/121	
2	FILER NAME Toth, Stever	H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067717	
4	Date 12/06/2024	 Full name of contributor)	7 Amount of Contribution (\$) \$50.	00
8	Principal occu	Magnolia, TX 77354 pation / Job title (See Instructions)	Employer (See Instructions)		
•	Principal occu		Employer (See Instructions,		
	Date 12/14/2024	Full name of contributor)	Amount of Contribution (\$) \$25.	00
	Principal occu	Bee Cave, TX 78738 pation / Job title (See Instructions)	Employer (See Instructions)	s)	
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_Grohoski, Gregory Contributor address; City; State; Zip Code Bee Cave, TX 78738)	Amount of Contribution (\$) \$25.	00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>I</u> s)	
	Date 08/03/2024	Full name of contributor out-of-state PAC (ID#: Gulf States Toyota Inc, State PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000	00
	Principal occu	Houston, TX 77077 pation / Job title (See Instructions)	Employer (See Instructions)	s)	
	Date 12/07/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$) \$100.	00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	s)	

	MONET	ARY POLITICAL CON	TRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to co	mplete this fo	rm.	1	Total pages Schedule A1: Sch: 11/31 Rpt: 14/121	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Toth, Stever	H. (The Honorable)				00067717	
4	Date 09/04/2024	5 Full name of contributor ut-	of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
		6 Contributor address; City; State; ZipAUSTIN, TX 78701	Code				
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	·	,			,		
	Date	Full name of contributor	of-state PAC (ID#:	,		Amount of Contribution (\$)	
	12/03/2024	HOME PAC OF TEXAS	1 AC (1D#			Amount of Continuation (4)	\$500.00
	12/00/2024	Contributor address; City; State; Zip	Codo				φοσο.σσ
		Continuator address, City, State, 21p	Code				
		AUSTIN, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-	of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/06/2024	Hagerman, John	,			`,	\$2,000.00
		Contributor address; City; State; Zip	 Code				
		, , , , , , , , , , , , , , , , , , ,					
		Spring, TX 77386					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Attorney			Self Employed			
	Date	Full name of contributor out-	of-state PAC (ID#:			Amount of Contribution (\$)	
	07/01/2024	Haring, Angeline					\$100.00
		Contributor address; City; State; Zip	Code				
		Bellville, OH 44813					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor uut-	of-state PAC (ID#:			Amount of Contribution (\$)	
	12/05/2024	Harrelson, Amy					\$50.00
		Contributor address; City; State; Zip					
		Fairhope, AL 36532					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/31 Rpt: 15/121	
2	FILER NAME Toth, Stever	H. (The Honorable)		3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 12/05/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Spring, TX 77386 pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#:_ Harris, Jeff Contributor address; City; State; Zip Code Spring, TX 77381			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Heiser, Cindy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	The Woodlands, TX 77382 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/21/2024	Full name of contributor out-of-state PAC (ID#:_ Hetland, Donna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occuretired	The Woodlands, TX 77380 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Hoover, Shannon Contributor address; City; State; Zip Code Spring, TX 77386			Amount of Contribution (\$)	\$1,000.00
	Principal occu Technician	pation / Job title (See Instructions)	Employer (See Instructions) Exxon)		

	MONET	ARY POLITICAL (CONTRIBUTIC	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/31 Rpt: 16/121	
	FILER NAME Toth, Stever	ı H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	n Filers)
	Date 11/14/2024	 Full name of contributor Houston Police Retired O Contributor address; City; St 			7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Houston, TX 77219 pation / Job title (See Instructions	·)	9 Employer (See Instructions	 - s)		
	Date 09/18/2024	Full name of contributor IBAT PAC Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Date 12/05/2024	Full name of contributor Jones, Karen Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	The Woodlands, TX 7738 pation / Job title (See Instructions		Employer (See Instructions	 i)		
	Date 12/14/2024	Full name of contributor Juneau, Holly Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu	Porter, TX 77365 pation / Job title (See Instructions)	Employer (See Instructions	 - s)		
	Date 10/20/2024	Full name of contributor Kaufman, George Contributor address; City; St				Amount of Contribution (\$)	\$400.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions The Woodlands Eye As:		iates	

	MONET	ARY POLITICAL CONTRI	витю	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to comple	ete this fo	orm.	1	Total pages Schedule A1: Sch: 14/31 Rpt: 17/121	
2	FILER NAME Toth, Steven	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 12/05/2024				7	Amount of Contribution (\$)	\$50.00
_		Magnolia, TX 77355			L		
8	Principal occu misc	pation / Job title (See Instructions)		9 Employer (See Instructions misc	5)		
	Date 08/28/2024	Kickapoo traditional Tribe of Texas Op				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Date 12/03/2024	Full name of contributor out-of-state LAW PAC Contributor address; City; State; Zip Code	e PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	?) 		
	i illoipai ooda			Employor (Goo mondonone	<i>''</i>		
	Date 09/12/2024	Lavigne, Albert	e PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 11/21/2024	Full name of contributor out-of-state Lawrence, Steve Contributor address; City; State; Zip Code The Woodlands, TX 77381				Amount of Contribution (\$)	\$42.00
	Principal occu retired	oation / Job title (See Instructions)		Employer (See Instructions retired	s)		

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 15/31 Rpt: 18/121	
2	FILER NAME Toth, Steven	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 10/21/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$42.00
8	Principal occu	The Woodlands, TX 77381 pation / Job title (See Instructions)	9	Employer (See Instructions	;) 		
	retired	panon, cos uno (cos monacuono,		retired	-,		
	Date 09/21/2024	Full name of contributor out-of-state PAC (ID#:_ Lawrence, Steve Contributor address; City; State; Zip Code	••••)	•	Amount of Contribution (\$)	\$42.00
		The Woodlands, TX 77381					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID#:_ Lawrence, Steve Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$42.00
		The Woodlands, TX 77381					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 07/21/2024	Full name of contributor out-of-state PAC (ID#:_Lawrence, Steve Contributor address; City; State; Zip Code The Woodlands, TX 77381)		Amount of Contribution (\$)	\$42.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_Liberty Belles Republican Women Contributor address; City; State; Zip Code Conroe, TX 77305				Amount of Contribution (\$)	\$1,200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
		•	1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/31 Rpt: 19/121	
2	FILER NAME Toth, Stever	H. (The Honorable)		3	Filer ID (Ethics Commission 00067717	n Filers)
4	Date 12/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78760 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Lopez, Kaden Contributor address; City; State; Zip Code Weatherford, TX 76086			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#: Lora, Oliver Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Wilis, TX 77318 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Marling, Robert Contributor address; City; State; Zip Code The Woodlands, TX 77380			Amount of Contribution (\$)	\$5,000.00
	Principal occu Chairman	pation / Job title (See Instructions)	Employer (See Instructions Woodforest Bank)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 17/31 Rpt: 20/121	
2	FILER NAME Toth, Steven	H. (The Honorable)		3	Filer ID (Ethics Commission 00067717	n Filers)
4	Date 12/02/2024	 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin , TX 78703 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: Mechaley, Gloria Contributor address; City; State; Zip Code The Woodlands, TX 77380			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 07/18/2024	Full name of contributor out-of-state PAC (ID#: Mensio, Ken Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	The Woodlands, TX 77382 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/13/2024	Full name of contributor out-of-state PAC (ID#: Moak Casey PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#: Moak Casey PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: Sch: 18/31 Rpt: 21/121
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Toth, Stever	H. (The Honorable)		00067717
4	Date 09/05/2024	5 Full name of contributor out-of-state PAC (ID#: Montgomery, Thad)	7 Amount of Contribution (\$) \$2,000.00
		6 Contributor address; City; State; Zip Code		
		Spring, TX 77386		
8	Principal occu Owner	pation / Job title (See Instructions)	9 Employer (See Instructions Sumtime Investments	5)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$) \$50.00
	12/15/2024 Moss, Bettie			\$50.00
		Contributor address; City; State; Zip Code		
		Spring, TX 77386		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	12/11/2024	Munich, John		\$200.00
		Contributor address; City; State; Zip Code		
		The Woodlands, TX 77381		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I S)
	Date	Full name of contributor X out-of-state PAC (ID#:C	00366559	Amount of Contribution (\$)
	08/26/2024	NRG Energy INC Political Action Committee		\$1,000.00
		Contributor address; City; State; Zip Code		
		Princeton, NJ 08540		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	09/16/2024	Nash, Jerry		\$500.00
		Contributor address; City; State; Zip Code		
		Montgomery, TX 77316		
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Retired	

	MONET	ARY POLITICAL CONTRIBUT	ION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete thi	s for	m.	1	Total pages Schedule A1: Sch: 19/31 Rpt: 22/121	
2	FILER NAME Toth, Steven	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 12/14/2024	 Full name of contributor out-of-state PAC (ID Navolio, Mike Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$100.00
_	Deinainal accu	The Woodlands, TX 77382	10	Franks or (Cook both stice			
8	retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 09/02/2024	Full name of contributor)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Spring, TX 77382 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Employee	,,		Mighty Oaks	,		
	Date 12/14/2024	Full name of contributor	D#:			Amount of Contribution (\$)	\$50.00
		Spring, TX 77380					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (IE Nuckolls, Michelle Contributor address; City; State; Zip Code The Woodlands, TX 77380			•	Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (IE Oates, Kathleen Contributor address; City; State; Zip Code Magnolia, TX 77354				Amount of Contribution (\$)	\$1,000.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)		

	MONET	ARY POLITICAL CONTRIBU	JTIONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 20/31 Rpt: 23/121
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Toth, Stever	H. (The Honorable)		00067717
4	Date 09/06/2024	5 Full name of contributor out-of-state PA Odenweller, Keith	.C (ID#:)	7 Amount of Contribution (\$) \$1,000.00
		6 Contributor address; City; State; Zip Code		
		Spring, TX 77386		
8	Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Integra Management C	
	Date	Full name of contributor out-of-state PA	.C (ID#:)	Amount of Contribution (\$)
	09/06/2024	Oliverson, Ray		\$350.00
		Contributor address; City; State; Zip Code		
		The Woodlands, TX 77382		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Date	Full name of contributor uut-of-state PA	.C (ID#:)	Amount of Contribution (\$)
	10/05/2024 Oliverson, Ray			\$650.00
		Contributor address; City; State; Zip Code		
	Dringinal occu	The Woodlands, TX 77382 pation / Job title (See Instructions)	Employer (See Instructions	
	- Fillicipai occu	pation / 300 title (See instructions)	Employer (See instructions	
	Date	Full name of contributor ut-of-state PA	.C (ID#:)	Amount of Contribution (\$)
	08/26/2024	Patton, Cathy Contributor address; City; State; Zip Code		\$250.00
		Houston, TX 77024		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Date	Full name of contributor uut-of-state PA	.C (ID#:)	Amount of Contribution (\$)
	12/06/2024	Pedraza, Luis		\$100.00
		Contributor address; City; State; Zip Code		
		Conroe, TX 77301		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	; s)
			•	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/31 Rpt: 24/121	
2	FILER NAME Toth, Steven	n H. (The Honorable)		3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 10/02/2024	 Full name of contributor out-of-state PAC (ID#:_PharmPAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Fillicipal occu	pation / 300 title (3ee instructions)	Employer (See Instructions	,		
	Date 08/13/2024	Full name of contributor x out-of-state PAC (ID#:_Phillips 66 PAC Contributor address; City; State; Zip Code	C00513549)		Amount of Contribution (\$)	\$1,000.66
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions)		
		,	[
	Date 09/06/2024	Full name of contributor out-of-state PAC (ID#:_ Phillips, Cyndie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00
		Magnolia, TX 77354				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Phillips, Cyndie Contributor address; City; State; Zip Code Magnolia, TX 77354)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_ Posey Law Firm Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this for	m.	1 Total pages Schedule A1: Sch: 22/31 Rpt: 25/121		
2	FILER NAME Toth, Stever	H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067717	_	
4	Date 12/12/2024	 Full name of contributor		7 Amount of Contribution (\$) \$50.00)	
8	Pearland, TX 77581 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)				_	
_	Date Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	=	
	12/12/2024 Railey, Lisa Contributor address; City; State; Zip Code		\$200.00)		
	Principal occu	Montgomery, TX 77316 pation / Job title (See Instructions)	Employer (See Instructions))	_	
Date Full name of contributor out-of-state PAC (ID#:) 09/06/2024 Riggle, Stephen Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,000.00	-			
	Dringinal occu	Spring, TX 77381 pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	_	
	Senior Pasto		Grace Church)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#: SHIRLEY, CHARLES Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$25.00)	
	Principal occu	SPRING, TX 77386 pation / Job title (See Instructions)	Employer (See Instructions))	_	
Date Full name of contributor out-of-state PAC (ID#:) 12/05/2024 Sanders, Mike Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00	=			
	Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions))	_	

