CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commissi 00036573	ion Filers)	2 Total pages filed: 27
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
NAME	Mr.	Kevin P.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST	•••••	SUFFIX	01/10/2025
		Eltife			
4 CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	417 S. College				Receipt# Amount
Change of Address	Tyler, TX 75702				
Onlinge of Address	Tylei, 1X 75702				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER NAME	Mr.	Jim			
	NICKNAME	LAST		SUFFIX	
		Mazzu			
6 CAMPAIGN	STREET ADDRESS (NO F	PO BOX PLEASE);	APT /	/ SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	3306 Fry	,			
(Residence or Business)	Tyler, TX 75701				
	1,101,170,101				
7 CAMPAIGN	AREA CODE PH	ONE NUMBER E	EXTENSION		
TREASURER PHONE	(903) 520-0414				
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasurer
		— coar day seriore			appointment (officeholder only)
	July 15	8th day before		exceeded modified eporting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Yea			Month Day	Year
COVERED	07/01/2024	TH	IROUGH	12/31/2024	4
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Yea	r \square P	rimary	Runoff	Other
		G	eneral	Special	
11 OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGHT	(if known)
	None			None	
	<u> </u>				
		GO T	O PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 27

13 C / OH NAME	Eltife, Kevin P. (Mr.)		14 Filer ID 00036573	(Ethics Commission File					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditurenthese expenditures may have been made without the differenthese are required to report this information	he candidate's or offic	eholder's knowledge or					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	GENERAL	COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	S						
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC	\$ 0.						
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)								
EXPENDITURE TOTALS	3. TOTAL UNITEM	TOTAL UNITEMIZED POLITICAL EXPENDITURES							
	4. TOTAL POLITION	TOTAL POLITICAL EXPENDITURES							
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 843,018					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS (RTING PERIOD	OF THE LAST DAY	\$ 0					
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.							
		Mr.	Kevin P. Eltife						
			Candidate or Officeho	older					
AFFIX NO	TARY STAMP / SEAL AB	OVE							
		aid	, this the	day					
of	, 20, to c	ertify which, witness my hand and seal of office.							
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath					
Signature or offic	cer aurimistering	rinited name of officer autilitistering	Title of office	administering Udin					

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 27 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00036573 Eltife, Kevin P. (Mr.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 43,565.72 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 43,362.89 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 43,821.60 TO FILER

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverag
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Graft Contributions Review Graft Contributions Review

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

	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: 1/4 Rpt: 4/27	Eltife, Kevin P. (Mr.) 00036573
4	Date	5 Payee name
	07/23/2024	Chase Card Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 94014
		Palatine, IL 60094
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
		Ground Gura Fuginion
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
Г	Date	Payee name
	08/20/2024	Chase Card Services
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	P.O. Box 94014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Payment
		Ground Gura Fuginion
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	09/26/2024	Chase Card Services
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 94014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Credit Card Payment
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
ı		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

Sch: 2/4 Rpt: 5/27 Eltife, Kevin P. (Mr.) 00036573 4 Date 5 Payee name 12/12/2024 Chase Card Services	nmission Filers)
4 Date 5 Payee name 12/12/2024 Chase Card Services	
12/12/2024 Chase Card Services	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$10,000.00 P.O. Box 94014	
Palatine, IL 60094	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) OF Credit Coard Resumment	_
EXPENDITURE Credit Card Payment Credit Card Payment Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	1.
Credit Card Payment	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
09/17/2024 First Av Group	
Amount (\$) Payee address; City; State; Zip Code	
\$6,669.53 P.O. Box 1390	
Chandler, TX 75758	
PURPOSE (a) Category (See Categories listed at the top of this schedule) OF Transplant of Points in the complete Schedule Transplant of Points in the complete Schedule	_
Travel Out of District Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	1.
Air charter	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
But I a	
Date Payee name	
10/01/2024 First Av Group	
Amount (\$) Payee address; City; State; Zip Code	
\$5,500.00 P.O. Box 1390	
Chandler, TX 75758	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Travel Out of District Check if travel outside of Texas. Complete Schedule	т.
Check if Austin, 1X, officendider living expense	
Air charter	
Complete ONLY if divert Condidate/Office halder name Office and the Condidate of the Condid	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
•	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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/Political Con Credit Card Payment 1 Total pages Schedule F1: 2		The Instruction Guide explains how to complete this form.					Travel in Distric Travel Out of D OTHER (enter a			
1	Total pages Schedule F1:	l	ER NAME						3	Filer ID	(Ethics Commission Filers)
Ļ	Sch: 3/4 Rpt: 6/27	-	ife, Kevin I	۲. (Mr.)						00036573	
4	Date 09/20/2024	1 1	yee name ernal Reve	enue Service							
6			vee address		Ctoto	e; Zip Co	do				
٥	Amount (\$) \$6,434.00	1 1	•	s;		e, zip co	ue				
	Ψ0,+34.00	l	•	enue Service	•						
			den, UT 8		Center						
8	PURPOSE						(h)	Description			
ľ	OF		iegory _{(See} xes	Categories listed at	t the top of this sch	hedule)	(D)		outsi	de of Texas. Cor	nplete Schedule T.
	EXPENDITURE							Check if Austin,	, TX,	officeholder livin	g expense
								2023 Form 13	120	Tax Due	
9	Complete ONLY if direct expenditure to benefit C/O		didate/Office	eholder name		Office sou	ght			Office h	eld
	Date	Pay	yee name								
	08/08/2024	Pro	othro, Wilh	elmi & Co. Pl	LC						
	Amount (\$)	Pay	yee address	s; City;	State	e; Zip Co	de				
	\$1,450.00	68	55 Oak Hil	l Boulevard							
		Tyl	er, TX 757	703							
	PURPOSE	(a) Ca	tegory (See	Categories listed at	t the top of this sch	hedule)	(b)	Description			
	OF EXPENDITURE	Ac	counting/B	anking				=			nplete Schedule T.
								Campaign re		officeholder livin	
								oampaign ro	po.	t proparatio	
	Complete ONLY if direct expenditure to benefit C/O		didate/Office	eholder name	(Office sou	ght			Office h	eld
	Data										
	Date 10/06/2024	1 1	yee name	almi º Ca DI	1.0						
				elmi & Co. PI		7: 0					
	Amount (\$)	1	yee address		State	e; Zip Co	ae				
	\$1,000.00	68	oo Uak Hii	l Boulevard							
		Tyl	ler, TX 757	703			_				
	PURPOSE OF			Categories listed at	t the top of this sch	hedule)	(b)	Description			
	EXPENDITURE	Ac	counting/B	anking				ш		de of Texas. Cor officeholder livin	nplete Schedule T.
								Preparation of			a expense
	Complete ONLY if direct	Can	didate/Office	eholder name	(Office sou	ght			Office h	eld
	expenditure to benefit C/O	Н									

