# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00086083		2 Total pages filed: 32
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Carl H.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LACT		CLIEFIV	01/14/2025
	NICKNAME	LAST Tepper		SUFFIX	01/14/2020
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
MAILING	PO Box 94534				Receipt # Amount
ADDRESS					Receipt # Amount
Change of Address	Lubbock, TX 79493				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER NAME	Mr.	Jay C.			
	NICKNAME	LAST		SUFFIX	
		House			
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP <sup>*</sup>	T / SUITE #; CITY	STATE; ZIP CODE
TREASURER ADDRESS	4609 86th St.				
(Residence or Business)					
(Nesidence of Eduliness)	Lubbock, TX 79424				
7 044541011	4DE4 00DE - DUO	VE NUMBER - F	VTENCION		
7 CAMPAIGN TREASURER		NE NUMBER E	EXTENSION		
PHONE	(806) 470-6163				
8 REPORT					
TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasurer
		_		_	appointment (officeholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year	T1	IDOLICII	Month Day	Year
00121123	10/27/2024	IH	IROUGH	12/31/202	24
10 ELECTION	ELECTION DATE			ELECTION TYPE	
10 ELECTION	ELECTION DATE  Month Day Year		rimary	Runoff	Other
	11/05/2024		-		
		XG	eneral	Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	
	State Representative Dist	rict 84 Lubbock		State Represen	tative District 84
		GO T	O PAGE 2		

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 32

13 C / OH NAME	Tepper, Carl H. (The	Honorable)	<b>14</b> Filer ID (00086083	Ethics Comm	nission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to difficeholders are required to report this information	he candidate's or office	eholder's knov	vledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Texas Alliance for Life PAC				
		COMMITTEE ADDRESS				
	SPECIFIC	8000 Centre Park Drive Suite 380				
		Austin, TX 78754				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Shaw, James				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		4505 Corazon Cv				
		Round Rock, TX 78681				
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$	0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	;)	\$	43,006.79	
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					0.00	
	\$	8,260.12				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L $ ho$ RIOD	AST DAY OF THE	\$	87,524.12	
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 Carl H. Teppe	r		
			Candidate or Officehol			
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subscribed before me, by the said, this the						
		ertify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administerin	g oath	

## **SUBTOTALS - C/OH**

## FORM C/OH **COVER SHEET PG 3**

		3 of 32		
<b>18</b> FILER NAME Tepper, Carl	H. (The Honorable)	<b>19</b> Filer ID 00086083	(Ethics Commissi	on Filers)
20 SCHEDULE SI NAME OF SCH			SUBTOTAL	AMOUNT
1. X SO	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	43,006.79
2. X S0	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X S0	CHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4. X So	CHEDULE E: LOANS		\$	0.00
5. X So	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	8,260.12
6. X So	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7. X So	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
8. X So	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X So	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10. S	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$	
11. So	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F O FILER	RETURNED	\$	
			•	