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/31 Rpt: 26/121
2	FILER NAME Toth, Stever	H. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067717
4	Date 12/14/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$100.00
0	Dringing occur	Spring, TX 77380	0 Employer (See Instructions		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2024 Smith, Chuck Contributor address; City; State; Zip Code Spring, TX 77381			Amount of Contribution (\$) \$10,000.00	
	Principal occupation / Job title (See Instructions) Owner Employer (See Instructions CFS Consulting LLC			<u> </u> 5)	
	Date Full name of contributor out-of-state PAC (ID#:) 09/06/2024 Smith, Jerry Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00	
	Principal occuretired	Montgomery, TX 77316 pation / Job title (See Instructions)	Employer (See Instructions retired	<u> </u> 5)	
Date Full name of contributor out-of-state PAC (ID#:) Smith, Rebecca Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$500.00	
	Principal occu	The Woodlands, TX 77381 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)	
Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Sommer, Steve Contributor address; City; State; Zip Code SPRING, TX 77388			Amount of Contribution (\$) \$500.00		
	Principal occupation / Job title (See Instructions) Mechanical Engineer Employer (See Instructions) Reliable EDM			5)	
Wiconamical Engineer Reliable EDM					

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 24/31 Rpt: 27/121	
2	FILER NAME Toth, Steven	ı H. (The Honorable)				3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 11/14/2024	5 Full name of contributor Sommer, Steve6 Contributor address; City; St	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$500.00
8	Principal occu	SPRING, TX 77388 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Mechanical Engineer Reliable EDM		Reliable EDM					
Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Sommer, Steve Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$500.00				
	SPRING, TX 77388							
	Principal occupation / Job title (See Instructions) Employer (See Instructions)			s)				
Mechanical Engineer Reliable EDM		_						
	Date O9/14/2024 Full name of contributor Out-of-state PAC (ID#:) Sommer, Steve Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00			
		SPRING, TX 77388						
	Principal occu Mechanical I	pation / Job title (See Instructions Engineer			Employer (See Instructions Reliable EDM	s)		
Date Full name of contributor out-of-state PAC (ID#:) 09/06/2024 Speer, Barbara Contributor address; City; State; Zip Code Spring, TX 77386			Amount of Contribution (\$)	\$1,000.00				
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions UT MD Anderson	5)		
Date 12/14/2024 Staines, Sonja Contributor address; City; State; Zip Code Conroe, TX 77385		•	Amount of Contribution (\$)	\$25.00				
	Principal occupation / Job title (See Instructions) Employer (See Instructions)			5)				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 25/31 Rpt: 28/121	
2	FILER NAME Toth, Stever	H. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067717	
4	Date 12/07/2024	 Full name of contributor out-of-state PAC (ID#:_Staines, Sonja Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$) \$25.00	
_	Dein ein al. a ann	Conroe, TX 77385	To Freehouse (Ossalas Assatisas			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Stringer, Lisa Contributor address; City; State; Zip Code Houston, TX 77044			Amount of Contribution (\$) \$50.00		
	Principal occupation / Job title (See Instructions) Employer (See Instruction					
Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Summerlin Jr, Joe Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00			
	Principal occu	Spring, TX 77381 pation / Job title (See Instructions)	Employer (See Instructions	j)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_Sumners, Jose Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$25.00	
	Principal occu	Conroe, TX 77301 pation / Job title (See Instructions)	Employer (See Instructions	j)		
Date Full name of contributor out-of-state PAC (ID#:) 07/10/2024 TEXANS FOR LAWSUIT REFORM PAC Contributor address; City; State; Zip Code AUSTIN, TX 78701			Amount of Contribution (\$) \$15,000.00			
Principal occupation / Job title (See Instructions) Employer (See Instructions)				<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this for	rm.	1	Total pages Schedule A1: Sch: 26/31 Rpt: 29/121	
2	FILER NAME Toth, Steven	H. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067717	
4	Date 09/04/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$10,000.00	
8	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
_	Date Full name of contributor out-of-state PAC (ID#:) 11/07/2024 TEXANS FOR LAWSUIT REFORM PAC				Amount of Contribution (\$) \$2,500.00	
	Contributor address; City; State; Zip Code				42,500,00	
	AUSTIN, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Date Full name of contributor out-of-state PAC (ID#:) 12/08/2024 TIBBS, DENNIS Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$50.00			
		MAGNOLIA, TX 77354				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/06/2024	Full name of contributor out-of-state PAC (ID#: TIBBS, DENNIS Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$100.00	
	Principal occu	MAGNOLIA, TX 77354 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/08/2024	Full name of contributor out-of-state PAC (ID#: TIBBS, Pat)		Amount of Contribution (\$) \$50.00	
		Contributor address; City; State; Zip Code MAGNOLIA, TX 77354				
	Principal occupation / Job title (See Instructions) Employer (See Instructions)					

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 27/31 Rpt: 30/121	
2	FILER NAME Toth, Steven	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 12/05/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$100.00
8	ALPHARETTA, GA 30009-8760 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			Employer (See Instructions	;) 		
Ü	retired retired				"		
	Date Full name of contributor out-of-state PAC (ID#:) 09/13/2024 TX Academy of Audiology PAC Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$500.00		
	College Station, TX 77845						
Principal occupation / Job title (See Instructions) Employer (See Instruction				s)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/11/2024 TXCPA PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
		Addison, TX 75001					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/27/2024	Full name of contributor out-of-state PAC (ID#:_ Texans For Conservative Leadership PAC Contributor address; City; State; Zip Code Fort Worth, TX 76126)	•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association for Home Care and Hospice, Contributor address; City; State; Zip Code Austin, TX 78759			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	LE A1
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 28/31 Rpt: 31/121	
2	FILER NAME Toth, Stever	H. (The Honorable)			3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 10/08/2024	5 Full name of contributorTexas Dairymen PAC6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78711					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
Date O9/03/2024 Full name of contributor out-of-state PAC (ID#:) Texas Oil And Gas Association Good Government Committee Contributor address; City; State; Zip Code Austin , TX 78701			•	Amount of Contribution (\$)	\$1,000.00		
Principal occupation / Job title (See Instructions) Employer (See Instruction				5)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/03/2024 Texas Optometric PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
_	Principal occu	Austin, TX 78705 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> S)		
	Date 09/14/2024	Full name of contributor Texas Trial Lawyers Asso Contributor address; City; S Austin, TX 78701			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/19/2024 Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701				Amount of Contribution (\$)	\$1,500.00	
	Principal occupation / Job title (See Instructions) Employer (See Instructions)			5)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 29/31 Rpt: 32/121	
2	FILER NAME Toth, Steven	ı H. (The Honorable)				3	Filer ID (Ethics Commission 00067717	on Filers)
4	Date 09/27/2024	5 Full name of contributor Till, Michael 6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$20,000.00
_	Spring, TX 77382			_				
8	retired	pation / Job title (See Instructions	5)	9	Employer (See Instructions retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/05/2024 Toth, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00			
	Victor, TX 14564 Principal occupation / Job title (See Instructions) Employer (See Instructions			 s)				
	CEO Toth's Sports		,					
	Date Full name of contributor out-of-state PAC (ID#:) 12/06/2024 Toth, Samuel Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$300.00			
		Charlotte, NC 28278						
	Principal occu retired	pation / Job title (See Instructions	s) 		Employer (See Instructions retired	s)		
Date Full name of contributor X out-of-state PAC (ID#: C00525055) 12/02/2024 TransCanada USA Services, Inc PAC Contributor address; City; State; Zip Code Washington, DC 20005		525055)		Amount of Contribution (\$)	\$1,000.00			
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
Date Full name of contributor out-of-state PAC (ID#:) 09/16/2024 Valdez, Jerry Contributor address; City; State; Zip Code Austin, TX 78711			Amount of Contribution (\$)	\$250.00				
	Principal occu Bus Owner/0	pation / Job title (See Instructions Consultant	S)		Employer (See Instructions Self Employed	5)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 30/31 Rpt: 33/121		
2	FILER NAME Toth, Steven	ı H. (The Honorable)				3	Filer ID (Ethics Commission 00067717	on Filers)	
4	Date 12/14/2024	5 Full name of contributorVan Tronk, John6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00	
_	Conroe, TX 77384			Faralana (Cara la structiona					
8	retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Watford, Carol Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,500.00				
	Spring, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions)) 				
	retired retired		',						
	Date Full name of contributor out-of-state PAC (ID#:) 08/26/2024 Wessel, Cheryl Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00				
		Willis, TX 77318							
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	5)			
Date Full name of contributor out-of-state PAC (ID#:) 12/05/2024 Williams, Herschel Contributor address; City; State; Zip Code Montgomery, TX 77356			Amount of Contribution (\$)	\$50.00					
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 12/10/2024 Williamson, Kirk Contributor address; City; State; Zip Code The Woodlands, TX 77382			Amount of Contribution (\$)	\$500.00				
	Principal occu COO	pation / Job title (See Instructions	5)		Employer (See Instructions Adair Concepts	5)			

TARY POLITICAL CONTRIBU	SCHEDULE A1	
uction Guide explains how to complete th	1 Total pages Schedule A1: Sch: 31/31 Rpt: 34/121	
n H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067717
		7 Amount of Contribution (\$) \$2,500.00
Austin, TX 78701	,	
upation / Job title (See Instructions)	9 Employer (See Instructions	5)
	totion Guide explains how to complete the second of the se	The Honorable H

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	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: 1/85 Rpt: 35/121	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/03/2024	3rd Coast BBQ
6	Amount (\$) \$207.84	7 Payee address; City; State; Zip Code 25219 Oakhurst Dr
		Spring, TX 77386
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch with staff
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/03/2024	Amazon.com
	Amount (\$) \$49.98	Payee address; City; State; Zip Code 410 Terry Ave
		Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign material
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	Amazon.com
	Amount (\$) \$25.54	Payee address; City; State; Zip Code 410 Terry Ave
		Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ponchos for campaign workers
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to cor	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/85 Rpt: 36/121	Toth, Steven H. (The Honorable)		00067717
4	Date	5 Payee name		<u> </u>
	10/30/2024	Amazon.com		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$134.90	410 Terry Ave		
		Seattle, WA 98109		
8	PURPOSE OF		(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				wet weather ware for campaign workers
9	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/Ol	1		
	Date	Payee name		
	11/12/2024	Amazon.com		
	Amount (\$)	Payee address; City; State; Zip Cod	de	
	\$40.93	410 Terry Ave		
		Seattle, WA 98109		
	PURPOSE OF	2 ((b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
				Campaign materials
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
	experientare to benefit 6/61	'		
	Date	Payee name		
	11/01/2024	Amazon.com		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$168.62	410 Terry Ave		
		Coottle WA 00100		
	BURBOCE	Seattle, WA 98109	/h.\	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overfleau/Refital Expense		Check if Austin, TX, officeholder living expense
				Campaign rain gear
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office souç	ght	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 3/85 Rpt: 37/121	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/05/2024	Amazon.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$171.32	410 Terry Ave
		Seattle, WA 98109
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.
		Check if Austin, TX, officeholder living expense Campaign app
		Campaign app
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/04/2024	Amazon.com
H	Amount (\$)	Payee address; City; State; Zip Code
	\$24.77	410 Terry Ave
		Seattle, WA 98109
	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 phone app
		Campaign phone app
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	11/25/2024	Amazon.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.98	410 Terry Ave
		, and the second
		Seattle, WA 98109
Г	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 materials
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
ı		

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	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/85 Rpt: 38/121	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/11/2024	Andreski, Gage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$247.50	17152 Gleneagle Dr South
		Conroe, TX 77385
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	07/02/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 App for campaign phone
		7 to campaign phone
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/02/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.46	9600 Lake Robbins Dr
	, ,	
		The Woodlands, TX 77380
	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
		App for campaign phone
	Complete ONII V if allows	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