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 Com 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 Credit Card Payment		mmittee I	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			OTHER (enter a category not listed above)						
_	Total mariae Cabadula E1.	_			•		÷		_	Tile: ID	/Ethios Com	mission Filors)
1	Total pages Schedule F1: Sch: 4/4 Rpt: 7/27	2	Eltife, Kevin	P. (Mr.)						Filer ID 00036573	-	mission Filers)
4	Date	5	Payee name									
7	11/24/2024	5	Tyler Police	Foundation								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	de					
	\$500.00		711 W Fergu	uson St								
			3									
			Tyler, TX 75	703								
8	PURPOSE	(a)	Category (so	e Categories listed at th	a tan of this school	dulo)	(b)	Description				
	OF	l` <i>′</i>		s/Donations Ma		duic)	. ,		outsio	de of Texas. Co	mplete Schedule 1	г.
	EXPENDITURE			fficeholder/Polit		tee		Check if Austin,	TX,	officeholder livi	ng expense	
								Charitable do	nat	ion		
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offic	eholder name	Of	fice soug	ght			Office I	neld	
	Date		Payee name									
	10/30/2024		United State	s Treasurv								
	Amount (\$)		Payee addres		State:	Zip Cod	40					
			•	•	Siale,	Zip C00	ue					
	\$12.19		internal Rev	enue Service								
			Austin, TX 7	3301								
	PURPOSE	(a)	Category (so	e Categories listed at th	a top of this school	dulo)	(b)	Description				
	OF	l` <i>′</i>	Penalty	e Categories listed at til	e top of this scree	iule)	` '	·	outsio	de of Texas. Co	mplete Schedule 1	г.
	EXPENDITURE		Charty					Check if Austin,	TX,	officeholder livi	ng expense	
								Penalty				
_	Complete ONLY if direct		Candidate/Offic	eholder name	Of	fice soug	thr			Office I	neld	
	expenditure to benefit C/OI						,					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

