CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Comm 00081422		2 Total pages	filed: 15
3	CANDIDATE /	MS / MRS / MR	FIRST		MI		
ľ	OFFICEHOLDER	The Honorable	Jacey R.			OFFICE	USE ONLY
	NAME		Jacey R.			Date Received	
						ELECTRONIC	CALLY FILED
						01/15/2025	
		NICKNAME	LAST		SUFFIX	01/13/2023	
			Jetton				
4	CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE # CI	ΓY·	ZIP CODE	Date Hand-delivered	l or Date Postmarked
	OFFICEHOLDER	1723 Hearthside Ct.		,			
	MAILING	1723 Healthside Ct.				Receipt #	Amount
	ADDRESS						, another
	Change of Address	Richmond, TX 77406					
						Date Processed	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
	TREASURER		Fanny				
	NAME		ranny				
		NICKNAME	LAST		SUFFIX		
			Jetton				
	0.000						
6	CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	AP	T / SUITE #; CITY;	S	TATE; ZIP CODE
	ADDRESS	1723 Hearthside Court					
	(Residence or Business)	Richmond, TX 77406					
7	CAMPAIGN	AREA CODE PHO		EXTENSION			
Ľ	TREASURER		INE NUMBER	EXTENSION			
	PHONE	(832) 298-8088					
8	REPORT						
	TYPE	X January 15	30th day befor	e election	Runoff		ampaign treasurer
						appointment (of	fficeholder only)
		July 15	8th day before	election	Exceeded modified	Final Report (A	ttach C/OH-FR)
					reporting limit		
9	PERIOD	Month Day Year			Month Day	Year	
	COVERED	07/01/2024	ті	HROUGH	12/31/2024	1	
		01/01/2021			12,01,202		
10	ELECTION	ELECTION DATE			ELECTION TYPE	_	
		Month Day Year		Primary	Runoff	Other	
				General	Special		
					- 		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
		State Representative Dis	strict 26 Fort Ben	ld			
1							
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I			GO ⁻	TO PAGE 2			
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Fo	ms provided by Te	exas Ethics Commission	www.e	thics.state.tx.ι	S	Ver	sion V4.1.0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 15

13 C / OH NAME	Jetton, Jacey R. (The	Honorable)	14 Filer ID (00081422	Ethics Comn	nission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t I officeholders are required to report this information	he candidate's or office	holder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	ŝS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	3)	\$	3,533.28
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$	2,119.19
	4. TOTAL POLITIC	AL EXPENDITURES		\$	16,344.63
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L/ RIOD	AST DAY OF THE	\$	2,835.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		The Hono	orable Jacey R. Jetto	n	
		Signature of	Candidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		_day
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administerin	ig oath
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Version V4	.1.0.48da51f7

SUBTOTALS - C/OH	CC	FORM C/OH OVER SHEET PG 3 3 of 15
18 FILER NAME Jetton, Jacey R. (The Honorable)	19 Filer ID 00081422	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 3,533.28
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 16,344.63
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/15 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Jetton, Jacey R. (The Honorable) 00081422 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 12/03/2024 The Table Fort Bend \$3,533.28 6 Contributor address; City; State; Zip Code Richmond, TX 77406 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