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/32	
2	FILER NAME Tepper, Carl	H. (The Honorable)			3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/16/2024	<ul><li>5 Full name of contributor</li><li>A&amp;M PAC</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	٩	Employer (See Instructions	;) 		
	i illoipai ooda	panerry cos une (coe mondono)		Employer (eee meadeante	,,		
	Date 11/27/2024	Full name of contributor AT&T Texas PAC Contributor address; City; Sta		)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 12/17/2024	Full name of contributor Ahlberg, Trevor Contributor address; City; Sta		)		Amount of Contribution (\$)	\$2,500.00
		Irving, TX 75038					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Cottonwood Financial	5)		
	Date 11/21/2024	Full name of contributor Associated General Contra Contributor address; City; Sta Austin, TX 78768				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/30/2024	Full name of contributor BEEF PAC Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 5/32	
2	FILER NAME Tepper, Carl	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 11/27/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
0	Dringing occur	Austin, TX 78701  pation / Job title (See Instructions)	Employer /See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	) 		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_Blackridge  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		,		,		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Brannan, Ryan Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$520.51
		Austin, TX 78746				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions) Brannan Associates	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Charter Communications, Inc. Texas PAC  Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Charter Schools Now PAC Contributor address; City; State; Zip Code Austin, TX 78704	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 6/32	
2	FILER NAME Tepper, Carl	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 11/27/2024	5 Full name of contributor	C00035006 )	7	Amount of Contribution (\$)	\$1,000.00
		San Francisco, CA 94583				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ Delisi Communications PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_ HILLCO PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701  pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instituctions)	Employer (See Instructions	)		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_ HS LAW 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	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_Heller, J David Contributor address; City; State; Zip Code  Boca Raton, FL 33432			Amount of Contribution (\$)	\$750.00
	Principal occu President CE	pation / Job title (See Instructions)	Employer (See Instructions NRP Group	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/32	
2	FILER NAME Tepper, Car	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/16/2024	Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78701				
8	Principal occu Partner	ipation / Job title (See Instructions)	9 Employer (See Instructions HillCo Partners	)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ Hrncirik, Bobbye (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.03
	Dringing occu	Lubbock, TX 79423  upation / Job title (See Instructions)	Employer (See Instructions			
	Vice Preside		UMC Health System	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Hull, Daniel Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$260.25
		Boerne, TX 78006				
	Construction	pation / Job title (See Instructions)  Executive	Employer (See Instructions NRP Group	)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ INDEPAC Contributor address; City; State; Zip Code Austin, TX 78750			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID#:_ Kickapoo Traditional Tribe of Texas  Contributor address; City; State; Zip Code  Eagle Pass, TX 78852			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/32	
2	FILER NAME Tepper, Carl	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/17/2024	5 Full name of contributor	)	7	Amount of Contribution (\$)	\$500.00
_	<u> </u>	Austin, TX 78760				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Lubbock County Republican Party  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,200.00
	Principal occu	Lubbock, TX 79414  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ Lubbock Fire Fighters PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Matz and Company, LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_McCartt, J.  Contributor address; City; State; Zip Code  Austin, TX 78703			Amount of Contribution (\$)	\$500.00
	Principal occu Partner	pation / Job title (See Instructions)	Employer (See Instructions HillCo Partners	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/32	
2	FILER NAME Tepper, Carl	H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/16/2024	<ul> <li>5 Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$500.00
_	<u> </u>	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas State PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ Reagan National Advertising of Nevada Contributor address; City; State; Zip Code Salt Lake City, UT 84116			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_ Southern Glazer's PAC of Texas  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ TXTA TRUCKPAC 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	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/32	
2	FILER NAME	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
	repper, Cari	· · · · · · · · · · · · · · · · · · ·				
4	Date 12/16/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:_ Texas Aggregate &amp; Concrete Association PAC</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$1,000.00
_		Round Rock, TX 78681				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	11/27/2024	Texas Agricultural Co-op Council PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Round Rock, TX 78664				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	11/27/2024	Texas Dental Association PAC				\$500.00
		Contributor address; City; State; Zip Code  Austin, TX 78704				
	Dringinal occu		Employer (See Instructions	<u> </u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	,		
	Date	Full name of contributor  ut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	12/17/2024	Texas Land Title Association PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78703				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	12/17/2024	Texas Lobby Partners LLP				\$1,000.00
		Contributor address; City; State; Zip Code				
	D	Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/32	
2	FILER NAME	H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/16/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Podiatric Medical Association 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 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Fire Fighters Action of Contributor address; City; State; Zip Code	Committee		Amount of Contribution (\$)	\$750.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
		,				
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Statewide Telephone Cooperative, Inc. P. Contributor address; City; State; Zip Code  Austin, TX 78701	AC		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Texas and Southwestern Cattle Raisers Associa Contributor address; City; State; Zip Code  Fort Worth, TX 76185	ution		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/32	
2	FILER NAME Tepper, Carl	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/16/2024	5 Full name of contributor	)	7	Amount of Contribution (\$)	\$1,000.00
_	Point in all a servi	Lubbock, TX 79493-6840				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/16/2024	Full name of contributor out-of-state PAC (ID#:_ Veterinarian PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78754  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/17/2024	Full name of contributor x out-of-state PAC (ID#: WALPAC For Responsible Government PAC W Contributor address; City; State; Zip Code  Bentonville , AR 72716			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_WTGB PAC Contributor address; City; State; Zip Code Lubbock, TX 79407			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_Ziegler, Nathan  Contributor address; City; State; Zip Code  Lubbock, TX 79424			Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Ziegler Estate Law Grou			