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		Legal Services			se s/Contract Labor		OTHER (enter a	category not listed above)	
			The Instruction Guid	e explains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAME	Ξ				3	Filer ID	(Ethics Commission F	ilers)
	Sch: 5/85 Rpt: 39/121	Toth, Steve	n H. (The Honoral	ole)				00067717		
4	Date	5 Payee name								
	07/05/2024	Apple Store								
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$10.76	9600 Lake	Robbins Dr							
		The Woodl	ands, TX 77380							
8	PURPOSE				(b)	Description				
ľ	OF		ee Categories listed at the head/Rental Expe		(5)	_ :	outsi	de of Texas. Com	iplete Schedule T.	
	EXPENDITURE	Onice Over	nead/Nental Expe	1130				officeholder living		
						App for camp	aig	n Phone		
9	Complete ONLY if direct		iceholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	1								
	Date	Payee name								
	07/08/2024	Apple Store	<u> </u>							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$12.90	9600 Lake	Robbins Dr							
		The Woodl	ands, TX 77380							
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE		head/Rental Expe			Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE		·			ш		officeholder living		
						Digital policy	boo	ok for camp	aign	
					<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sou	ıght			Office h	eld	
	Date	Payee name								
	07/22/2024	Apple Store	9							
	Amount (\$)	Payee addre	•	State; Zip Co	ode					
	\$9.99	9600 Lake	Robbins Dr							
		The Woodl	ands, TX 77380							
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE		head/Rental Expe			ш			plete Schedule T.	
	ZA ZHOHOKZ							officeholder living		
						Storage for ca	aIII	paign phone	=	
_	Complete ONLY if direct	Candidata/Off	iooholdor nama	Office	laht			Office h	ald	
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ignt			Office n	ziu -	
	•									

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 6/85 Rpt: 40/121	Toth, Steven H. (The Honorable)		00067717
4	Date	5 Payee name		•
	08/05/2024	Apple Store		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$10.76	9600 Lake Robbins Dr		
		The Woodlands, TX 77380		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Office Overhead/Rental Expense	'	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	•		Check if Austin, TX, officeholder living expense
				App for campaign phone
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
	- CAPCHARLATO TO SOTION COO			
	Date	Payee name		
	08/09/2024	Apple Store		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$20.45	9600 Lake Robbins Dr		
		The Woodlands, TX 77380		
	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 Digital policy book for campaign
				Digital policy book for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office so	uaht	Office held
	expenditure to benefit C/OI		ugni	Office field
	Data	D		
	Date 08/20/2024	Payee name Apple Store		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$9.99	9600 Lake Robbins Dr		
		_, , _, _,		
		The Woodlands, TX 77380		
	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
				Storage for campaign phone
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI		-	

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: 7/85 Rpt: 41/121	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	08/29/2024	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.31	9600 Lake Robbins Dr
		The Woodlands, TX 77380
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.
		Check if Austin, TX, officeholder living expense App for campaign phone
		App for campaign priorie
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
J	expenditure to benefit C/OI	
	Data	
	Date	Payee name
	09/04/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.76	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 App for campaign phone
		App for earnpaign priorie
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davida nama
	09/09/2024	Payee name Apple Store
		• •
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.14	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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
		App for campaign phone
		1.1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

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

	Candidate/Officeholder/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: 8/85 Rpt: 42/121	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	09/20/2024	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9.99	9600 Lake Robbins Dr
		The Woodlands, TX 77380
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. Check if Austin, TX, officeholder living expense
		Storage for campaign phone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/03/2024	Apple Store
-	Amount (\$)	Payee address; City; State; Zip Code
	\$4.31	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense App for campaign phone
		App for campaign priorie
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	10/10/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.47	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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
		Digital policy book for campaign
L	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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/85 Rpt: 43/121	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/07/2024	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$45.23	9600 Lake Robbins Dr
		The Woodlands, TX 77380
8	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
		App for campaign phone
		Ab con contribution but and a fertility
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/03/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.76	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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
		App for campaign phone
		7 pp for earripaigh phone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Date	Power name
	10/21/2024	Payee name Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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
		Storage for campaign phone
		Storage for earripaigh phone
	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
Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Reimbursement Solicitation/Fundraising Expense
ental Expense Transportation Equipment & Related Expense
Travel in District
ontract Labor 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: 10/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/21/2024	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.15	9600 Lake Robbins Dr
		The Woodlands, TX 77380
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense App for campaign phone
		7 App for earripting it priorite
	Complete ONLY if direct	Candidate/Officeholder name Office sought
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.31	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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
		App for campaign phone
		7 pp for outlipaigh phone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	D .	
	Date	Payee name
	11/04/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.76	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 App for campaign phone
		Αρμ τοι ταπιμαίζη μποπε
_	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	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 11/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	
	11/12/2024	Apple Store	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4.30	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) [Description
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		A	App for campaign phone
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit Grot	'	
	Date	Payee name	
	11/20/2024	Apple Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9.99	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
	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.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
			Storage for campaign phone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	Office field
	Date	Payee name	
	11/25/2024	Apple Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.31	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		L	App for campaign phone
			-pp .o. campaign priorio
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Since Held
H			

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

	Credit Card Payment	The Instruction Guide explains how to complete this fo	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 12/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	
	12/02/2024	Apple Store	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$53.86	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
	OF EXPENDITURE	Onice Overneda/Nerital Expense	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
		l	r campaign phone
		7,44	. Campaign phone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	12/05/2024	Apple Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.76	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
	EXPENDITURE	Onice Overnead/Nertial Expense	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
			r campaign phone
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	12/10/2024	Apple Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.30	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
	OF EXPENDITURE	Onice Overnead/Nertial Expense	k if travel outside of Texas. Complete Schedule T.
			k if Austin, TX, officeholder living expense Ir campaign phone
		, φρ ιο	reampaign phone
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		230 11010

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	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: 13/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/24/2024	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$53.86	9600 Lake Robbins Dr
		The Woodlands, TX 77380
8	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 App for campaign phone
		7 App for earnpaigh phone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	12/24/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 Storage for campaign phone
		Storage for campaign phone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	12/30/2024	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.31	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 app
		Campaign app
	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 Commi 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		
<u> </u>	Total pages Schedule F1:		_
1	Sch: 14/85 Rpt:	Toth, Steven H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067717	
4	Date	5 Payee name	_
	12/30/2024	Apple Store	
$ldsymbol{le}}}}}}$		•	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$75.41	9600 Lake Robbins Dr	
L		The Woodlands, TX 77380	
8	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 software app aubscription	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	09/19/2024	Apricity Foundation	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$841.19	2257 N Loop 336	
	Ç3.2.10		
		Convo. TV 77204	
		Conroe, TX 77304	
	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 Check if Austin, TX, officeholder living expense Contribution	
		Contribution	
L			_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	onpolicitate to beliefit 0/01	··	_
	Date	Payee name	
	07/03/2024	BLACK WALNUT	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$71.77	2520 RESEARCH FOREST DR	
		THE WOODLANDS, TX 77381	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	\dashv
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Lunch with constituents	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	\dashv
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
			\dashv

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total marga Calcadala 54	
_	Total pages Schedule F1:	
	Sch: 15/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	08/27/2024	BLACK WALNUT
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29.55	2520 RESEARCH FOREST DR
	+ 20.00	
		THE WOODLANDS TV 77201
		THE WOODLANDS, TX 77381
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense Breakfast with constituent
		breaklast with constituent
Ļ	0 1. 5	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	08/29/2024	BLACK WALNUT
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.74	2520 RESEARCH FOREST DR
		THE WOODLANDS, TX 77381
_	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) FOOD/Reverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lunch with Constituent
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
	Date	Payee name
L	09/03/2024	BLACK WALNUT
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.05	2520 RESEARCH FOREST DR
		THE WOODLANDS, TX 77381
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		breakfast with constituent
L		
	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 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		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			pense ages/C	Contract Labor		Travel in District Travel Out of Di OTHER (enter a)
1	Total pages Schedule F1:			_ _			Ī		Filer ID	(Ethics Commission	Filers)
	Sch: 16/85 Rpt:	Toth, Stev	en H. (The Honora	ble)					00067717		
4	Date	5 Payee name		_ 					_ _		
L	09/03/2024	BLACK W	ALNUT								
6	Amount (\$)	7 Payee addr		•	Zip Cod	de					
	\$119.50	2520 RES	EARCH FOREST I	DR							
		THE WOO	DDLANDS, TX 7738	31							
8	PURPOSE	(a) Category	See Categories listed at the	top of this sche	dule)	(b) [Description				
	OF EXPENDITURE		erage Expense			Ī	=			nplete Schedule T.	
						Ĺ	Check if Austin, Lunch with co		officeholder living tituents	a evhelipe	
								.50			
9	Complete ONLY if direct expenditure to benefit C/OH		fficeholder name	Ot	ffice soug	ght			Office h	əld	
	<u> </u>										
	Date	Payee name									
	11/11/2024	Blue, Pam									
	Amount (\$)	Payee addr		State;	Zip Cod	de					
	\$1,600.00	15 Mayoro	ougn Ct								
		The Wood	lands, TX 77382								
	PURPOSE OF		See Categories listed at the		dule)	(b) [Description				
	OF EXPENDITURE	Salaries/W	/ages/Contract Lab	oor		[_		de of Texas. Com officeholder living	nplete Schedule T. g expense	
						L (Contract Labo			, . p. 1.120	
	Complete ONLY if direct expenditure to benefit C/Oh		fficeholder name	O	ffice soug	ght			Office h	eld	
	Date	Payee name						=			
	10/24/2024	Blue, Pam									
	Amount (\$)	Payee addr	ess; City;	State;	Zip Cod	de					
	\$1,000.00	15 Mayoro									
		The Wood	lands, TX 77382								
	PURPOSE	(a) Category (See Categories listed at the	top of this sche	dule)	(b) [Description				
	OF EXPENDITURE		/ages/Contract Lab			<u>[</u>	_			nplete Schedule T.	
						Ĺ	Check if Austin, Contract labor		omcenolaer living	g expense	
						,	201 10001				
	Complete ONLY if direct	Candidate/Of	fficeholder name	O1	ffice soug	<u>,</u> jht		—	Office h	bld	
	expenditure to benefit C/OF				- 5						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -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	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: 17/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/31/2024	Blue, Pamela
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	15 Mayorough Ct
	. ,	
		The Woodlands, TX 77382
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract services
		Contract Services
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	11/11/2024	Brann, Ava
	Amount (\$)	Payee address; City; State; Zip Code
	\$180.00	133 Vick Spring Road
		Huntsville, TX 77340
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract labor
		Contract labor
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
L		
	Date	Payee name
	11/11/2024	Brann, Jonah
	Amount (\$)	Payee address; City; State; Zip Code
	\$90.00	133 Vick Spring Road
		Huntsville, TX 77340
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	¬

SCHEDULE F1

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/85 Rpt: Toth, Steven H. (The Honorable) 00067717 4 Date Payee name 11/11/2024 Brown, Delaney 6 Amount (\$) Payee address; City; State; Zip Code \$150.00 32411 Autumn Forst Ct Magnolia, TX 77354 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/04/2024 **Burger King** Amount (\$) Payee address; City; State; Zip Code \$23.25 787 Honea Egypt Rd Magnolia, TX 77354 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for staffer Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/24/2024 CHICK FIL A Amount (\$) Payee address: City; State; Zip Code \$103.48 8020 RESEARCH FOREST DR THE WOODLANDS, TX 77382 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for staff Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