			EXPENDITURE C	ATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Transport Food/Beverage Expense Polling Expense Travel i Gift/Awards/Memorials Expense Printing Expense Travel i				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 1/11 Rpt: 5/15		Jetton, Jacey R. (The Honorabl	le)				00081422
4	Date	5	Payee name				1	
	07/02/2024		300 Morton Street Investments					
6	Amount (\$)	7	Payee address; City;	State;	Zip Cod	e		
	\$1,000.00		306 Morton Street					
			Richmond, TX 77469					
8	PURPOSE	(a)	Category (See Categories listed at the top	o of this sche	edule)	b) Description		
	OF EXPENDITURE		Office Overhead/Rental Expense		,	Check if travel		ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
						campaign off	ice	rental expense
	Complete ONIL V if direct		Candidate/Officeholder name		Office soug	ht.		Office held
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		anuluale/Onicenoider name	U	Jince soug	nt		Office held
	Date		Payee name					
	08/05/2024		300 Morton Street Investments					
	Amount (\$)		Payee address; City;	State;	Zip Cod	e		
	\$1,000.00		306 Morton Street					
			Richmond, TX 77469					
	PURPOSE	(a)	Category (See Categories listed at the top	o of this sche	edule)	b) Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						campaign on	ice	rental expense
_	Complete ONLY if direct		Candidate/Officeholder name		Office soug	ht		Office held
	expenditure to benefit C/OI			Ŭ	Since Soug			
⊨	Date		Payee name					
	09/05/2024		300 Morton Street Investments					
	Amount (\$)		Payee address; City;	State;	Zip Cod	e		
	\$1,000.00		306 Morton Street					
			Richmond, TX 77469					
	PURPOSE OF	(a)	Category (See Categories listed at the top		edule)	b) Description		
	EXPENDITURE		Office Overhead/Rental Expense	se				ide of Texas. Complete Schedule T. , officeholder living expense
								rental expense
								-
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice soug	ht		Office held
⊢								

			EXPENDITURE CATEG	ORIES FOR	R BC)X 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explai	Office Ove Polling Ex Printing Ex Salaries/W	rhead pense pens (ages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/11 Rpt: 6/15		Jetton, Jacey R. (The Honorable)					00081422
4	Date	5	Payee name					
	10/07/2024		300 Morton Street Investments					
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	de			
	\$1,000.00		306 Morton Street					
			Richmond, TX 77469					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense
								rental expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	11/15/2024		300 Morton Street Investments					
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	de			
	\$1,000.00		306 Morton Street					
			Richmond, TX 77469					
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense	conocalicy		·	outsi	ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
						campaign offi	ice	rental expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	12/23/2024		Adobe Acrobat					
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	de			
	\$63.74		345 Park Avenue					
			San Jose, CA 95110					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense
								e fee for campaign
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	ght			Office held

			EXPENDITURE CATEG	ORIES FOR	R BC	DX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing Ex Salaries/W	pense kpense kpens /ages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 3/11 Rpt: 7/15		Jetton, Jacey R. (The Honorable)					00081422
4	Date 11/23/2024	5	Payee name Adobe Acrobat					
_								
6	Amount (\$) \$63.74	7	Payee address; City; Sta 345 Park Avenue	te; Zip Co	de			
			San Jose, CA 95110					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Office Overhead/Rental Expense	schedule)	(b)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense e fee for campaign
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	10/23/2024		Adobe Acrobat					
	Amount (\$) \$63.74		Payee address; City; Sta 345 Park Avenue	te; Zip Co	de			
			San Jose, CA 95110					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Office Overhead/Rental Expense	schedule)	(b)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense e fee for campaign
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	09/23/2024		Adobe Acrobat					
	Amount (\$) \$63.74		Payee address; City; Sta 345 Park Avenue	te; Zip Co	de			
			San Jose, CA 95110					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Office Overhead/Rental Expense	schedule)	(b)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense e fee for campaign
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 8/15	Jetton, Jacey R. (The Honorable)	00081422
4	Date 08/23/2024	Payee name Adobe Acrobat	
6	Amount (\$) \$63.74	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense are fee for campaign
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/23/2024	Adobe Acrobat	
	Amount (\$) \$63.74	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense are fee for campaign
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/29/2024	Attack Poverty	
	Amount (\$) \$400.00	Payee address; City; State; Zip Code 3737 Greenbriar #100 Stafford, TX 77477	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense rual gala event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