PLE	DGED CONTRIBUTIONS		SCHEDULE B
т	he Instruction Guide explains how to com	plete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 13/32
2 FILER N			3 Filer ID (Ethics Commission Filers)
	Carl H. (The Honorable)		00086083
4 TOTAL	OF UNITEMIZED PLEDGES		\$ 0.0
<b>5</b> Date	6 Full name of pledgor out-of-state PAC (	(ID#:	_) 8 Amount of 9 In-kind description pledge (\$) (If applicable)
	7 Pledgor Address; City; State; Zip C	ode	
			Check if travel outside of Texas. Complete Schedule
10 Principal	occupation / Job title (See Instructions)	11 Employer (See In:	structions)

	LOANS					SCHED	ULE E
	The Instruction	on Guide explains how	orm.	1	ages Schedule E: /1 Rpt: 14/32		
2	FILER NAME Tepper, Carl H.	(The Honorable)			3 Filer ID 00086	(Ethics Commissio	n Filers)
4	TOTAL OF UN	IITEMIZED LOANS			1	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$	i)
6	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions	s)	13 Employer (See Instruction	s)	•	
14	Description of Coll None	lateral		15 Check if personal funds w	ere deposite	d into political accoun (See Instruction	
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaran	teed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction	s)		

#### 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	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: 1/18 Rpt: 15/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	12/06/2024	Lin Asian Bar + Dim Sum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$188.52	1203 W 6th St
L		Austin, TX 78703
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
		Meeting to discuss campaign/officeholder issues
		mooting to disouse sampaign/onition issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	12/10/2024	The Stephen F. Austin Royal Sonesta Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.00	701 Congress Avenue
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Parking fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
┢	Date	Payee name
	10/31/2024	Aaron Kinsey for Texas SBOE District 15
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	PO Box 605
		Midland, TX 79702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Campaign contribution
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		
1		
1		

#### 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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica			Legal Services	is Expense	Salaries/V		se s/Contract Labor		OTHER (enter a	strict a category not listed above	)
	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: 2/18 Rpt: 16/32		Tepper, Car	l H. (The Hond	orable)					00086083		
4	Date	5	Payee name					•				
	12/09/2024	ı		ng Manageme	ent Compan	y						
6	Amount (\$)	7	Payee addres	ss; City;	State	e; Zip Co	de					
	\$28.15		583 W 6th S	St								
			Austin, TX 7	8701								
8	PURPOSE	⊢		e Categories listed at	t the ten of this es	hadula)	(b)	Description				
ľ	OF	(.,	Travel Out o		tine top of this sci	nedule)	(~)	_ `	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE		avo. out o	2.0000				Check if Austin,	, TX,	officeholder livin	g expense	
								Parking fee in	ı D	owntown A	ustin	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld	
	experientare to benefit 6/01											
	Date		Payee name									
	11/08/2024		Austin-Bergs	strom Internati	onal Airport							
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$22.95		3600 Presid	ential Blvd								
			Austin, TX 7	8719								
	PURPOSE	(a)	Category (Se	e Categories listed at	t the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Contribution	s/Donations M	lade By			<b>=</b>			plete Schedule T.	
			Candidate/C	Officeholder/Po	olitical Comn	nittee		Staff meal in		officeholder livin		
								Stall lileal III	liai	ISIL LU LUDD	UCK	
	Complete ONLY if direct	<u> </u>	Candidate/Offic	reholder name		Office sou	aht			Office h	old.	
	expenditure to benefit C/O		zandidate/Onic	cholder hame	,	Office 30u	gni			Office II	eiu	
	Data											
	Date 11/12/2024		Payee name	otrom Intornati	onal Airport							
				strom Internati								
	Amount (\$)		Payee addres		State	e; Zip Co	de					
	\$92.00		3600 Presid	entiai Bivo								
			Austin, TX 7	8719		-						
	PURPOSE OF	(a)		e Categories listed at			(b)	Description	outoi.	do of Toyon Con	volete Cebedule T	
	EXPENDITURE		Transportati Expense	on Equipment	And Relate	d				officeholder livin	nplete Schedule T. g expense	
			Ехрепас					Airport parkin			, . <sub> </sub>	
	Complete ONLY if direct		 Candidate/Offic	ceholder name	-	Office sou	ght			Office h	eld	
	expenditure to benefit C/OH	Н										
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			Legal Services		Salaries/W		se s/Contract Labor		OTHER (enter a	strict category not listed above	)
	Credit Card Payment			The Instruction G	uide explains ho	ow to cor	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)
	Sch: 3/18 Rpt: 17/32		Tepper, Car	I H. (The Hono	rable)					00086083		
4	Date	5	Payee name					•				
	12/10/2024		Austin-Berg	strom Internatio	onal Airport							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$15.14		3600 Presid	lential Blvd								
			Austin, TX 7	78719								
8	PURPOSE	(a)	Category (Sc	ee Categories listed at	the top of this sched	lule)	(b)	Description				
	OF	<u> </u>		age Expense	ine top of this seried	iuic)	` '	_ `	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE							_		officeholder living	g expense	
								Meal in transi	it to	Lubbock		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Off	fice souç	ght			Office h	eld	
		_										
	Date		Payee name									
	12/09/2024		CEFCO									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Coo	de					
	\$78.15		717 Hwy 18	3								
			Liberty Hill,	TX 78642								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sched	lule)	(b)	Description				
	OF EXPENDITURE		Travel Out o	of District				<b>=</b>			nplete Schedule T.	
								Gas for camp		officeholder living	g expense	
								Ous for camp	aig	iii davei		
	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	Off	fice soug	thr			Office h	eld	
	expenditure to benefit C/O		24.14.44.67.61.11		<b>.</b>		9			J5	o.u	
-	Date	Г	Payee name									
	11/20/2024		Caprock Ca	fe								
	Amount (\$)		Payee address		State:	Zip Coo	do					
	\$102.95		3405 34th S	-	State,	Zip Coo	ue					
	Ψ102.33		0400 0411 0	,,								
			Lubbock, TX	V 70410								
	DURROSE	(-)				ì	<i>(</i> 1)					
	PURPOSE OF	(a)		ee Categories listed at l age Expense	the top of this sched	lule)	(D)	Description  Check if travel of	outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE		roou/bever	age Expense						officeholder livin		
								Meeting to dis	scu	ss campaig	n/officeholder issu	ues
	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	fice souç	ght			Office h	eld	
L	expenditure to benefit C/O	H										