Event Expense

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Candidate/Officeholder/Politica Credit Card Payment		vices truction Guide explains		cte this form.	OTHER (enter a	a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 19/85 Rpt:	Toth, Steven H. (T	he Honorable)			00067717	
4	Date	5 Payee name					
	07/05/2024	CRUST PIZZA CO).				
6	Amount (\$) \$79.51	7 Payee address; 4775 W PANTHER		; Zip Code			
		THE WOODLAND	S, TX 77381				
8	PURPOSE OF EXPENDITURE	(a) Category (See Catego Food/Beverage Ex		nedule) (b)	_	utside of Texas. Con TX, officeholder livin	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholde	er name (Office sought		Office h	eld
	Date	Payee name					
	10/22/2024	CRUST PIZZA CC).				
	Amount (\$)	Payee address;	City; State	; Zip Code			
	\$122.86	4775 W PANTHER	•				
		THE WOODLAND	S, TX 77381				
	PURPOSE OF	(a) Category (See Catego		nedule) (b)	Description		
	EXPENDITURE	Food/Beverage Ex	rpense		—	utside of Texas. Con TX, officeholder livin	
					Lunch for poll		y expense
					Editori for por	WOINCIS	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholde	er name C	Office sought		Office h	eld
	Date	Payee name					
	11/18/2024	Canva					
	Amount (\$)	Payee address;	City; State	; Zip Code			
	\$119.99	75 East Santa Cla	•	, —р ссис			
		San Jose, CA 951	13				
	PURPOSE	(a) Category (See Catego	ries listed at the top of this sch	nedule) (b)	Description		
	OF EXPENDITURE	Office Overhead/R	Rental Expense			utside of Texas. Con	
					Campaign ma	TX, officeholder livin	g expense
					Campaignina	ucriais	
_	Complete ONLY if direct	Candidate/Officeholde	ar name (Office sought		Office h	ald
	expenditure to benefit C/O		a name (Office sought		Office II	GIU

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 20/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/21/2024	Capital Commission
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	12302 Marshall Dr
		Magnolia, TX 77354
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.
		Candidate/Officeholder/Political Committee Contribution
		Contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
L	11/26/2024	Carbonite
	Amount (\$)	Payee address; City; State; Zip Code
	\$172.03	2 Avenue de Lafayette
		Boston, MA 02111
	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 subscription for data backup
		Campaign subscription for data backup
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
	11/11/2024	Carias, Anthony
	Amount (\$)	Payee address; City; State; Zip Code
	\$495.00	6423 Willow Pine Dr
		Spring, TX 77379
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\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 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 21/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	'
	11/11/2024	Carias, Isahia	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$457.50	6423 Willow Pine Dr	
l			
l		Spring, TX 77379	
8	PURPOSE		Occaviation
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Salaties/Wages/Goritaet Labor	Check if Austin, TX, officeholder living expense
l		C	Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
Г	Date	Payee name	
l	12/30/2024	CheapO Air	
H	Amount (\$)	Payee address; City; State; Zip Code	
l	\$14.97	137 W 25th St	
l			
l		New York, NY 10001	
┝	PURPOSE		Description
l	OF	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
l		T	icket search service
L			
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			
l	Date	Payee name	
L	11/27/2024	Cisco's Salsa Company	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$89.34	209 Commerce St	
l			
		Tomball, TX 77375	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
l	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
l		L	Check if Austin, TX, officeholder living expense .unch with consultant
			unon will consulant
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office assumbt	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 22/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	•
	10/22/2024	Citizens Grill	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$88.61	16110 Old Conroe Rd	
		Conoe, TX 77384	
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.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Dinner with constituents
Ļ	0 1 0 0 1 1 1 1		0" 11
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	·		
	Date	Payee name	
	11/19/2024	Citizens Grill	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$175.06	16110 Old Conroe Rd	
		Conoe, TX 77384	
	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
			Lunch with constituents
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	11/11/2024	Coffel, Kavan	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$457.50	50 Rockwood Ct	
		The Woodlands, TX 77382	
	PURPOSE		Description
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Calarios, Wagos, Cornitati Labor	Check if Austin, TX, officeholder living expense
			Contract Labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experience to beliefit 6/01	•	

SCHEDULE F1

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

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

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

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

Candidate/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: 23/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4 Date	5 Payee name
07/25/2024	Cool Kat Party Warehouse
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$64.87	1457 Spring Cypress Rd
	Spring, TX 77373
8 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
	receipt from 4th of July Parade for campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-
Date	Payee name
09/04/2024	Craig Eissler Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	34 Glentrace Circle
	The Woodlands, TX 77382
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF 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
	contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
07/25/2024	Crowe, Cassandra
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	5812 Woodstock Ln
	Conroe, TX 77386
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Contract labor
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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:	<u> </u>
	Sch: 24/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	09/24/2024	Crowe, Cassandra
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	5812 Woodstock Ln
		Conroe, TX 77386
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		contract labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/14/2024	Crowe, Cassandra
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5812 Woodstock Ln
		Conroe, TX 77386
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LA LABITORE	Check if Austin, TX, officeholder living expense
		Contract services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	5 .	
	Date	Payee name
	11/11/2024	Crowe, Kendal
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,110.00	5812 Woodstock Ln
		Conroe, TX 77386
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

SCHEDULE F1

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

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/Wages/Contract Labor

e Travel in District
se Travel Out of District
Travel Out of District
S/Contract Labor OTHER (enter a cate

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 25/85 Rpt: Toth, Steven H. (The Honorable) 00067717 4 Date Payee name 11/11/2024 Crowe, Sydney 6 Amount (\$) Payee address; State; Zip Code \$1,140.00 5812 Woodstock Ln Conroe, TX 77386 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/19/2024 DOSEY DOE Amount (\$) Payee address; City; State; Zip Code \$40.61 8021 Research Forest Drive The Woodlands, TX 77382 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Breakfast with constituent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/24/2024 **Delanoye Strategies** Amount (\$) Payee address: City; State; Zip Code \$100.00 1415 S VOSS RD 110-329 Houston, TX 77057 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense media placement Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 Salaries (Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)	
Sch: 26/85 Rpt:	Toth, Steven H. (The Honorable)	00067717	
4 Date	5 Payee name		•
11/21/2024	Delanoye Strategies		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$150.00			
	Houston, TX 77057		
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.
EXPENDITORE			Check if Austin, TX, officeholder living expense
			Media placement
		<u> </u>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou	ught	Office held
oxportantare to perionic ere			
Date	Payee name		
11/06/2024	Delanoye Strategies		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$150.00	1415 S VOSS RD 110-329		
	Houston, TX 77057		
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.
EXI ENDITORE			Check if Austin, TX, officeholder living expense
			Media placement
Complete ONLY if direct	Condidate/Officeholder name Office co.	uabt.	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou OH	ugni	Office held
Date	Payee name		
11/04/2024	Delanoye Strategies		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$150.00	1415 S VOSS RD 110-329		
	Houston, TX 77057		
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
			Media placement
Complete ONLY if direct	Candidate/Officeholder name Office sou	uab+	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/C		uyıll	Office field

SCHEDULE F1

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

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

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 27/85 Rpt:	Toth, Steven H. (The Honorable)
4	Date	5 Payee name
	10/15/2024	Delanoye Strategies
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 1415 S VOSS RD 110-329 Houston, TX 77057
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Media Placement
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/12/2024	Delanoye Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1415 S VOSS RD 110-329
	DUDDOGE	Houston, TX 77057
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Media Placement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/11/2024	Dicker, Mikayla
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	150 W. Russett Grove Cir
	22	
		The Woodlands, TX 77384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/11/2024	Dungan, Melissa
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,250.00	16109 McQueen Rd
		Conroe, TX 77384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Easter
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	09/25/2024	Eckhart, Jennifer
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	6611 Ranch Park Dr
		Magnolia, TX 77354
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		contract labor
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
┍	Date	Payee name
	11/13/2024	Eckhart, Jennifer
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,909.93	6611 Ranch Park Dr
		Magnolia, TX 77354
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense Contract services
		Contract services
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/05/2024	Escalante
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$76.61	1900 Hughes Landing Boulevard
		The , TX 77380
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lunch with constituents
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u>'</u>	
	Date	Payee name
	09/09/2024	Federal American Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,300.19	27700 IH-45 N
		Conroe, TX 77385
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food for fundraiser
		1 ood for fallaration
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/26/2024	Federal American Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$119.59	27700 IH-45 N
	Ψ110.00	21700 117 40 14
		Conroe, TX 77385
	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.
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		Lunch with constituent
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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: 30/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	09/09/2024	Fieldings
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$80.57	26400 Kuykendahl Rd
		Tomball, TX 77375
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 Lunch with constituent
		Editori With Constituent
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	10/23/2024	Friends of Brandon Creighton
H	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2257 N. Loop 336
		Suite 140-366
		Conroe, TX 77304
┝	PURPOSE	In.
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		contribution
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/16/2024	GODADDY.COM
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.34	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.
		Check if Austin, TX, officeholder living expense
		Campaign domain subscription
\vdash	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 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: 31/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/07/2024	Grace Church The Woodlands
6	Amount (\$) \$360.00	7 Payee address; City; State; Zip Code 24400 Interstate 45
L		Spring, TX 77386
8	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 Contribution
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	HEB
	Amount (\$) \$75.76	Payee address; City; State; Zip Code 10777 KUYKENDAHL ROAD
		SPRING, TX 77382
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Drinks for campaign workers
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/23/2024	Payee name HEB
	Amount (\$) \$63.29	Payee address; City; State; Zip Code 10777 KUYKENDAHL ROAD
		SPRING, TX 77382
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Beverages for campaign workers
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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		
_	Total pages Cab - dist - E4		rc)
1	Total pages Schedule F1:		15)
	Sch: 32/85 Rpt:	Toth, Steven H. (The Honorable) 00067717	
4	Date	5 Payee name	
	11/04/2024	HEB	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$27.54	10777 KUYKENDAHL ROAD	
	, -		
		SPRING, TX 77382	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Beverages for campaign workers	
		Beverages for campaign workers	
Ļ	0 1: 0:::::::::::::::::::::::::::::::::		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			
	Date	Payee name	
	09/11/2024	Houston Area Pastors Council	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$206.19	PO Box 692207	
		Houston, TX 77269	
	DUDDOOF		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Toxas, Complete Schedule Toxas, Comp	
	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/Officerioider/Political Committee Contribution	
		Sofianodaon	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/OI		
L			
	Date	Payee name	
L	10/04/2024	Houston Area Pastors Council	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	PO Box 692207	
		Houston, TX 77269	
	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 Check if Austin, TX, officeholder living expense	
		contribution	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH	