Candidate/Officeholder/Politica	•			THER (enter a catego	ry not listed at	bove)		
		ruction Guide explains how	to complete this form.	,				
1 Total pages Schedule F4:				3 Filer ID (Ethi	ics Commiss	sion Filers)		
Sch: 1/18 Rpt: 8/27	Eltife, Kevin P. (Mr.)		00036573				
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED	6				
ISSUER	Ch	ase	EXPENDITURES CHARGED TO A CREDIT	\$				
			CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$58.55	07/01/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
			507 Calles St					
	Uber		#120					
			Austin, TX 78702					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel					
X Political	Travel Out of District							
Non-Political	Chook if Austin TV	officebolder living ou						
9 Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living exp	perise			
expenditure to benefit C/OH	Garialdate/Giliceriolaer	name Ome	c sought	Office field				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Daid				
FATIVILINI	, ,		(c) Date(s) Credit Card issue	raiu				
	\$208.05	07/01/2024						
PAYEE	(-) D		(h) Davida addina a	0.4		7:- OI-		
PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	JW Marriott - Austir	1	110 E. 2nd St.					
			Austin TV 70701					
DUDDOCE OF	(a) Catagony		Austin, TX 78701					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
l <u> </u>	Travel Out of District		Hotel Expense					
X Political								
Non-Political	<u> </u>	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH			1					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$437.74	07/01/2024						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	7) A / B A =		110 E. 2nd St.					
	JW Marriott - Austir							
			Austin, TX 78701					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Travel Out of District	or this schedule)	Hotel Expense					
X Political	avoi Gat of District							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living exp	pense			
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held				
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees 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			inting Expense alaries/Wages/Co	ntract Labor	OTHER (enter a cate		oove)		
	The Instr	ruction Guide explains hov	v to complete	this form.					
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)		
Sch: 2/18 Rpt: 9/27	Eltife, Kevin P. (Mr.)			00036573				
4 CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED)				
ISSUER	see p	revious		DITURES SED TO A CREDI	\$				
			CARD	SED TO A CREDI	. 1				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issu	 ıer Paid				
	\$83.42	07/01/2024							
	400112	0170172021							
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		507 Calle							
	Uber	#120							
			Austin, T	X 78702					
8 PURPOSE OF	(a) Category	(b) Descrip	otion						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel						
X Political	Travel Out of District								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin. T	X, officeholder living	expense			
9 Complete ONLY if direct	(c) distant data states as sometimes as sometimes.				Office held				
expenditure to benefit C/OH			Ū						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issu	ıer Paid				
	\$72.67	07/17/2024							
	Ψ12.01	0111112024							
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
			507 Calle	es St					
	Uber		#120						
			Austin, T	X 78702					
PURPOSE OF	(a) Category		(b) Descrip	otion					
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Travel						
X Political	Traver Out or District								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living	expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	ffice sought Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issu	er Paid				
	\$63.82	07/17/2024							
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code		
	1.05		507 Calle	es St					
	Uber		#120						
			Austin, T	X 78702					
PURPOSE OF	(a) Category	of their color division	(b) Descrip	otion					
EXPENDITURE	(See Categories listed at the top Travel Out of District	or ans scriedule)	Travel						
X Political									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living	expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

		The Insti	ruction Guide explains how	to complete	thi	s form.				
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 3/18 Rpt: 10/27	Eltife, Kevin P. (Mr.)				00036573			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	IDI	F UNITEMIZED TURES D TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) C	redit Card Issuer	Paid			
		\$8.58	07/21/2024							
7	PAYEE	(a) Payee name		(b) Payee	ad	ldress;	City,	State,	Zip Code	
		Uber		#120 Austin, T						
8	PURPOSE OF	(a) Category		(b) Descrip	otic	on				
	EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Travel						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX, o	officeholder living expe	ense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	fice sought Office held						
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) C	redit Card Issuer	Paid			
		\$298.62	07/22/2024							
PAYEE (a) Payee name				(b) Payee	ad	ldress;	City,	State,	Zip Code	
		Libor		507 Calle	es	St				
		Uber		#120						
				Austin, T	Χ	78702				
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description						
	EXPENDITURE	Travel Out of District	of triis scriedule)	Travel						
	X Political									
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX, o	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held			
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) C	redit Card Issuer	Paid			
		\$10.00	07/28/2024							
	PAYEE	(a) Payee name		(b) Payee	ad	ldress;	City,	State,	Zip Code	
		Tyler Laserwash		206 Wind	che	ester Dr				
				Tyler, TX	7	5701				
	PURPOSE OF				otic					
	EXPENDITURE	(See Categories listed at the top Travel Out of District	Travel							
	X Political	Traver Out of District								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX, officeholder living expense					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	_	_	Office held			
e	xpenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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			aries/Wages/Contract Labor		HER (enter a cate	egory not listed at	oove)
		ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)
Sch: 4/18 Rpt: 11/27	Eltife, Kevin P. (Mr.)			00036573		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNIT		Φ.		
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A	-	\$		
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	ard Issuer	Paid		
	\$15.16	07/01/2024					
	720.20	0.702/202					
7 PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
			400 Lavaca St.		•		·
	Hotel ZAZA						
			Austin, TX 78701				
8 PURPOSE OF	(a) Category		(b) Description	-			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Hotel Expense				
X Political	Travel Out of District						
Non-Political		<u> </u>					
	(c) Sites in the second of the				Office hold	expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH	() 4 () 4	(1) 5 : (0)	1() 5 (() 6 () 10 (5 ' 1		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	ard Issuer	Paid		
	\$46.41	07/21/2024					
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
	Uber		507 Calles St				
	Obei		#120				
			Austin, TX 78702	2			
PURPOSE OF	(a) Category	of this cahadula)	(b) Description				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this scriedule)	Travel				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check	if Austin, TX, o	officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	ard Issuer	Paid		
	\$523.66	07/07/2024					
	4020.00	0170172021					
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;		City,	State,	Zip Code
			320 Decker Drive		- 3,	,	
	Texas Shuttle		020 200.00. 2				
			Irving, TX 75062				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel				
X Political	Travel Out of District						
Non-Political	(-) 🗆 a			· · · · -	<i>(</i> , , , , , , , , , , , , , , , , , , ,		
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.		ır Austın, TX, o	Office held	expense	
Complete ONLY if direct	Candidate/Officeriolder	name Office	e sought		Office field		
expenditure to benefit C/OH							
I							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica				Γravel Out of District DTHER (enter a category	/ not listed al	bove)				
		The Insti	ruction Guide explains how	to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)				
	Sch: 5/18 Rpt: 12/27	Eltife, Kevin P. (Mr.)		00036573						
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED							
	ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDI	_⊤ \$						
				CARD	'						
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
		\$46.41	07/21/2024								
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		_		507 Calles St							
	Uber			#120							
				Austin, TX 78702							
8	PURPOSE OF	(a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Travel							
	X Political	Traver Gut or Blothlot									
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living expe	ense					
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
ex	penditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
		\$1,000.00	08/08/2024								
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		Cathedral of the Im	maculato	423 S. Broadway							
			maculate								
		(-) O-t		Tyler, TX 75702							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Charitable Donation							
	_	Contributions/Donatio	ns Made By								
	X Political	Candidate/Officeholde	er/Political Committee	е							
	Non-Political	· · · ·	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense							
01	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
е	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	or Doid						
	PATMENT			(c) Date(s) Credit Card issue	si Faiu						
		\$1,036.88	08/14/2024								
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		(a) Fayee name		107 E Commerce St	City,	State,	Zip Code				
		Food and Table		Suite 2							
				Jacksonville, TX 75766							
	PURPOSE OF	(a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top		Meal expense							
	X Political	Food/Beverage Expe	nse								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TV	K, officeholder living expe	ense					
	Complete ONLY if direct	Candidate/Officeholder		e sought	Office held						
ex	penditure to benefit C/OH			ŭ							
	•	<u> </u>									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