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ee I	Event Expense Fees Food/Beverage Exper Gift/Awards/Memorial Legal Services The Instruction G	s Expense	Office Over Polling Exp Printing Ex Salaries/W	rhead ense pens ages	se s/Contract Labor		Transportation I Travel in Distric Travel Out of Di	
<u> </u>	T. 1 0 1 1 54	<u> </u>			- Contract of present of the contract of the c			1011111	_	E". 15	(Eiline On a since Eilean)
1	Total pages Schedule F1: Sch: 4/18 Rpt: 18/32	1		H. (The Hono	rable)				3	Filer ID 00086083	(Ethics Commission Filers)
4	Date	<b>5</b> Pav	ee name								
	11/04/2024	l	icken Rur	ı							
6	Amount (\$) \$24.62	191	vee addres LO Quake obock, TX	r Ave Ste 100	State;	Zip Coo	de				
8	PURPOSE OF EXPENDITURE			e Categories listed at age Expense	the top of this sche	edule)	(b)	Check if Austin	, TX,	officeholder livin	mplete Schedule T. Ig expense gn/officeholder issues
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		lidate/Offic	eholder name	0	Office soug	ght			Office h	eld
	Date	Pay	ee name								
	11/12/2024	Ch	icken Rur	1							
	Amount (\$)	Pay	ee addres	s; City;	State;	Zip Cod	de				
	\$172.07	191	L0 Quake	r Ave Ste 100							
		Lul	bock, TX	79407							
	PURPOSE OF EXPENDITURE			e Categories listed at age Expense	the top of this sche	edule)	(b)	Check if Austin	, TX,	officeholder livin	mplete Schedule T. Ig expense gn/officeholder issues
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		lidate/Offic	eholder name	0	Office souç	ght			Office h	eld
	Date 12/17/2024	1 1	vee name rbin, Don	na							
	Amount (\$) \$750.00	573	vee addres	Street	State;	Zip Coo	de				
		Lui	obock, TX	. 79424							
	PURPOSE OF EXPENDITURE	l	•	e Categories listed at ges/Contract L		edule)	(b)		, TX,	officeholder livin	nplete Schedule T. ig expense
	Complete ONLY if direct expenditure to benefit C/O		lidate/Offic	eholder name	0	Office souç	ght			Office h	eld