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

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 33/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/11/2024	Huard, Franklin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$566.25	9040 Grand Lakes Estates Dr
		Montgomery, TX 77316
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Eabor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	08/05/2024	Hyatt Conroe
H	Amount (\$)	Payee address; City; State; Zip Code
	\$246.33	1001 Grand Central Parkway
	Ψ240.33	1001 Grand Central Larkway
		Conroe , TX 77304
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Dinner for staff
L		
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	10/23/2024	Hyatt Conroe
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.00	1001 Grand Central Parkway
		Conroe , TX 77304
	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.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Coffee for constituent
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ing 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 compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 34/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	·
l	11/05/2024	Hyatt Conroe	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$124.22	1001 Grand Central Parkway	
l			
		Conroe , TX 77304	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
l	LAFLINDITORL		Check if Austin, TX, officeholder living expense
			Beverages for watch Republican watch reception
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
⊨	Data	David variation of the contract of the contrac	
l	Date 09/30/2024	Payee name Jennifer Kratky For Tomball ISD	
┡		<u> </u>	
l	Amount (\$)	Payee address; City; State; Zip Code 15210 McCall Park	
l	\$500.00	15210 MCCall Park	
l		Marrie TV 770FF	
L		Magnolia, TX 77355	
l	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
l			contribution
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/11/2024	Jersey Mikes	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$62.57	9662 FM 242	
l			
		Conroe, TX 77384	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
l			Check if Austin, TX, officeholder living expense Lunch for staff
			28
\vdash	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 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)
_	Sch: 35/85 Rpt:	Toth, Steven H. (The Honorable)
	·	
4	Date	5 Payee name
	10/28/2024	Jersey Mikes
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$136.35	9662 FM 242
		Conroe, TX 77384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Lunch with staff
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	11/11/2024	Jordan, Tristan
_	Amount (\$)	Payee address; City; State; Zip Code
	\$172.50	14728 Corvus Dr
	\$172.50	14726 COIVUS DI
		Willis, TX 77318
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		
	Date	Payee name
	11/11/2024	Kerr, Kennedy
	Amount (\$)	Payee address; City; State; Zip Code
	\$375.00	6038 FM 1374
		New Waverly, TX 77358
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorale to belieff C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 36/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/28/2024	Kingwood Tea Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	2261 Northpark Dr
		Kingwood, TX 77339
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Continuation
Ļ	Computate ONLY if diseast	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	12/16/2024	Kingwood Tea Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	2261 Northpark Dr
		Kingwood, TX 77339
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Contribution
	Opening the ONII Wife discret	On didn't 10ff a halden game.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/30/2024	LAZ Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.80	1 Financial Plaza
		Hartford, CT 06103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Parking Hughes Landing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/OI	•
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 37/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/31/2024	Legislative Solution
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$925.00	PO B0x 5643
		Austin, TX 78763
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraising consultation and services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/30/2024	Liberty Bells Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	PO Box 1081
		Conroe, TX 77305
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Monthly luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/24/2024	Lupe Tortilla
	Amount (\$)	Payee address; City; State; Zip Code
	\$190.91	19437 I-45 South
	,	
		The Woodlands, TX 77385
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Christmas Lunch for campaign team
	0 1: 0::::::	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: Sch: 38/85 Rpt:	2 FILER NAME Toth, Steven H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067717
4	Date 09/23/2024	5 Payee name MARRIOTT PARKING GARAGE
6	Amount (\$) \$18.23	7 Payee address; City; State; Zip Code 1601 LAKE ROBBINS
8	PURPOSE OF EXPENDITURE	THE WOODLANDS, TX 77380 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 07/05/2024	Payee name MCDONALDS
	Amount (\$) \$5.61	Payee address; City; State; Zip Code 6730 Woodlands Parkway The Woodlands, TX 77382
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense drink for staffer
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/10/2024	Payee name MCDONALDS
	Amount (\$) \$31.87	Payee address; City; State; Zip Code 6730 Woodlands Parkway
		The Woodlands, TX 77382
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Breakfast with constituent
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/V	Vages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Fi	ilers)
	Sch: 39/85 Rpt:	l	n H. (The Honoral	ole)				00067717	`	,
4	Date	5 Payee name								
	11/06/2024	MCDONAL	DS							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$17.08	6730 Wood	lands Parkway							
		The Woodla	ands, TX 77382							
8	PURPOSE OF	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Food/Bevei	age Expense					de of Texas. Com officeholder living		
						Breakfast witl			i expense	
						Dicarrast with	11 0	oristituerit		
_	Complete ONLY if direct	Condidate/Off	ceholder name	Office				Office he	N.A.	
9	Complete ONLY if direct expenditure to benefit C/OI		cenoider name	Office sou	igni			Office he	eiu	
	Date	Payee name								
	12/17/2024	MOCO Pad	hyderm							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$240.00	PO Box 160	63							
		The Woodla	ands, TX 77380							
	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made			=		de of Texas. Com		
		Candidate/	Officeholder/Politic	al Committee		_	, TX,	officeholder living	expense	
						Contribution				
					<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ignt			Office he	eld	
	Date	Payee name								
	11/05/2024	MONTGON	IERY COUNTY RE	EPUBLICAN PAF	RTY					
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$600.00	310 METC	ALF STREET							
		CONROE,	TX 77301							
	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made					de of Texas. Com		
		Candidate/	Officeholder/Politic	al Committee		ш	, TX,	officeholder living	expense	
						Contribution				
_	Complete ONU V if allow	Condidate 10"		O#:				O#:!	al al	
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ignt			Office he	eiu	

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

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 40/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4 Date 10/04/2024	5 Payee name MONTGOMERY COUNTY TEA PARTY	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1400 W LOOP 336 S	
	CONROE, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
12/26/2024	Madame Brioche Bistro	
Amount (\$) \$49.68	Payee address; City; State; Zip Code 2400 FM 1488 Suite 10 Conroe, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Breakfast with constituent
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date 12/23/2024	Payee name Madame Brioche Bistro	
Amount (\$) \$48.59	Payee address; City; State; Zip Code 2400 FM 1488 Suite 10 Conroe, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Breakfast with constituent
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

The Instruction Guide explains how to complete this form.								
1 Total pages Sc	hedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Sch: 41/8	5 Rpt:	Toth, Steven H. (The Honorable)	00067717					
4 Date		5 Payee name						
12/12/2024		Madame Brioche Bistro						
6 Amount (\$)		7 Payee address; City; State; Zip Code						
	\$98.74	2400 FM 1488						
		Suite 10						
		Conroe, TX 77384						
8 PURPOSE		(a) Category (See Categories listed at the top of this schedule) (b) Des	scription					
OF EXPENDITUR	RE	1 Toda/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.					
			Check if Austin, TX, officeholder living expense nch with constituents					
9 Complete ONL	Y if direct	Candidate/Officeholder name Office sought	Office held					
expenditure to	benefit C/O	Н						
Date		Payee name						
12/12/2024		Madame Brioche Bistro						
Amount (\$)		Payee address; City; State; Zip Code						
	\$7.58	2400 FM 1488						
		Suite 10						
		Conroe, TX 77384						
PURPOSE		(a) Category (See Categories listed at the top of this schedule) (b) Des	scription					
OF EXPENDITUR	o E	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.					
LAI LIIDI. G.	\L	,	Check if Austin, TX, officeholder living expense					
		l Die	eakfast with constituent					
Complete ONL	∨ if direct	Candidate/Officeholder name Office sought	Office held					
expenditure to		9	Office field					
Date		Payee name						
11/29/2024		Madame Brioche Bistro						
Amount (\$)								
Alliount (Ψ)	\$38.96	Payee address; City; State; Zip Code 2400 FM 1488						
	Ψ50.50	Suite 10						
-UDD00F		Conroe, TX 77384						
PURPOSE OF		, , , , , , , , , , , , , , , , , , ,	SCription Check if travel outside of Texas. Complete Schedule T.					
EXPENDITUR	RE	1 000/Develage Expense	Check if Austin, TX, officeholder living expense					
		· · · · · · · · · · · · · · · · · · ·	eakfast with constituent					
Complete ONL		Candidate/Officeholder name Office sought	Office held					
expenditure to	benefit C/O	н						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/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: 42/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/26/2024	Madame Brioche Bistro
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$47.42	2400 FM 1488
		Suite 10
		Conroe, TX 77384
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 Breakfast with constituent
		Broadlast With constitution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	11/14/2024	Madame Brioche Bistro
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.66	2400 FM 1488
		Suite 10
		Conroe, TX 77384
	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 Lunch with constituent
		Euron wan constacts
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/20/2024	Madame Brioche Bistro
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.97	2400 FM 1488
		Suite 10
		Conroe, TX 77384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense Lunch with constituent
		Eurich with Constituent
	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 Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	, -	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 43/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	
	09/20/2024	Madame Brioche Bistro	
6	Amount (\$) \$18.21	7 Payee address; City; State; Zip Code 2400 FM 1488 Suite 10	
		Conroe, TX 77384	
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Breakfast with constituent
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name Madame Brioche Bistro	
	09/19/2024		
	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.86	2400 FM 1488	
		Suite 10	
		Conroe, TX 77384	
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Breakfast with constituent
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/17/2024	Madame Brioche Bistro	
	Amount (\$) \$56.51	Payee address; City; State; Zip Code 2400 FM 1488 Suite 10 Conroe, TX 77384	
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch with constituent
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 44/85 Rpt: Toth, Steven H. (The Honorable) 00067717 4 Date Payee name 09/13/2024 Madame Brioche Bistro 6 Amount (\$) Payee address; City; State; Zip Code \$17.12 2400 FM 1488 Suite 10 Conroe, TX 77384 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Breakfast with constituent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/12/2024 Madame Brioche Bistro Amount (\$) Payee address; City; State; Zip Code \$55.57 2400 FM 1488 Suite 10 Conroe, TX 77384 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Breakfast with constituent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/11/2024 Madame Brioche Bistro Amount (\$) Payee address: City: State; Zip Code \$48.05 2400 FM 1488 Suite 10 Conroe, TX 77384 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Breakfast with constituent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	-						
	Sch: 45/85 Rpt:	Toth, Steven H. (The Honorable) 00067717							
4	Date	5 Pavee name	-						
	08/06/2024	Mailchimp							
6	Amount (\$)	7 Payee address; City; State; Zip Code	-						
	\$140.18	675 Ponce De Leon							
		Atlanta, GA 30308							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-						
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		campaign email service							
			_						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
			_						
	Date	Payee name							
	09/06/2024	Mailchimp	_						
	Amount (\$)	Payee address; City; State; Zip Code							
	\$140.18	675 Ponce De Leon							
		Att. 1. 04 00000							
		Atlanta, GA 30308	_						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		campaign email service							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	experiditure to beriefit C/Oi								
	Date	Payee name							
	10/07/2024	Mailchimp							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$140.18	675 Ponce De Leon							
		Atlanta, GA 30308							
	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 service							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-						
	expenditure to benefit C/OI								
			_						

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/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 46/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/06/2024	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$140.18	675 Ponce De Leon
		Atlanta, GA 30308
8	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 service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/06/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$140.18	675 Ponce De Leon
		Atlanta, GA 30308
	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 email service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	08/01/2024	Mardik, Thomas
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	10545 Wild Chives
		Conroe, TX 77385
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Edisor
	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 Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Constitution Properties Mode Page 1

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	·		/ages	/Contract Labor		OTHER (enter	a category not listed a	bove)
				The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 47/85 Rpt:		Toth, Stever	n H. (The Hond	rable)					00067717		
4	Date	5	Payee name									
	08/19/2024		Mezcal Can	tina								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$74.42		535 Woodla	nd Square Blv	d							
			Conroe, TX	77384								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF			age Expense		,		Check if travel	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE							Check if Austin,	, TX,	officeholder livir	ng expense	
								Lunch with co	ons	tituent		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Of	ffice sou	ght			Office h	neld	
	experialitare to beliefit C/O											
	Date		Payee name									
	12/30/2024		Microsoft									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$107.74		One Microso	oft Way								
			Redmond, V	VA 98008								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
OF EXPENDITURE		Office Overhead/Rental Expense			Check if travel outside of Texas. Complete Schedule T.							
	ZA ZHOHOKZ							—		officeholder livir		
								campaign sof	ΠW	are app sur	oscription	
_	Complete ONLY if direct	L_	Condidate/Offi			"	la 4			Office	- ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	Oi	ffice sou	gnt			Office h	ieia	
		_										
	Date		Payee name									
	08/22/2024		Montgomery	/ County Repu	blican Wome	n						
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$145.95		PO Box 176	66								
			Conroe, TX	77305								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Fees					ш			mplete Schedule T.	
								_		officeholder livir		
								Monthly lunch	ieu	ıı wılıı Slall		
	Complete ONLY if direct	Ц	Candidato/Offic	ceholder name	0	ffice sou	abt			Office h	neld	
	expenditure to benefit C/OI		Januiuale/UIII(Jenoiuel Hällië	U	mce sou	yııl			Office f	ıcıu	

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: 48/85 Rpt:	Toth, Steven H. (The Honorable)						
4	Date	5 Payee name						
	09/20/2024	Montgomery County Republican Women						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$132.04	PO Box 1766						
		Conroe, TX 77305						
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.						
	EXPENDITORE	Check if Austin, TX, officeholder living expense						
		Monthly luncheon with staff						
_								
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	12/05/2024	Montgomery County Republican Women						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$62.50	PO Box 1766						
		Conroe, TX 77305						
	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.						
	ZAI ZABITORZ	Check if Austin, TX, officeholder living expense						
		Monthly luncheon with staff						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Data							
	Date	Payee name Montgomery County Population Momen						
	10/24/2024	Montgomery County Republican Women						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$31.25	PO Box 1766						
		Conroe, TX 77305						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Monthly luncheon						
		Worlding Idilottoon						
	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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 49/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/06/2024	Montgomery County Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$26.10	PO Box 1766
		Conroe, TX 77305
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly event
		Working event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Data	
	Date	Payee name
	11/11/2024	Muhle, Jacob
	Amount (\$)	Payee address; City; State; Zip Code
	\$540.00	31320 Ribbonwood Park Ln
		Spring, TX 77386
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Contract Labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/11/2024	Muhle, Sheppard
	Amount (\$)	Payee address; City; State; Zip Code
	\$337.50	31320 Ribbonwood Park Ln
		Spring, TX 77386
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Labor
_	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 Comm