	The Inst	ruction Guide explains how	to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	3 Filer ID (Ethics Commission Filers)				
Sch: 6/18 Rpt: 13/27	Eltife, Kevin P. (Mr.)		00036573					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$210.00	08/19/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Perini Ranch Steak	house	3002 FM 89						
			Buffalo Gap, TX 79508						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
X Political	Food/Beverage Exper		Meal expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	(, officeholder living exper	nse				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH		-							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$337.07	08/21/2024							
PAYEE	PAYEE (a) Payee name			City,	State,	Zip Code			
	La Condesa		400 W 2nd St A						
			Austin, TX 78701						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Exper		Meal expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$31.58	08/23/2024							
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code			
			1455 Market St						
	Uber Eats		#400						
			San Francisco, CA 9410	3					
PURPOSE OF EXPENDITURE									
X Political	Food/Beverage Expe	•	Meal expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exper	nse				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

	The Insti	ruction Guide explains how	to complete th	nis form.		.,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
Sch: 7/18 Rpt: 14/27	Eltife, Kevin P. (Mr.)			00036573		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	Paid		
	\$66.79	08/24/2024					
7 PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code
	Uber Eats		#400	ket St cisco, CA 94103			
8 PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Meal expe				
X Political	Food/Beverage Expe	nse					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid		
	\$28.76	09/13/2024					
PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code
			1455 Mark	ket St			
	Uber Eats		#400				
			San Franc	cisco, CA 94103			
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Descripti				
EXPENDITURE	Food/Beverage Exper		Meal expe	ense			
X Political	3 1						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH		T	1	-			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid		
	\$37.45	09/15/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
			507 Calles	s St			
	Uber		#120				
			Austin, TX	78702			
PURPOSE OF	(a) Category	of this sahadula)	(b) Descripti	ion			
EXPENDITURE	(See Categories listed at the top Travel Out of District	or this schedule)	Travel				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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/Officeriolder/Folitica		ction Guide explains how		omplete th		THEN (effici a calegor)	not iisteu ai	oove)
1 Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 8/18 Rpt: 15/27	Eltife, Kevin P. (Mr.)					00036573		
4 CREDIT CARD ISSUER	Name of financ see pre		5	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged ((b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid		
	\$35.37	09/15/2024						
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Uber		5	07 Calles	St			
	Obei			120				
			_	ustin, TX				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	this cahadula)	1) Descripti	on			
<u> </u>	Travel Out of District	triis scrieddie)	T	ravel				
x Political								
Non-Political	(C) Check if travel outside of	Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder n	ame Office	e so	ught		Office held		
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged ((b) Date of Charge	(c) Date(s) (Credit Card Issuer	r Paid		
	\$135.96	09/16/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Guero's Taco Bar		1	412 S Co	ngress Ave			
			A	ustin, TX	78704			
PURPOSE OF	(a) Category		(b) Descripti	on			
EXPENDITURE	(See Categories listed at the top of		M	leal expe	nse			
X Political	Food/Beverage Expens	ье						
Non-Political	(c) Check if travel outside of	Texas. Complete Schedule T.		Г	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder n	ame Office	e so	ught		Office held		
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged ((b) Date of Charge	(c) Date(s) (Credit Card Issuer	r Paid		
	\$1,202.00	09/17/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Hotel ZAZA		4	00 Lavac	a St.			
	11010127127			ustin, TX	78701			
PURPOSE OF	(a) Category		_) Descripti				
EXPENDITURE	(See Categories listed at the top of	this schedule)	1	otel expe				
X Political	Travel Out of District			•				
Non-Political	(c) Check if travel outside of	Texas. Complete Schedule T.		Г	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder n	ame Office	e so	ught	_	Office held		
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