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations I Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	-
_	Sch: 5/18 Rpt: 19/32	Tepper, Carl H. (The Honorable)  00086083	
4	Date	5 Payee name	
	11/14/2024	Eureka	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$64.09	200 E 6th St	
		Austin, TX 78701	
8	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	
		Meeting to discuss campaign/officeholder issues	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	11/29/2024	Glassman, Mollie	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	1144 Brittany Place	
		Lewisville, TX 75077	
	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	
		Buttons for Red Raider Caucus event	
		Battorio for Floa Marado Gadada Gronk	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
H	Date	Payee name	=
	11/04/2024	Hill Country Springs	
_	Amount (\$)		_
	\$30.82	10019 S I-35 Frontage Rd	
		Austin TV 70747	
		Austin, TX 78747	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel sutside of Taxes, Complete Schedule T	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Water for office	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	<b>y</b>	
			_

### 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	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/18 Rpt: 20/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	12/03/2024	Hill Country Springs
6	Amount (\$) \$30.82	7 Payee address; City; State; Zip Code 10019 S I-35 Frontage Rd  Austin, TX 78747
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 Water for office
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/19/2024	Hobby Lobby
	Amount (\$) \$10.81	Payee address; City; State; Zip Code 6814 Slide Rd
		Lubbock, TX 79424
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Gift/Awards/Memorials Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Certificate framing
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/21/2024	Hobby Lobby
	Amount (\$) \$54.07	Payee address; City; State; Zip Code 6814 Slide Rd
		Lubbock, TX 79424
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Certificate framing
	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 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)
1	Sch: 7/18 Rpt: 21/32	Tepper, Carl H. (The Honorable)  00086083
4	Date	5 Payee name
	12/18/2024	Hobby Lobby
6	Amount (\$) \$49.74	7 Payee address; City; State; Zip Code 6814 Slide Rd Lubbock, TX 79424
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense  Certificate framing
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/18/2024	Holiday Motor Coach LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$517.50	1095 E Iona Rd
		Idaho Falls, ID 83401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Charter bus for constituents to testify before the Texas State Board of Education in Austin
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/13/2024	Informed Texans Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.82	PO Box 690024
		Houston, TX 77269
	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
		News subscription
$\vdash$	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
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/Wages/Contract Labor

	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: 8/18 Rpt: 22/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	12/13/2024	Informed Texans Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.82	PO Box 690024
		Houston, TX 77269
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
		News subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/07/2024	Isaac, Aiden (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	301 Village Oak Drive
		Dripping Springs, TX 78620
	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  Campaign wages
		Campaign wages
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
	Date	Payee name
	11/08/2024	Italian Garden
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.90	1215 Avenue J #102
		Lubbock, TX 79401
	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
		Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
	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 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

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 complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 9/18 Rpt: 23/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
l	12/31/2024	Joslin, Arianna
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 1720 Wells Branch Pkwy #4305
		Austin, TX 78728
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign wages
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/31/2024	Lamar Advertising
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,350.00	PO Box 96030
		Baton Rouge, LA 70896
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Billboard advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	11/12/2024	Little Woodrow's
	Amount (\$) \$65.48	Payee address; City; State; Zip Code 6313 66th St
		Lubbock, TX 79424
	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 Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food/
Contribution/ Onations Made By - Gift/An