				EXPENDITU				X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Rela Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not lister						quipment & Related Expens	e	
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 5/11 Rpt: 9/15			ey R. (The Hon	orable)					00081422		
4	Date	5	Payee name	1								
	12/16/2024		Capitol Gift									
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$151.55		1400 Cong	ress Ave								
			E1.006									
			Austin, TX	78701								
_												
8	PURPOSE OF			ee Categories listed at		nedule)	(b)	Description	outoi	de of Toylog Com	plete Schedule T.	
	EXPENDITURE		Gift/Awards	s/Memorials Exp	bense					officeholder living	•	
								Gifts to const			, expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	(Dffice sou	ght			Office he	eld	
	Date		Payee name	1								
	12/05/2024	I	Capitol Gift									
	Amount (\$)	<u> </u>	Payee addre	•	State	; Zip Co	do					
	\$117.99	I	1400 Cong	-	Sidic	, zip co	uc					
	ΦΤΤ1.99	I	•	iess Ave								
			E1.006									
			Austin, TX	78701								
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Gift/Awards	s/Memorials Exp	oense						plete Schedule T.	
										officeholder living	j expense	
								Gifts to const	itue	ents		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	(Office sou	ght			Office he	eld	
	Date		Payee name									
	09/18/2024		ClickUp									
-	Amount (\$)	⊢	Payee addre	ess; City;	State	; Zip Co	de					
	\$252.00		350 Tenth			,						
	\$202.00		Suite 500									
												
			San Diego	CA 92101								
	PURPOSE OF			ee Categories listed at		nedule)	(b)	Description				
	EXPENDITURE			ns/Donations M							plete Schedule T.	
	-		Candidate/	Officeholder/Po	litical Comm	nittee				officeholder living	j expense	
								campaign offi	ice	supplies		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	(Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	Event Expense L Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 6/11 Rpt: 10/15		Jetton, Jacey R. (The Honorable)				00081422			
4	Date	5	Payee name							
	12/19/2024		Continental Buslines LLC							
6	Amount (\$)	7	Payee address; City; State; Z	Zip Coc	le					
	\$257.50		8805 N. Arkansas St.							
			Houston, TX 77093							
8	PURPOSE	(2)			(b) Deceription					
0	OF	(a)	Category (See Categories listed at the top of this schedu Contributions/Donations Made By	lule)	b) Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Candidate/Officeholder/Political Committe	tee			, officeholder living expense			
			Bus sponsorship for Randle HS football							
					-					
9	Complete ONLY if direct	I(Candidate/Officeholder name Offi	fice soug	ht		Office held			
	expenditure to benefit C/OI	Н		0						
⊨	Date	Γ	Payee name							
	11/18/2024		Fort Bend Forward							
	Amount (\$)		Payee address; City; State; 2	Zip Coc	le					
	\$200.00		445 Commerce Green							
			Sugar Land, TX 77478							
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	lule)	b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.			
					Check if Austin, TX, officeholder living expense					
					Membership	⊢e	es			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Offi	fice soug	ht		Office held			
		_								
	Date		Payee name							
	07/18/2024		Mailchimp							
	Amount (\$)		Payee address; City; State; 2	Zip Coc	le					
	\$143.91		405 N Angier Ave. NE							
			Atlanta, GA 30308							
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	lule)	b) Description					
	OF EXPENDITURE		Advertising Expense	,		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					Monthly ema	il m	narketing subscription fee			
	Complete ONLY if direct		Candidate/Officeholder name Offi	fice soug	ht		Office held			
	expenditure to benefit C/OI	-								

			EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Exper Gift/Awards/Memorials mittee Legal Services The Instruction G	s Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)			
	Sch: 7/11 Rpt: 11/15		Jetton, Jacey R. (The Hond	orable)				00081422				
4	Date 08/18/2024		Payee name Mailchimp									
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de						
	\$143.91		405 N Angier Ave. NE Atlanta, GA 30308		,							
8	PURPOSE	(a)	Cotogony			(b) Description						
5	OF		Category (See Categories listed at Advertising Expense	the top of this sch	iedule)	Check if trave	in, TX	ide of Texas. Comp K, officeholder living (narketing sub:	expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office hel	d			
	Date		Payee name									
	09/18/2024		Mailchimp									
	Amount (\$)		Payee address; City;	State	; Zip Co	de						
	\$143.91		405 N Angier Ave. NE Atlanta, GA 30308									
	PURPOSE OF EXPENDITURE		Category (See Categories listed at Advertising Expense	the top of this sch	nedule)	Check if Aus	in, TX	ide of Texas. Comp (, officeholder living o narketing sub:	expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office hel	d			
	Date		Payee name									
	10/18/2024		Mailchimp									
	Amount (\$) \$143.91		Payee address; City; 405 N Angier Ave. NE	State;	; Zip Co	de						
			Atlanta, GA 30308									
	PURPOSE OF EXPENDITURE		Category _{(See Categories listed at} Advertising Expense	the top of this sch	iedule)	Check if Aus	in, TX	ide of Texas. Comp 4. officeholder living 1. narketing Sub	expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office sou	ght		Office hel	d			