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)

		The Inst	ruction Guide explains how	to complete	this form.	(,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 9/18 Rpt: 16/27	Eltife, Kevin P. (Mr.)			00036573		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$104.96	09/16/2024					
7	PAYEE	(a) Payee name		(b) Payee	•	City,	State,	Zip Code
		Hotel ZAZA		400 Lava	aca St.			
				Austin, T	Y 79701			
8	PURPOSE OF	(a) Category		(b) Descri				
ľ	EXPENDITURE	(See Categories listed at the top	of this schedule)	Hotel exp				
	X Political	Travel Out of District						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
ex	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$90.86	09/22/2024					
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		l lle e r		507 Calle	es St			
		Uber		#120				
				Austin, T				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	ption			
		Travel Out of District	,	Travel				
	X Political							
	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	a cought	Check if Austin, TX,	officeholder living exp	ense	
 	Complete ONLY if direct spenditure to benefit C/OH	Candidate/Officeriolder	name Office	e sought		Office field		
<u> </u>	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$500.00	09/23/2024		,			
		φ300.00	09/23/2024					
	PAYEE	(a) Payee name	ı	(b) Payee	address;	City,	State,	Zip Code
				3201 Ro	bertson Rd			
		East Texas Food B	ank					
				Tyler, TX				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	•			
		Contributions/Donation		Charitab	le Donation			
	X Political		er/Political Committee					
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
L ex	xpenditure to benefit C/OH							
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

Candidate/Officeholder/Politica	-	rices Sal ruction Guide explains how	aries/Wages/Cont		ΓHER (enter a categor	y not listed al	bove)
1 Total pages Schedule F4:		Tueston Guide explains now	to complete ti		3 Filer ID (Ethi	rs Commiss	sion Filers)
Sch: 10/18 Rpt: 17/27	Eltife, Kevin P. (Mr.)			00036573	US COMMINIS	sion i licis)
4 CREDIT CARD ISSUER	Name of final	ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$3,000.00	10/04/2024					
7 PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code
	Hospice of East Te	yas	4111 Univ	ersity Boulevard	d		
	Trospice of East Te.	AdS	Tidon TV	75704			
8 PURPOSE OF	(a) Category		Tyler, TX (b) Descript				
EXPENDITURE	(See Categories listed at the top		Charitable				
X Political	Contributions/Donation						
Non-Political		of Texas. Complete Schedule T.	Г	Check if Austin, TX.	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	<u>'</u>	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuei	r Paid		
	\$523.47	10/10/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Ocean Prime		2101 Ced	ar Springs Road	I		
			Dallas, TX	75201			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meal expe	ense			
X Political							
Non-Political	(· / L	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH	(a) A	(h) Data at Obarra	(-) D-+-(-)	O	. D.:II		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Pald		
	\$47.66	10/09/2024					
PAYEE	(a) Payee name	<u> </u>	(b) Payee a	iddress:	City,	State,	Zip Code
	(a) r ayou name		507 Calles		Oity,	Otato,	Zip Codo
	Uber		#120				
			Austin, TX	X 78702			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Travel				
X Political							
Non-Political	(· / L	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
•							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

pense Travel on District

pense Travel out of District

Ages/Contract Labor OTHER (enter a cater

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

	Candidate/Officerolder/Folitica	· ·	ruction Guide explains how		complete th		TIEN (enter a category	not listed di	50vc)
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethics	s Commiss	sion Filers)
	Sch: 11/18 Rpt: 18/27	Eltife, Kevin P. (Mr.)				00036573		
4	CREDIT CARD ISSUER	Name of finar	ncial institution revious	5	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(0) Date(s) (Credit Card Issuer	Paid		
		\$29.00	11/24/2024						
7	PAYEE	(a) Payee name Hotel ZAZA		4) Payee a	a St.	City,	State,	Zip Code
_	DUDDOCE OF	(a) Catagony		-	ustin, TX Descript				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	1	lotel expe				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Г	Check if Austin TX	officeholder living expe	nse	
9	Complete ONLY if direct	Candidate/Officeholder	•	e so	ught L	Oneok ii 7 kastiri, 174,	Office held	1130	
	xpenditure to benefit C/OH				J				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(0) Date(s) (Credit Card Issuer	· Paid		
		\$1,263.00	12/05/2024						
	PAYEE	(a) Payee name		(k) Payee a	ddress;	City,	State,	Zip Code
		Greenberg Smoked	l Turkeys	2	21 N McI	Murrey Dr			
				Т	yler, TX	75702			
	PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodulo)	1) Descript	ion			
	EXPENDITURE	Gift/Awards/Memorial		(Sifts				
	X Political		•						
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	nse	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder			ought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(0	c) Date(s) (Credit Card Issuer	Paid		
		\$49.90	11/22/2024						
	PAYEE	(a) Payee name		(k) Payee a	ddress;	City,	State,	Zip Code
		Libor		5	07 Calles	s St			
		Uber		#	120				
				-	ustin, TX				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	1 `) Descript	ion			
	X Political	Travel Out of District	or and sorroughly	'	ravel				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	nse	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e so	ought		Office held		
е	xpenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