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 (order a settlement part 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: 10/18 Rpt: 24/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	11/21/2024	Lubbock Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$323.80	1500 Broadway Street Suite 1303
		Lubbock, TX 79401
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
		Event tickets
		270 III dolloto
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/09/2024	Moonshine Patio Bar & Grill
_	Amount (\$)	Payee address; City; State; Zip Code
	\$138.04	303 Red River St
	φ130.04	303 Reu Rivel St
		Austin, TX 78701
	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
		Meeting to discuss campaign/officeholder issues
		mooung to allocate bampaignomoonload locate
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	10/28/2024	Murphy Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.24	8202 University Ave
		Lubbock, TX 79423
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense  Gas for campaign travel
		Ous for campaign traver
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services			se s/Contract Labor		OTHER (enter a	category not listed above)	
	Credit Card F dyment		The Instruction Guide	e explains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Fi	ilers)
	Sch: 11/18 Rpt: 25/32	Tepper, Ca	ırl H. (The Honorab	ole)				00086083		
4	Date	5 Payee name	)							
	12/20/2024	P.F. Chang	j's							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$102.89	2906 West	Loop 289							
		Lubbock, T	X 79407							
8	PURPOSE	(a) Category (s	See Categories listed at the t	on of this schedule)	(b)	Description				
	OF EXPENDITURE		rage Expense	op or and concactor			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					_		officeholder living		
						Meeting to dis	scu	ss campaig	n/officeholder issue	es
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ıght			Office h	eld	
	Date	Payee name	<del>)</del>							
	12/18/2024	Perstruo T	exas Inc.							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$150.00	PO Box 52	82							
		Lubbock, T	X 79408							
	PURPOSE	(a) Category (s	See Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising							plete Schedule T.	
	ZA ZHOHOKZ					ш		officeholder living	g expense	
						Radio adverti	isei	nent		
	Complete ONLY if direct	Candidate/Of	Finahaldar nama	Office cou	labt			Office h	ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ıgnı			Office h	eia	
_										
	Date	Payee name								
	11/08/2024		stiny Amarillo PAC							
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$250.00	2607 Wolfl	in Avenue PMB972	<u>.</u>						
		Amarillo, T	X 79109							
	PURPOSE	(a) Category (S	See Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made						plete Schedule T.	
		Candidate/	Officeholder/Politic	ai Committee		Contribution	, ιλ,	officeholder living	j expense	
						Johnsbaudh				
-	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	l Jaht			Office h	eld	
	expenditure to benefit C/OI			200 300				C.IIICC III		
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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (setter a extension pat listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┰	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 12/18 Rpt: 26/32	2 FILER NAME Tepper, Carl H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086083
4	Date	5 Payee name
	12/05/2024	Project Destiny Amarillo PAC
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 2607 Wolflin Avenue PMB972  Amarillo, TX 79109
8	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  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense  Donation
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/17/2024	Salvation Army Lubbock
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1111 16th St
	DUDDOG	Lubbock, TX 79401
	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  Candidate/Officeholder living expense  Donation
		Donation
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/04/2024	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	8 Clarkson St
		New York, NY 10014
	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
		Website hosting
	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 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 complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 13/18 Rpt: 27/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	11/14/2024	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$50.77	8 Clarkson St
l		
l		New York, NY 10014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Website hosting
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
l	Date	Payee name
	12/17/2024	Squarespace
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$50.77	8 Clarkson St
		New York, NY 10014
	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
		Website hosting
		The second secon
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/O	
H	Date	Payee name
l	11/12/2024	Starbucks
H	Amount (\$)	Payee address; City; State; Zip Code
l	\$17.27	2414 Mac Davis Ln
l	<del></del>	
		Lubbock, TX 79401
	PURPOSE	To a
l	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.
l	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
l		Meeting to discuss campaign/officeholder issues
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experiulture to beliefft C/O	<u> </u>