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Odfice Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/11 Rpt: 12/15	Jetton, Jacey R. (The Honorable)	00081422
4	Date 11/18/2024	Payee name Mailchimp	
6	Amount (\$) \$143.91	Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 Atlanta, GA 30308	
8	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense Marketing subscription fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/18/2024	Mailchimp	
	Amount (\$) \$143.91	Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 Atlanta, GA 30308	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense marketing subscription fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/01/2024	Rally Right	
	Amount (\$) \$500.00	Payee address;City;State;Zip Code575 Pharr Rd	
		Atlanta, GA 30355	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tra Food/Beverage Expense Polling Expense Tra By - Gift/Awards/Memorials Expense Printing Expense Tra					Solicitation/Fundraising Expense Transportation Equipment & Relate Travel in District Travel Out of District OTHER (enter a category not listed			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Comm	ission Filers)	
	Sch: 9/11 Rpt: 13/15		Jetton, Jacey R. (The Honora	able)				00081422		
4	Date	5	Payee name							
	07/02/2024		Rotary Club of Katy							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de				
	\$265.00		PO Box 70							
			Katy, TX 77492							
0	DUDDOCE	(0)	-			(b) p				
8	PURPOSE OF	(a)	Category (See Categories listed at the		iedule)	(b) Description	nutsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Office Overhead/Rental Expe	lise				officeholder living expense		
						membership				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice sou	ght		Office held		
	Date		Payee name							
	10/25/2024		Texas Correctional Industries	6						
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$338.29		PO Box 4013		,					
	\$666.25									
			Huntsville, TX 77342							
	PURPOSE OF	(a)	Category (See Categories listed at the		nedule)	(b) Description				
	EXPENDITURE		Gift/Awards/Memorials Expen	nse				de of Texas. Complete Schedule T. officeholder living expense		
						Gifts to const				
							intac			
	Complete ONLY if direct		Candidate/Officeholder name		Office sou	abt		Office held		
	expenditure to benefit C/OF				Since Sou	gint		Onice neid		
		_								
	Date		Payee name							
	11/08/2024		Texas Correctional Industries	6						
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$3,533.28		PO Box 4013							
			Huntsville, TX 77342							
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		Gift/Awards/Memorials Expen	nse				de of Texas. Complete Schedule T.		
								officeholder living expense		
						Gifts to const	lute	ents		
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	ght		Office held		
	expenditure to benefit C/OI									

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Event Expense Fees Food/Beverage Expense y - 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 OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 10/11 Rpt: 14/15		Jetton, Jacey R. (The Honorable)					00081422		
4	Date	5	Payee name				L			
	10/31/2024		The Gospel Community							
6	Amount (\$)	7 Payee address; City; State; Zip Code								
-	\$500.00	1723 Hearthside Court								
		Richmond, TX 77406								
	DUDDOCE				(1)					
8	PURPOSE OF	OF						lete Schedule T		
	EXPENDITURE									
		The Table sponsorship								
9	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date		Payee name							
	12/26/2024 The Thankful Ones									
	Amount (\$) Payee address; City; State; Zip Code									
	\$529.80 4011 Paseo Campanario Dr.									
			Richmond, TX 77406							
	PURPOSE OF EXPENDITURE	OF Advertising Expanse								
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	l ught			Office he	ld	
	Date	Γ	Payee name							
07/03/2024			Verizon							
	Amount (\$) Payee address; City; State; Zip Code									
	\$293.68 PO Box 489									
	Newark, NJ 07101									
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF OF OF OF OF					loto Schodulo T					
CONTRACTOR OF CONTRACT CONTRAC					Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	campaign office phone expense									
					1	. 2		·		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office he	ld	