	The Insti	ruction Guide explains how	to complete th	nis form.		,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 12/18 Rpt: 19/27	Eltife, Kevin P. (Mr.)			00036573		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$1,000.00	10/20/2024					
7 PAYEE	(a) Payee name WinRed		(b) Payee a		City,	State,	Zip Code
			Austin, TX				
8 PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top Contributions/Donatio	· · · · · · · · · · · · · · · · · · ·	Campaign	Donation			
X Political	Candidate/Officeholde						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$29.77	11/09/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	AT&T Rooms Depa	urtment	1900 Univ	ersity Ave			
			Austin, TX	78705			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Hotel expe	ense			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$512.50	(b) Date of Charge 08/25/2024	(c) Date(s)	Credit Card Issue	r Paid		
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Accetica Jahan		210 W. 7tl	h			
	Austin, John						
			Austin, TX	78701			
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Descript	ion			
EXPENDITURE	Gift/Awards/Memorial	,	Gift				
X Political		· 					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
i							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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			aries/Wages/Co		THER (enter a categor	ory not listed at	oove)
		ruction Guide explains how	to complete	this form.	T		
1 Total pages Schedule F4:					3 Filer ID (Eth	nics Commiss	sion Filers)
Sch: 13/18 Rpt: 20/27	Eltife, Kevin P. (Mr.)			00036573		
4 CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZED	6		
ISSUER	see pi	revious		DITURES SED TO A CREDIT	\$		
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$500.00	11/28/2024					
	, , , , , , ,						
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
			5425 Old	Jacksonville Hw	'		
	Lewis, Jack				•		
			Tyler, TX	75703			
8 PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top		Donation				
X Political	Gift/Awards/Memorial	s Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	officeholder living ex	(nonco	
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Crieck if Austin, 1A,	Office held	крепѕе	
expenditure to benefit C/OH	odridiadic/Oniceriolaer	That is a second of the second	o sought		Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Data(s)	Credit Card Issue	r Daid		
I ATMENT	, ,		(c) Daic(s)	Cicuit Cara issue	i i aiu		
	\$535.00	12/05/2024					
PAYEE	() 5		(1) 5		0		7: 0 !
PATEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
	Riverhorse on Main	1	540 Main	St			
			D. 1.03	LIT 0.4000			
	(a) Cataman			, UT 84060			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	JUON			
	Gift/Awards/Memorial		Gills				
X Political							
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	rpense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$517.84	11/21/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
			509 Rio (Grande St			
	J Carver						
			Austin, T	X 78701			
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meal exp	ense			
X Political	i ood/beveraye exper	100					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living ex	rpense	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held	-	
expenditure to benefit C/OH			-				
	l						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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			alaries/Wages/Co	ntract Labor	OTHER (enter a cate		oove)
	The Insti	ruction Guide explains hov	v to complete	this form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)
Sch: 14/18 Rpt: 21/27	Eltife, Kevin P. (Mr.)			00036573		
4 CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZE	1.		
ISSUER	see pi	revious		IDITURES SED TO A CRED	,, _T \$		
			CARD	DED TO A CINED	"		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issi	uer Paid		
	\$335.39	11/20/2024					
	, , , , , , ,						
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
			400 Lava	aca St.			
	Hotel ZAZA						
			Austin, T	X 78701			
8 PURPOSE OF	(a) Category	(4)	(b) Descri				
EXPENDITURE 	(See Categories listed at the top Travel Out of District	or this schedule)	Hotel exp	oense			
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin,	TX, officeholder living	expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
	\$7,500.00	11/28/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Cathedral of the Im	maculato	423 S. B	roadway			
		macdiate					
	() 0 :		Tyler, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	ption le donation			
	Contributions/Donatio	ns Made By	Chantab	ie donation			
X Political	Candidate/Officeholde	er/Political Committee					
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin,	TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH	(-) A	(h) D-++ Oh	(-) D-+-(-)) O	Delal		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issi	uer Pald		
	\$464.96	12/04/2024					
PAYEE	(a) Davis a same		(h) D		0.4	04-4-	7:- OI-
PAILE	(a) Payee name		(b) Payee		City,	State,	Zip Code
	Omaha Steaks, Inc		11030 O	St			
			Omaha	NE 68137			
PURPOSE OF	(a) Category		(b) Descri				
EXPENDITURE	(See Categories listed at the top		Meal exp				
X Political	Food/Beverage Expe	nse					
Non-Political	(a) Chook if traval autoid	of Texas. Complete Schedule T.		Chook if Associa	TV officeholder linder	ovnonce	
	(c) Check if travel outside Candidate/Officeholder		ce sought	Check it Austin,	TX, officeholder living Office held	expense	
Complete ONLY if direct expenditure to benefit C/OH	Janaidate/Jineenoluel	name Office	o Jougiil		Jinde Heid		
In position to bottom of of t							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