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 Comn	nittee Le	t/Awards/Memorials Ex gal Services ne Instruction Guid			ages/	/Contract Labor		Travel Out of D OTHER (enter	istrict a category not listed above)
<u> </u>	Tatalana O. I. I. T.	۰ .		io monucion duit	- CAPIGIIIS I				_	E1 15	(Fabine Occupation) =")
1	Total pages Schedule F1:	1							3		(Ethics Commission Filers)
	Sch: 50/85 Rpt:		oth, Steven	H. (The Honora	ble)					00067717	
4	Date	5 P	Payee name								
	07/24/2024	0	OFFICE MAX								
6	Amount (\$)	7 P	Payee address;	City;	State;	Zip Cod	de				
	\$63.93	l		'8 SUITE 500		•					
				_							
		١,	MAGNOLIA, ⁻	V 77251							
_	DUDDOGE						/I- \				
8	PURPOSE OF			Categories listed at the		edule)	(b)	Description			
	EXPENDITURE		Ottice Overhe	ad/Rental Expe	ense			<u> </u>		de of Texas. Cor officeholder livir	mplete Schedule T.
								Paper and pe			
								. Apo. ana po		.s. campai	
_	Complete ONLY if direct	<u> </u>	andidate/Office	aoldor nama		Office source	nh+			Office h	aold
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Office	юшен патпе	C	Office soug	JIII			Office r	I c iu
L	· 	_									
	Date	l	Payee name								
	07/25/2024		OFFICE MAX								
	Amount (\$)	Р	Payee address;	City;	State;	Zip Cod	de				
	\$93.60	3	32954 FM 29 ⁻	'8 SUITE 500							
		N	MAGNOLIA, ⁻	X 77354							
	PURPOSE			Categories listed at the		edule)	(b)	Description			
	OF EXPENDITURE		Office Overhe	ad/Rental Expe	ense			=			mplete Schedule T.
	-									officeholder livir	ng expense
								Materials for	udí	npaiyH	
_	Operation Objects "	<u> </u>		1-1		D. (1) -				O	1.1
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Office	nolder name	C	Office soug	gnt			Office h	neia
	Date	P	Payee name								
	08/19/2024	0	OFFICE MAX								
	Amount (\$)	Р	Payee address;	City;	State;	Zip Cod	de				
	\$62.48	3	32954 FM 29 ⁻	'8 SUITE 500							
		N	MAGNOLIA, ⁻	X 77354							
	PURPOSE	(a) C	Category (See (Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			ad/Rental Expe				브			mplete Schedule T.
	LAFEINDITURE			·						officeholder livir	ng expense
								Campain mat	teria	als	
	Complete ONLY if direct		andidate/Office	nolder name	C	Office soug	ght			Office h	neld
	expenditure to benefit C/OI	H									

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 51/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/11/2024	Palacios, Jadon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$105.00	1825 Sunny Dr
		Houston, TX 77093
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
	11/11/2024	Palacios, Nathan
	Amount (\$)	Payee address; City; State; Zip Code
	\$213.75	1825 Sunny Dr
		Houston, TX 77093
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Labor
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
	11/11/2024	Palmer, Emma
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	8784 Grand Lakes Estates
		Montgomery, TX 77316
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Printing Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.		
1	Total pages Schedule F1:	·	•	3 Filer ID (Ethics Commission Filers)		
	Sch: 52/85 Rpt:	Toth, Steven H. (The Honorable)		00067717		
4	Date	5 Payee name				
	10/29/2024	Papa Johns Pizza				
6	Amount (\$)	7 Payee address; City; State; Zip Co	de			
	\$158.03	25118 Grogans Mill Rd				
		, and the second				
		Spring, TX 77380				
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		
				Dinner for campaign workers		
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
9	expenditure to benefit C/O		gni	Office field		
	Date	Payee name				
	12/03/2024	Raise The Money				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$1.48	PO Box 26466				
		Little Rock , AR 72221				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.		
				Check if Austin, TX, officeholder living expense Processing fee		
				1 rocessing rec		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
	expenditure to benefit C/O		9			
	Date	Dayon nama				
	12/08/2024	Payee name Raise The Money				
		<u> </u>	do			
	Amount (\$) \$65.71	Payee address; City; State; Zip Co PO Box 26466	ue			
	\$05.71	PO B0X 20400				
		Little Deals AD 70001				
		Little Rock , AR 72221				
	PURPOSE OF	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Accounting/Banking		Check if Austin, TX, officeholder living expense		
				Processing fee		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	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 C

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: 53/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/09/2024	Raise The Money
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.70	PO Box 26466
		Little Rock , AR 72221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee
		1 Toccssing icc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	12/10/2024	Raise The Money
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$21.83	PO Box 26466
	Ψ21.03	FO BOX 20400
L		Little Rock , AR 72221
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/11/2024	Raise The Money
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$24.75	PO Box 26466
	Φ24.73	FO BOX 20400
		Little Deals AD 70001
		Little Rock , AR 72221
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	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 Commit

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

	Candidate/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: 54/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/12/2024	Raise The Money
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$98.50	PO Box 26466
		Little Rock , AR 72221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee
		T Toolsooning too
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ĭ	expenditure to benefit C/O	
	Date	Payee name
	12/15/2024	Raise The Money
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.20	PO Box 26466
	Ψ10.20	1 0 DOX 20400
		Little Rock , AR 72221
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	experiantare to benefit Gree	
	Date	Payee name
	12/16/2024	Raise The Money
	Amount (\$)	Payee address; City; State; Zip Code
	\$307.50	PO Box 26466
		Little Rock , AR 72221
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		nmittee L	egal Services	•		ages	/Contract Labor		OTHER (enter a	strict a category not listed abo	ve)
				The Instruction G	uide explains h	ow to cor	mple	ete this form.				
1	Total pages Schedule F1:	2 F	FILER NAME						3	Filer ID	(Ethics Commission	on Filers)
	Sch: 55/85 Rpt:	-	Toth, Steven	H. (The Hono	rable)					00067717		
4	Date	5 F	Payee name									
	12/17/2024		Raise The M	oney								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	de					
	\$160.07	l	PO Box 2646									
		l,	Little Rock , .	AR 72221								
Ļ	DUDDOCE	_					/b\	5 12				
8	PURPOSE OF			Categories listed at	the top of this sche	dule)	(D)	Description	nutei	de of Tevas Com	nplete Schedule T.	
	EXPENDITURE	′	Accounting/E	sanking				=		officeholder living		
								Processing fe	ee			
9	Complete ONLY if direct	C	andidate/Offic	eholder name	Of	ffice souç	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
H	Date		Payee name									
	11/17/2024	1	Raise The M	oney								
	Amount (\$)	 	Payee address	s; City;	State:	Zip Cod	de					
	\$24.75	l	PO Box 2646		•							
	,											
		١,	Little Rock , ,	ΔR 72221								
_	PURPOSE	_					(h)	Description				
	OF			Categories listed at	the top of this sche	dule)	(D)	Description Check if travel of	outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE	′	Accounting/E	banking				=		officeholder livin		
								Processing fe	ee			
	Complete ONLY if direct		andidate/Offic	eholder name	Of	ffice souç	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date	F	Payee name									
	11/24/2024	F	Raise The M	oney								
	Amount (\$)	F	Payee addres	s; City;	State;	Zip Cod	de					
	\$2.31	1	PO Box 2646	66								
		ı	Little Rock,	AR 72221								
	PURPOSE	(a) (Category (See	Categories listed at	the top of this sche	dule)	(b)	Description				
	OF		Accounting/E		are top or this serie	uuic)	` '		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE		J	J				ш		officeholder living	g expense	
								Processing fe	ee			
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name	Of	ffice souç	ght			Office h	eld	
	orportantile to borrow orott											

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	elete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 56/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	<u>'</u>
	11/26/2024	Raise The Money	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$245.25	PO Box 26466	
		Little Rock , AR 72221	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Description
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
l			Processing fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
9	expenditure to benefit C/OI		t Office field
⊨	D-1-		
	Date 10/01/2024	Payee name Raise The Money	
┡		•	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.73	PO Box 26466	
l			
L		Little Rock , AR 72221	
	PURPOSE OF	,) Description
l	EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l			Processing fee
l			Š
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
l	10/16/2024	Raise The Money	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.75	PO Box 26466	
		Little Rock , AR 72221	
	PURPOSE) Description
l	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	, lood many, banking	Check if Austin, TX, officeholder living expense
			Processing fee
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
	experience to beliefit 6/01	•	

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services The Instruction Guide	Salaries/	Wages	es/Contract Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAM	IE .				3	Filer ID	(Ethics Commission I	Filers)
	Sch: 57/85 Rpt:	Toth, Stev	en H. (The Honorabl	e)				00067717		
4	Date	5 Payee name	е							
	10/22/2024	Raise The	Money							
6	Amount (\$) \$61.36	7 Payee addr PO Box 26		State; Zip C	ode					
		Little Rock	, AR 72221							
8	PURPOSE OF		See Categories listed at the to	p of this schedule)	(b)	Description				
	EXPENDITURE	Accounting	g/Banking			=		ide of Texas. Com , officeholder living	plete Schedule T.	
						Processing fe		, cincertolaer name	у охронос	
						•				
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ught			Office h	eld	
	Date	Payee name	e							
	10/31/2024	Raise The	Money							
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$1.58	PO Box 26	6466							
		Little Rock	, AR 72221							
	PURPOSE OF	I	See Categories listed at the to	p of this schedule)	(b)	Description				
	EXPENDITURE	Accounting	g/Banking			=		ide of Texas. Com , officeholder living	plete Schedule T. a expense	
						Processing fe		,	, . ,	
	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office so	ught			Office he	eld	
F	Date	Payee name								
	09/03/2024	Raise The								
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$1.48	PO Box 26	•							
		Little Rock	, AR 72221							
	PURPOSE OF	I	See Categories listed at the to	p of this schedule)	(b)	Description				
	EXPENDITURE	Accounting	g/Banking					ide of Texas. Com , officeholder living	plete Schedule T.	
						Processing fe		, omeendaer nym	у схропос	
							-			
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OI									
\vdash										
ᆫ										

SCHEDULE F1

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

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

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 co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 58/85 Rpt:	Toth, Steven H. (The Honorable)		00067717	
4 Date	5 Payee name			
09/04/2024	Raise The Money			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$49.25	PO Box 26466			
	Little Rock , AR 72221			
8 PURPOSE		(h) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel of	outside of Texas. Comp	olete Schedule T.
EXPENDITURE	/ Coodinarily/Dariking	_	, TX, officeholder living	
		Processing fe	ee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office he	ld
expenditure to benefit C/O	Н			
Date	Payee name			
09/09/2024	Raise The Money			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$24.75	PO Box 26466			
¥25				
	Little Rock , AR 72221			
DUDDO05		4.		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	outside of Texas. Comp	olete Schedule T
EXPENDITURE	Accounting/Banking	—	TX, officeholder living	
		Processing fe		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office he	ld
expenditure to benefit C/O	Н			
Date	Payee name			
09/10/2024	Raise The Money			
Amount (\$)	Payee address; City; State; Zip Co	.do		
\$226.40	PO Box 26466	ue		
Φ220.40	FO BOX 20400			
	Little Rock , AR 72221			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Accounting/Banking		outside of Texas. Comp	
		Processing fe	TX, officeholder living	expense
		i rocessing le		
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office he	ld.
expenditure to benefit C/O		giit	Office fie	iu

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 co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 59/85 Rpt:	Toth, Steven H. (The Honorable)		00067717
4	Date	5 Payee name		'
	09/11/2024	Raise The Money		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$5.15	PO Box 26466		
		Little Rock , AR 72221		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Processing fee
l				Frocessing ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
ľ	expenditure to benefit C/OI		giit	Office field
⊨	Date	Payee name		
	09/15/2024	Raise The Money		
	Amount (\$)	Payee address; City; State; Zip Co	do	
	\$12.50	PO Box 26466	ue	
	Ψ12.50	1 0 Box 20400		
l		Little Rock , AR 72221		
┡	DUDDOCE		(b)	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(D)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Accounting/Banking		Check if Austin, TX, officeholder living expense
l				Processing fee
L				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
L	experientare to benefit Great	'		
	Date	Payee name		
L	09/17/2024	Raise The Money		
l	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$86.95	PO Box 26466		
		Little Rock , AR 72221		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Processing fee
				3
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		-	