#### 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/18 Rpt: 28/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	11/12/2024	Stathatos, Parker
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	6601 Rialto Blvd
		Apt. 3108
		Austin, TX 78735
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  Campaign wages
		Campaign wages
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/09/2024	Sushi Junai
	Amount (\$)	Payee address; City; State; Zip Code
	\$138.07	1612 Lavaca St
	Ψ100.07	1012 Edvada Ot
		Austin, TX 78701
	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
		Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/12/2024	Taco Bell
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.73	402 Avenue Q
		Lubbock, TX 79401
	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  Meeting to discuss campaign/officeholder issues
		Weeting to discuss earnpaign/omeenoider issues
	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 Lenal Services 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:	2 FILER NAME	_	3 Filer ID (Ethics Commission Filers)
	Sch: 15/18 Rpt: 29/32	Tepper, Carl H. (The Honorable)		00086083
4	Date	5 Payee name		-
	12/02/2024	Target		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$9.73	5300 S MoPac Expy		
		Austin, TX 78749		
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 Office supplies
				Office supplies
_	Complete ONLY if direct	Condidate/Officeholder name Office sour	abt	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou d	gnı	Office field
	Date	Payee name		
	12/03/2024	Target		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$102.40	5300 S MoPac Expy		
		Austin, TX 78749		
	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.
				Christmas ornaments and decorations for Capitol
				Office
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		giit	Office field
	Data	Davis and the second		
	Date 12/10/2024	Payee name		
		Texas Capitol Gift Shop		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$17.32	1400 N. Congress Avenue		
		Austin, TX 78701		
	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Gift for constituent
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		J	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Office Overhe Polling Expen Printing Expe			Transportation I Travel in Distric Travel Out of Di			
	ordan dara r aymoni	The Instruction Guide explains	s how to comp	lete this form.					
1	Total pages Schedule F1:	2 FILER NAME			3	Filer ID	(Ethics Commission Filers)		
	Sch: 16/18 Rpt: 30/32	Tepper, Carl H. (The Honorable)				00086083			
4	Date	5 Payee name							
	12/20/2024	The Farmhouse Restaurant							
6	Amount (\$)	7 Payee address; City; State	e; Zip Code						
	\$241.72	7718 Milwaukee Ave							
		Lubbock, TX 79424							
8	PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (b	<b>)</b> Description					
	OF EXPENDITURE	Food/Beverage Expense		=			exas. Complete Schedule T.		
	_/			<b>—</b>		, officeholder livin			
				Meeting to di	SCI	uss campaig	n/officeholder issues		
_	0 1: 0:11:4"		000			055			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sough	Ţ		Office h	eid		
	Date	Payee name							
	12/20/2024	The Funky Door Bistro & Wine Room							
	Amount (\$)	Payee address; City; State	e; Zip Code						
	\$158.75	6801 Milwaukee Ave							
		Lubbock, TX 79424							
	PURPOSE OF	(a) Category (See Categories listed at the top of this so	chedule) (b	) Description					
	EXPENDITURE	Food/Beverage Expense		<u> </u>		ide of Texas. Con , officeholder livin	nplete Schedule T.		
				ш			n/officeholder issues		
							, , , , , , , , , , , , , , , , , , , ,		
	Complete ONLY if direct	Candidate/Officeholder name	Office sough	 t		Office h	eld		
	expenditure to benefit C/OI		<b>3</b>						
-	Date	Payee name							
	11/08/2024	USPS							
			o. Zin Codo						
	Amount (\$) \$182.00	' ' '	e; Zip Code						
	\$182.00	5014 Gary Ave							
		Lubbock, TX 79413-9998							
	PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (b	) Description					
	OF EXPENDITURE	Postage					nplete Schedule T.		
	LAFENDITORE			ш		, officeholder livin			
				Postage expe	ens	se to ship dis	strict artwork to Captio		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	t		Office h	eld		
	experience to beliefft C/OI								

#### 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	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: 17/18 Rpt: 31/32	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	11/12/2024	USPS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.20	5014 Gary Ave
		Lubbock, TX 79413-9998
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Postage Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Postage to mail paperwork to Capitol Office
		1 ostage to mail paperwork to expitor office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/12/2024	Uber
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$8.96	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Transportation to Red Raider Caucus event
		Transportation to Neu Natural Caucus event
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/13/2024	Walmart
H	Amount (\$)	Payee address; City; State; Zip Code
	\$68.42	4215 S Loop 289
	400.12	1210 0 2000 200
		Lubbock, TX 79423
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Flowers for constituent
L	Complete CNUV'S	Condidate Office helder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		

### 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 (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to comp	plete this form.	OTTLEN (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	I	3 Filer ID (Ethics Commission Filers)	-
	Sch: 18/18 Rpt: 32/32	Tepper, Carl H. (The Honorable)		00086083	
4	Date	5 Payee name			
	12/09/2024	Walmart			
6	Amount (\$)	7 Payee address; City; State; Zip Code	9		
	\$54.62	4215 S Loop 289			
		Lubbock, TX 79423			
8	PURPOSE OF	,	Description		
	EXPENDITURE	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. TX, officeholder living expense	
			Office supplie		
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held	_
	expenditure to benefit C/OI	<del>-1</del>			
H	Date	Payee name			╡
	11/18/2024	Woodhouse Spa			
_	Amount (\$)	Payee address; City; State; Zip Code			$\dashv$
	\$150.00	11010 Slide Rd Suite 400			
	Ψ100.00	11010 Glide Nd Gdite 400			
		Lubbock, TX 79424			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description		
	OF EXPENDITURE	Gift/Awards/Memorials Expense		utside of Texas. Complete Schedule T.	
				TX, officeholder living expense for constituent	
			On certificate	Tor constituent	
_	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt .	Office held	-
	expenditure to benefit C/OI	•		Cinico nela	
					7
l					