Candidate/Officeholder/Politica	•	uction Guide explains how	laries/Wages/Contr		ΓHER (enter a categor	,	,
1 Total pages Schedule F4:		uction Guide explains now	to complete in	15 101111.	3 Filer ID (Ethio	ce Commiss	cion Eilere)
Sch: 15/18 Rpt: 22/27	Eltife, Kevin P. (Mr.)				00036573	CS COMMINS	sion i liers)
4 CREDIT CARD ISSUER	Name of finan see pro	icial institution	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
	\$511.63	12/09/2024					
7 PAYEE	(a) Payee name Village Bakery		(b) Payee at 111 E 8th :	St	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top of Food/Beverage Expen		Meal expe	nse			
X Political	Food/beverage Expen	130					
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
	\$10,000.00	12/12/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
i	` ′ ′ ′		(3) . a) 00 a.		• •	,	
	WinRed		PO Box 16		<i>,</i> ,	,	
			1 ' '	527	•	,	
PURPOSE OF	WinRed (a) Category		PO Box 16 Austin, TX (b) Descripti	78767 on			
PURPOSE OF EXPENDITURE	WinRed (a) Category (See Categories listed at the top of		PO Box 16 Austin, TX	78767 on			
	WinRed (a) Category	ns Made By	PO Box 16 Austin, TX (b) Descripti	78767 on			
EXPENDITURE	(a) Category (See Categories listed at the top or Contributions/Donation Candidate/Officeholde	ns Made By	PO Box 16 Austin, TX (b) Descripti	78767 on donation	officeholder living exp		
EXPENDITURE X Political	(a) Category (See Categories listed at the top or Contributions/Donation Candidate/Officeholde	ns Made By er/Political Committee of Texas. Complete Schedule T.	PO Box 16 Austin, TX (b) Descripti	78767 on donation			
EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c)	ns Made By er/Political Committee of Texas. Complete Schedule T.	PO Box 16 Austin, TX (b) Descripti Campaign	78767 on donation	officeholder living exp		
EXPENDITURE X Political Non-Political Complete ONLY if direct	(a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c)	ns Made By er/Political Committee of Texas. Complete Schedule T.	PO Box 16 Austin, TX (b) Descripti Campaign e sought	78767 on donation	officeholder living exp		
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH	WinRed (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c)	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic	PO Box 16 Austin, TX (b) Descripti Campaign e sought	78767 on donation Check if Austin, TX,	officeholder living exp		
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH	WinRed (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge	PO Box 16 Austin, TX (b) Descripti Campaign e sought	78767 on donation Check if Austin, TX,	officeholder living exp		Zip Code
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH PAYMENT	WinRed (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged \$102.90 (a) Payee name	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge	PO Box 16 Austin, TX (b) Descripti Campaign e sought	78767 on donation Check if Austin, TX, Credit Card Issuer	officeholder living exp Office held	iense	Zip Code
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH PAYMENT	WinRed (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged \$102.90	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge	PO Box 16 Austin, TX (b) Descripti Campaign e sought (c) Date(s) C	78767 on donation Check if Austin, TX, Credit Card Issuer	officeholder living exp Office held	iense	Zip Code
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE	WinRed (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged \$102.90 (a) Payee name S1 Global	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge	Austin, TX (b) Descripti Campaign e sought (c) Date(s) C (b) Payee ac 5050 Quor Suite 700 Dallas, TX	78767 on donation Check if Austin, TX, Credit Card Issuer ddress; rum Drive 75254	officeholder living exp Office held	iense	Zip Code
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF	WinRed (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde) (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged \$102.90 (a) Payee name S1 Global (a) Category	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge 10/14/2024	Austin, TX (b) Descripti Campaign e sought (c) Date(s) C (b) Payee ac 5050 Quor Suite 700 Dallas, TX (b) Descripti	78767 on donation Check if Austin, TX, Credit Card Issuer ddress; rum Drive 75254 on	officeholder living exp Office held	iense	Zip Code
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE	WinRed (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholde (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged \$102.90 (a) Payee name S1 Global	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge 10/14/2024	Austin, TX (b) Descripti Campaign e sought (c) Date(s) C (b) Payee ac 5050 Quor Suite 700 Dallas, TX	78767 on donation Check if Austin, TX, Credit Card Issuer ddress; rum Drive 75254 on	officeholder living exp Office held	iense	Zip Code
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF EXPENDITURE EXPENDITURE PORTONE OF EXPENDITURE OF EXPENDITURE PORTONE OF EXPENDITURE OF EXPENDITURE OF EXPENDITURE PORTONE OF EXPENDITU	(a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholder (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged \$102.90 (a) Payee name S1 Global (a) Category (See Categories listed at the top of Travel Out of District	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge 10/14/2024	Austin, TX (b) Descripti Campaign e sought (c) Date(s) C (b) Payee ac 5050 Quor Suite 700 Dallas, TX (b) Descripti	78767 on donation Check if Austin, TX, Credit Card Issuer ddress; um Drive 75254 on es	officeholder living exp Office held	State,	Zip Code
EXPENDITURE X Political Non-Political Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholder (c) Check if travel outside of Candidate/Officeholder (a) Amount Charged \$102.90 (a) Payee name S1 Global (a) Category (See Categories listed at the top of Travel Out of District	ns Made By er/Political Committee of Texas. Complete Schedule T. name Offic (b) Date of Charge 10/14/2024 of this schedule)	Austin, TX (b) Descripti Campaign e sought (c) Date(s) C (b) Payee ac 5050 Quor Suite 700 Dallas, TX (b) Descripti	78767 on donation Check if Austin, TX, Credit Card Issuer ddress; um Drive 75254 on es	officeholder living exp Office held Paid City,	State,	Zip Code