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/Political Com Credit Card Payment		o complete this form.	OTHER (enter a category not listed above)				
1 Total pages Schedule F1: 2	FILER NAME		3 Filer ID (Ethics Commission Filers)				
Sch: 60/85 Rpt:	Toth, Steven H. (The Honorable)		00067717				
4 Date 5 p	Payee name						
09/24/2024 I	Raise The Money						
\$100.56 I	Payee address; City; State; Zip PO Box 26466 Little Rock , AR 72221	Code					
8 PURPOSE (a)	Category (See Categories listed at the top of this schedule)	(b) Description					
	Accounting/Banking	. <u> </u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office	sought	Office held				
Date	Payee name						
08/22/2024 I	Raise The Money						
` ′	Payee address; City; State; Zip	Code					
\$2.31 I	PO Box 26466						
	Little Rock , AR 72221						
I DE I	Category (See Categories listed at the top of this schedule)	(b) Description	outside of Toyon, Complete Caladula T				
EXPENDITURE	Accounting/Banking	I <u>—</u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense				
		Processing for	ee				
Complete ONII V if divest C	Office Action Control of the Control	2010104	Office heald				
Complete <u>ONLY</u> if direct Complete <u>ONLY</u> if direct Conditure to benefit C/OH	Candidate/Officeholder name Office	sought	Office held				
Date	Payee name						
07/04/2024 I	Raise The Money						
· · ·	Payee address; City; State; Zip	Code					
\$2.70 I	PO Box 26466						
1	Little Rock , AR 72221						
PURPOSE (a)	Category (See Categories listed at the top of this schedule)	(b) Description					
OF EXPENDITURE	Accounting/Banking	I <u>—</u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense				
		Processing for					
• ——	Candidate/Officeholder name Office	sought	Office held				
expenditure to benefit C/OH	expenditure to benefit C/OH						

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

	Credit Cara r ayment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 61/85 Rpt:	Toth, Steven H. (The Honorable)		00067717
4	Date	5 Payee name		•
	07/21/2024	Raise The Money		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$1.47	PO Box 26466		
		Little Rock , AR 72221		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Processing fee
				Troccoming for
9	Complete ONLY if direct	Candidate/Officeholder name Office sout	aht	Office held
	expenditure to benefit C/O		,	
-	Date	Payee name		
	07/23/2024	Raise The Money		
_	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$2.31	PO Box 26466		
		Little Rock , AR 72221		
	PURPOSE		(b)	Description
	OF EXPENDITURE	Accounting/Banking	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office souc	nht.	Office held
	Complete ONLY if direct expenditure to benefit C/Ol		JIIL	Office field
	D-1-			
	Date 07/31/2024	Payee name		
		Raise The Money		
	Amount (\$)	Payee address; City; State; Zip Coo PO Box 26466	de	
	\$1.48	PO BOX 20400		
		Little Deals AD 72224		
		Little Rock , AR 72221		
	PURPOSE OF	, ,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking		Check if Austin, TX, officeholder living expense
				Processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/Ol	1		

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 Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 62/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/11/2024	Rodriquez, Seth
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$247.50	723 Manchester Trail Dr
		Spring, TX 77373
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Controot Labor
		Contract Labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	11/26/2024	Ryan Data Research
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 202675
		Austin, TX 78720
	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 Data analytics for campaign
		Butte analytics for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/19/2024	SONIC
	Amount (\$) \$18.50	Payee address; City; State; Zip Code 25308 IH-45 N
	Ψ10.50	23300 II 1-43 IV
		Spring TV 77206
		Spring, TX 77386
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Food/Rayarage Eynense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lunch for staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
_		

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifl/Awards/Memorials Expense Legal Services 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: 63/85 Rpt:	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	-
	12/03/2024	SONIC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$42.91	25308 IH-45 N	
		Spring, TX 77386	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	avel outside of Texas. Complete Schedule T.
	EXPENDITORE	, <u> </u>	ustin, TX, officeholder living expense
		Lunch Wit	n constituent
Ļ	Complete ONLY if direct	Condidate (Office holder name	Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	· 		
	Date	Payee name	
	11/11/2024	Schneider, Jaikin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$270.00	2535 Northline Road	
		Conroe, TX 77384	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/ Wages/Contract Eabor	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
		Contract I	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	09/10/2024	Shake Shack	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$62.02	1201 Lake Woodlands	
		The Woodlands, TX 77380	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		avel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if A	ustin, TX, officeholder living expense
		Lunch wit	n staff
L	0 1. 2		000
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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:	
	Sch: 64/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date 10/08/2024	5 Payee name Shake Shack
_	Amount (\$)	
6	\$111.44	7 Payee address; City; State; Zip Code 1201 Lake Woodlands
	¥===···	
		The Woodlands, TX 77380
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense Lunch with constituent
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/15/2024	Shake Shack
	Amount (\$)	Payee address; City; State; Zip Code
	\$90.55	1201 Lake Woodlands
		The Weedlende TV 77200
	PURPOSE	The Woodlands, TX 77380
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Lunch for campaign workers
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	12/02/2024	Shake Shack
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	1201 Lake Woodlands
		The Woodlands, TX 77380
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lunch for staffer
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experientare to benefit 6/01	•

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/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: 65/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	07/05/2024	Smart Stop Self Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$93.90	3750 Farm to Market Rd 1488
		Conroe, TX 77384
8	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
		Rental space for campaign materials
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	08/02/2024	Smart Stop Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$93.90	3750 Farm to Market Rd 1488
		Conroe, TX 77384
	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
		Rental space for campaign materials
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/03/2024	Smart Stop Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$93.90	3750 Farm to Market Rd 1488
		Conroe, TX 77384
	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 Rental space for campaign materials
		Tremai space for sampaign materials
	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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Legal Services				OTHER (enter a category not listed above)				
	Credit Card Payment			The Instruction Gui	ide explains how to	compl	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 66/85 Rpt:		Toth, Steve	n H. (The Honor	able)				00067717		
4	Date	5	Payee name					_			
	10/02/2024			Self Storage							
6	Amount (\$)	17	Payee addres		State; Zip (ode.					
Ĭ	\$93.90	ľ	•	to Market Rd 148	•	Jouc					
	400.00		0.00.00								
			Conros TV	77204							
		ļ.,	Conroe, TX			1					
8	PURPOSE OF	(a)		e Categories listed at the		(b)	Description				
	EXPENDITURE		Office Overl	nead/Rental Exp	ense				officeholder living	plete Schedule T.	
							Rental space				
							·		, ,		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	<u> </u>			Office he	eld	
-	expenditure to benefit C/OI										
_	Date	Г	Doves non-								
	11/04/2024		Payee name	Self Storage							
		<u> </u>	·								
	Amount (\$)		Payee addres	•	State; Zip (Jode					
	\$93.90		3750 Farm	to Market Rd 148	38						
			Conroe, TX	77384							
	PURPOSE OF	(a)	Category (Se	e Categories listed at the	e top of this schedule)	(b)	Description				
	EXPENDITURE		Office Overl	nead/Rental Exp	ense		<u> </u>		de of Texas. Com officeholder living	plete Schedule T.	
							Rental space				
							. to their operoo		oapa.g		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	<u> </u>			Office he	eld	
	expenditure to benefit C/OI					g					
	Date	Г	Payee name								
	12/02/2024		,	Self Storage							
					State: 7in (- Codo					
	Amount (\$)		Payee addres	ss;	State; Zip (Joue					
	\$102.90		3750 Faiiii	.0 Market Ru 140	00						
			O TV	77004							
			Conroe, TX	77384		_					
	PURPOSE OF	(a)		e Categories listed at the		(b)	Description		df.T O	onless Cabandula T	
	EXPENDITURE		Office Overl	nead/Rental Exp	ense				officeholder living	plete Schedule T.	
							Rental space				
									1 9		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	 ouaht			Office he	eld	
	expenditure to benefit C/OI				225 00	٠.٠٠					

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: 67/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/06/2024	SpringCreek BarBQ
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.56	19099 Interstate 45 N, Conroe, TX
		Spring, TX 77381
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
		Dinner with staffer
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/29/2024	Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.22	1600 Lamar St
		Houston, TX 77010
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Coffee with constituent
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/11/2024	Stavinoha, lan
	Amount (\$)	Payee address; City; State; Zip Code
	\$652.50	21680 Mueschke Rd
		Tomball, TX 77377
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 68/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/11/2024	Stavinoha, Micah
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$652.50	21680 Mueschke Rd
		Tomball, TX 77377
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	D :	
	Date	Payee name
	07/10/2024	TDCJ
	Amount (\$)	Payee address; City; State; Zip Code
	\$990.49	8712 Shoal Creek Blvd
		Austin, TX 78757
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Purchase of chair for donation
		Check if Austin, TX, officeholder living expense
		State chairs for Love Heals Youth
	Complete ONLY if direct	Condidate/Office helds
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	_	
	Date	Payee name
	07/10/2024	TDCJ
	Amount (\$)	Payee address; City; State; Zip Code
	\$990.49	8712 Shoal Creek Blvd
		Austin, TX 78757
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Purchase of chair for donation Check if travel outside of Texas. Complete Schedule T.
		Chaire for Mighty Oaks gold
		Chairs for Mighty Oaks gala
	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 -Fees

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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: 69/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/30/2024	TDCJ
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$888.32	8712 Shoal Creek Blvd
		Austin, TX 78757
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
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/30/2024	TDCJ
	Amount (\$)	Payee address; City; State; Zip Code
	\$888.32	8712 Shoal Creek Blvd
		Austin, TX 78757
	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/Officeriolder/Political Contributee Contribution for Habitat for Heroes
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	12/03/2024	TDCJ
	Amount (\$)	Payee address; City; State; Zip Code
	\$883.32	8712 Shoal Creek Blvd
	ψ003.32	0112 Ondai Ordai Diva
		Austin, TX 78757
	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
		Donation to Mighty Oaks
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	

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	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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 70/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	07/25/2024	THE WOODLANDS REPUBLICAN WOMEN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$140.18	1212 LAKE ROBBINS DRIVE
		THE WOODLANDS, TX 77380
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 Membership fee for staffers
		Wethbership lee for statiets
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
⊨	Data	
	Date	Payee name
L	08/22/2024	THE WOODLANDS REPUBLICAN WOMEN
	Amount (\$)	Payee address; City; State; Zip Code
	\$107.64	1212 LAKE ROBBINS DRIVE
		THE WOODLANDS, TX 77380
	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 staff attendance at Monthly meeting
		Stan attendance at Monthly meeting
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
⊨	Date	
	Date	Payee name THE WOODLANDS REPUBLICAN WOMEN
	09/16/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$184.52	1212 LAKE ROBBINS DRIVE
		THE WOODLANDS, TX 77380
	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 staff attendance at Monthly meeting
		sum attendance at Monthly meeting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made 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	l Committee Legal Services Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
ᆫ		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 71/85 Rpt:	2 FILER NAME Toth, Steven H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067717
4	Date	5 Payee name	
	10/15/2024	THE WOODLANDS REPUBLICAN WOMEN	
6	Amount (\$) \$184.52	7 Payee address; City; State; Zip Code 1212 LAKE ROBBINS DRIVE THE WOODLANDS, TX 77380	
Ļ	DUDDOOF		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Toyon, Complete Cabadyla T
	EXPENDITURE	1 563	outside of Texas. Complete Schedule T. , TX, officeholder living expense
l		l —	nce at Monthly meeting
		Stan attenual	ice at Monthly Meeting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Г	Date	Payee name	
	11/18/2024	THE WOODLANDS REPUBLICAN WOMEN	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
	` '		
	\$184.52	1212 LAKE ROBBINS DRIVE	
		THE WOODLANDS, TX 77380	
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	1003	n, TX, officeholder living expense
		l — l —	nce at Monthly meeting
			.oo at monany mooning
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/Ol	1	
	Date	Payee name	
	12/09/2024	THE WOODLANDS REPUBLICAN WOMEN	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$184.52	1212 LAKE ROBBINS DRIVE	
	,		
		THE WOODLANDS, TX 77380	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	1003	n, TX, officeholder living expense
l			nce at Monthly meeting
1		Sister ditarious	, .
\vdash	Complete ONU V if allows	Condidate/Officeholder neme	Office hold
ĺ	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	S. Portalitate to benefit 6/01	·	
l			
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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	Legal Services				category not listed above)				
	Credit Card Payment		The Instruction C	Guide explains how to c	ompl	ete this form.				
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)	J
	Sch: 72/85 Rpt:	Toth, S	Steven H. (The Hond	orable)				00067717		
4	Date	5 Payee	name							
	10/16/2024	THE V	VOODLANDS REPU	JBLICAN WOMEN						
6	Amount (\$)	7 Payee	address; City;	State; Zip C	ode					
	\$135.00	1212 l	_AKE ROBBINS DR	IVE						
		THE V	VOODLANDS, TX 7	7380						
8	PURPOSE	(a) Catego	ory (See Categories listed at	the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Contri	butions/Donations M	lade By					plete Schedule T.	
	ZA ZADITORZ	Candi	date/Officeholder/Po	litical Committee		Check if Austin	, TX,	officeholder living	g expense	
						CONTINUUION				
9	Complete ONLY if direct	Candida	te/Officeholder name	Office	ught			Office h	ald	
9	Complete ONLY if direct expenditure to benefit C/OI		te/Onicendider name	Office so	ugni			Office h	eiu	
_										_
	Date	Payee		IDLICANI MONTENI						
	12/31/2024		VOODLANDS REPU							
	Amount (\$)		address; City;	State; Zip C	ode					
	\$103.10	12121	_AKE ROBBINS DR	IVE						
		T	WOOD! ANDO TV 7	7000						
			VOODLANDS, TX 7							
	PURPOSE OF		Ory (See Categories listed at	the top of this schedule)	(b)	Description	outo:	do of Toyon Com	valete Cebedule T	
	EXPENDITURE	Fees						officeholder living	plete Schedule T. g expense	
						Membership	fee	for staffers		
	Complete ONLY if direct		te/Officeholder name	Office so	ught			Office h	eld	
	expenditure to benefit C/OI	-1								
	Date	Payee	name							
	08/07/2024	TRS S	Steaks and More							
	Amount (\$)	Payee	address; City;	State; Zip C	ode					
	\$226.36	892 H	urst St							
		center	, TX 75935							
	PURPOSE	(a) Catego	Ory (See Categories listed at	the top of this schedule)	(b)	Description				_
	OF EXPENDITURE		Beverage Expense	,		Check if travel			plete Schedule T.	
	EXPENDITORE							officeholder living	g expense	
						Lunch for sta	.11			
	Complete ONLY if divert	Condid-	to/Officebolder	O#:22	uebt.			Office !-	ald	
	Complete ONLY if direct expenditure to benefit C/OI		te/Officeholder name	Office so	ugnt			Office h	c iu	
	·									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 73/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/15/2024	TeleFloral
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$94.79	11444 West Olympic Blvd
		Los Angeles, CA 90064
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
		Memorial flowers for constituent
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
_	Date	Payee name
	12/02/2024	Texas Home School Coalition
	Amount (\$)	Payee address; City; State; Zip Code
	\$194.00	1108 Lavaca St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF 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
		contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/12/2024	Texas Scorecard
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	1501 Leander Dr
		Leander, TX 78641
	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
		Policy material for campaign staff
	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 Comi

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 74/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/09/2024	Texas Values Action
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 900 Congress Ave
	Ψ50.00	Suite 220
		Austin , TX 78701
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
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiditure to benefit C/Oi	
	Date	Payee name
	12/06/2024	Texas Web Design
	Amount (\$) \$1,417.50	Payee address; City; State; Zip Code 519 Sam Houston Parkway
	\$1,417.50	519 Saili Houstoil Paikway
		Houston , TX 77060
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Web design work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	• · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	11/04/2024	The Table Madeley
	Amount (\$) \$5.40	Payee address; City; State; Zip Code 316 Madeley St
	Ψ3.40	5_5
		Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Reverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		beverage for constituent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	

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/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: 75/85 Rpt:	Toth, Steven H. (The Honorable) 00067717				
4	Date	5 Payee name				
	08/23/2024	Third Gen Coffee				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$26.26	25136 Grogans Park Dr				
		The Woodlands, TX 77380				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Coffee for staff				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OF	н				
	Date	Payee name				
	10/04/2024	Toth, Steve				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$8,584.41	67 Chestnut Meadow Dr				
	, -, ·· ,	or Gridding medical 2.				
		Conroe, TX 77384				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Mileage Check if travel outside of Texas. Complete Schedule T.				
	!	Check if Austin, TX, officeholder living expense 2022				
	!					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·				
_	Date	Davide name				
	10/04/2024	Payee name Toth, Steve				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$4,686.15	67 Chestnut Meadow Dr				
		Conroe, TX 77384				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Mileage Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		2023				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH					

SCHEDULE F1

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

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

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

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: 76/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4 Date	5 Payee name
10/04/2024	Toth, Steve
6 Amount (\$) \$6,066.27	7 Payee address; City; State; Zip Code 67 Chestnut Meadow Dr
	Conroe, TX 77384
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Mileage (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 2024 Jan to September
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
10/21/2024	U-Haul
Amount (\$) \$542.36	Payee address; City; State; Zip Code 1305 Interstate 45 S.
	Conroe, TX 77301
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Truck rental for campaign
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/12/2024	U-Haul
Amount (\$) \$79.13	Payee address; City; State; Zip Code 1305 Interstate 45 S.
	Conroe, TX 77301
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Truck rental
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

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

	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: 77/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	08/01/2024	US Pastors Council
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$205.02	PO Box 692207
		Houston, TX 77269
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/24/2024	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.00	10300 Gosling Road
		The Woodlands, TX 77381
	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 stamps
		Campang notampo
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/16/2024	United Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$338.16	233 Wacker Dr
	Ψ550.10	200 (140,101 2)
		Chicago, IL 60606
_	PURPOSE	In.
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		travel to Republican Convention
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	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

	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: 78/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	12/31/2024	United Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$743.10	233 Wacker Dr
		Chicago, IL 60606
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Travel for staffer to DC for campaign policy event
		Traversor station to be for earnpuight policy event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
-	Date	Dougo nama
		Payee name
	07/24/2024	Verizon
	Amount (\$)	Payee address; City; State; Zip Code
	\$90.75	1335 Lake Woodlands Dr
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Coll convice for compaging them.
		Cell service for campaign phone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
_	_	
	Date	Payee name
	09/04/2024	Verizon
	Amount (\$)	Payee address; City; State; Zip Code
	\$166.37	1335 Lake Woodlands Dr
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Coll convice for compaign phone
		Cell service for campaign phone
_	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	Il 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: 79/85 Rpt:	Toth, Steven H. (The Honorable) 00067717			
4	Date	5 Payee name			
	10/11/2024	Verizon			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$346.93	1335 Lake Woodlands Dr			
		The Woodlands, TX 77380			
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.			
		Check if Austin, TX, officeholder living expense Cell service for campaign phone			
		Cell service for earlipaign priorie			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
ľ	expenditure to benefit C/OI	the state of the s			
H	Date	Payee name			
	11/18/2024	Verizon			
⊢	Amount (\$)	Payee address; City; State; Zip Code			
	\$122.03	1335 Lake Woodlands Dr			
	Ψ122.00	1000 Lake Woodianas Bi			
		The Woodlands, TX 77380			
	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 Cell service for campaign phone			
		Cell service for campaign phone			
┝	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI				
F	Date	Payee name			
	11/18/2024	Verizon			
H	Amount (\$)	Payee address; City; State; Zip Code			
	\$577.72	1335 Lake Woodlands Dr			
		The Woodlands, TX 77380			
	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 balance on campaign phone			
		balance on campaign phone			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·			
\vdash					
l					

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

	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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 80/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	09/27/2024	Wayne Mac Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.00	PO Box 2234
		Conroe, TX 77305
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. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Continuation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/Ol	
⊨	Date	Davies asses
		Payee name
L	09/16/2024	Wendy's
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.39	3032 College Park Dr
		Conroe, TX 77384
	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 Lunch for constituent
		Lunch for constituent
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Date	
	Date	Payee name
	10/30/2024	WhatABurger
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.01	3073 College Park Dr
		The Woodlands, TX 77384
	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 Lunch for campaign workers
		Lunch for campaign workers
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 81/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	08/29/2024	White Rose Resistance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$183.40	1120 S. Rackham Way
		Suite 300
		Meridian, ID 83642
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
		Continuation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	11/11/2024	White, Ronnie
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,300.00	14111 Lake Lodge Dr
		Conroe, TX 77384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
		Gonilado Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/18/2024	Willies Grill and Ice House
	Amount (\$)	Payee address; City; State; Zip Code
	\$328.93	16846 Interstate 45 S
		Conroe , TX 77384
	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
		Dinner with constituents
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

	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: 82/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	09/30/2024	WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		for Don McLaughlin
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
	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
		ioi caronile i any
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
	Date	Payee name
L	09/30/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		1 of Bell Bulligation
	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 -

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
•	Sch: 83/85 Rpt:	Toth, Steven H. (The Honorable)
Ļ	· · · · · · · · · · · · · · · · · · ·	
4	Date	5 Payee name
	09/30/2024	WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
8	DUDDOCE	
o	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 Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		For Janie Lopez
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/10/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1776 Wilson Blvd
	Ψ230.00	
		Suite 503
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee \times Candidate/Officeholder living expense For Mark Lahood
		FOI Wark Landou
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/11/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
	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
		1 of Brandon Grorgmon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
ı		
—		

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)
L	Sch: 84/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	10/15/2024	WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$650.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		For Kingwood Tea Party
Ļ		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
	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
		For Lindsay Dawson
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
L	10/31/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	THE LIBITORY	Candidate/Officeholder/Political Committee
		For Steven Kinard Campaign
	Complete ONLY if alias -t	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	d 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: 85/85 Rpt:	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	11/19/2024	WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	1776 Wilson Blvd
		Suite 503
		Arlington, VA 22209
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		ior workgomery country rear arty rive
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/21/2024	Woodlands Screen Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,201.58	285 Sawdust
		The Woodlands, TX 77380
	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
		Tee shirts for campaign workers
		100 chinto for campaign workers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.			ages Schedule K: /2 Rpt: 120/121	
_	FILER NAME			Filer ID	·	ilore)
_		ı H. (The Honorable)		00067	`	-ileis)
_				00007		
4	Date 12/25/2024	5 Name of person from whom amount is received Simmons Bank			8 Amount (\$)	\$14.33
	12/25/2024					Φ14.33
		6 Address of person from whom amount is received; City; State; Zip Code				
		Pine Bluff, AR 71611				
			litic	al conti	Iribution returned to filer	
		Interest Deposit	,,,,,,	ar corre	industricum to mor	
_	Date	Name of person from whom amount is received			Amount (\$)	
	10/24/2024	Simmons Bank			Amount (\$)	\$14.25
	10/24/2024					Ψ14.23
		Address of person from whom amount is received; City; State; Zip Code				
		Pine Bluff, AR 71611				
		Purpose for which amount is received Check if po	litic	al conti	ribution returned to filer	
		Interest Deposit				
	Date	Name of person from whom amount is received			Amount (\$)	
	07/24/2024	Simmons Bank				\$3.69
	Address of person from whom amount is received; City; State; Zip Code					
		, dates of person from amount is received, Oily, State, Zip Code				
		Pine Bluff, AR 71611				
			litic	al conti	ribution returned to filer	
		Interest Deposit				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/25/2024	Simmons Bank				\$5.61
		Address of person from whom amount is received; City; State; Zip Code				
		Dino Divit AD 74044				
		Pine Bluff, AR 71611				
		Purpose for which amount is received	olitic	al conti	ribution returned to filer	
_		·			T	
	Date	Name of person from whom amount is received			Amount (\$)	ФО 40
	09/24/2024	Simmons Bank				\$8.43
		Address of person from whom amount is received; City; State; Zip Code				
		Pine Bluff, AR 71611				
			olitic	al conti	I ribution returned to filer	
		Interest Deposit	muc	ai com	indution retained to mer	
		· F · · · ·				

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 121/121 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Toth, Steven H. (The Honorable) 00067717 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 12/24/2024 \$11.81 Simmons Bank 6 Address of person from whom amount is received; City; State; Zip Code Pine Bluff, AR 71611 Purpose for which amount is received Check if political contribution returned to filer Interest Deposit