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

Candidate/Officeholder/Politica	-	ices Sal ruction Guide explains how	aries/Wages/Contr		ΓHER (enter a categor	y not listed al	bove)
1 Total pages Cabadula E4		Tuction Guide explains now	to complete th	15 101111.	3 Filer ID (Ethic	oc Commiss	sion Filore)
1 Total pages Schedule F4:	l	`			00036573	S CUITITIES	Sion File(S)
Sch: 16/18 Rpt: 23/27 4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$113.77	10/20/2024					
7 PAYEE	(a) Dayoo nama		(b) Payee ac	ddroco:	City	State,	Zip Code
	(a) Payee name		507 Calles		City,	State,	Zip Code
	Uber		#120	Si			
			Austin, TX	78702			
8 PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel				
X Political	Travel Out of District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		7 Check if Austin, TX.	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
	\$624.17	10/26/2024					
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	Halls Chophouse N	ashville	1600 West	End Ave			
	Tians Chophouse N	astiville	#101				
	(a) Oatawari		Nashville,				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti Meal expe				
l <u>—</u>	Food/Beverage Expe	nse	Ivical expe	1136			
				_			
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(a) Data(a) (Credit Card Issuer	r Daid		
PATWENT	` '		(c) Dale(s) C	credit Card Issuer	raiu		
	\$1,000.00	08/08/2024					
PAYEE	(a) Payee name		(b) Payee ac	ldress.	City,	State,	Zip Code
'	(a) i ayee name		P.O. Box 8		City,	State,	Zip Couc
	Angie Chen Button	Campaign	1 .0. box 0	332740			
			Richardson	n, TX 75083			
PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top		Campaign	Donation			
X Political	Contributions/Donatio Candidate/Officeholde						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH			3				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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/Officeriolder/Folitica	3	ruction Guide explains how	to complete		TITEN (enter a categor	y not iisted a	bove)
1	Total pages Schedule F4:		·	•		3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 17/18 Rpt: 24/27	Eltife, Kevin P. (Mr.)			00036573		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$503.00	09/30/2024					
7	PAYEE	(a) Payee name Lindale Little Leagu	ıe		Hubbard	City,	State,	Zip Code
L					TX 75771			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Contributions/Donatio	ns Made By	(b) Descrip Charitable	otion le donation			
	X Political	Candidate/Officeholde			_			
Ļ	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Onice	Sought		Office field		
Ĕ	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
	. Almeni	\$5,183.00	12/04/2024	(o) Date(s)	orean cara issuer	i i ala		
Г	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Johnson, Frances		1112 N F	Palace Ave			
				Tyler, TX	75702			
	PURPOSE OF	(a) Category	of this cohodule)	(b) Descrip				
l	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Donation	l			
	X Political		er/Political Committee					
	Non-Political	(7)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$475.60	10/09/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
l		S1 Global		1	orum Drive			
		31 Olobai		Suite 700 Dallas, T				
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descrip				
	EXPENDITURE	Travel Out of District	or alls scriedule)	Car servi	ces			
	X Political							
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
_								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

The Inst 2 FILER NAME Eltife, Kevin P. (Mr	truction Guide explains ho	w to complete this form.	3 Filer ID (Eth	ioo Commiss	
	`		3 Filer ID (Eth	ico Commic	
Eltife, Kevin P. (Mr.	`			ics Commis	sion Filers)
I :	.)		00036573		
Name of fina	ıncial institution	5 TOTAL OF UNITEMIZED			
see p	revious		 \$		
		CARD			
(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
\$1,849.56	12/03/2024				
·					
(a) Payee name	.1	(b) Payee address;	City,	State,	Zip Code
		3205 W Erwin St			
Willow Brook Coun	itry Club				
		Tyler, TX 75702			
(a) Category		(b) Description			
1 '	of this schedule)	Event expense			
Event Expense					
(c) Check if travel outside	of Texas. Complete Schedule T.	. Check if Austin, TX,	officeholder living ex	pense	
Candidate/Officeholder	r name Offi	ice sought	Office held		
	(a) Amount Charged \$1,849.56 (a) Payee name Willow Brook Coun (a) Category (See Categories listed at the top Event Expense	(a) Amount Charged (b) Date of Charge \$1,849.56 12/03/2024 (a) Payee name Willow Brook Country Club (a) Category (See Categories listed at the top of this schedule) Event Expense (c) Check if travel outside of Texas. Complete Schedule T Candidate/Officeholder name Off	See previous EXPENDITURES CHARGED TO A CREDIT CARD	See previous EXPENDITURES CHARGED TO A CREDIT CARD (a) Amount Charged \$1,849.56 12/03/2024 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (a) Payee name (b) Payee address; 3205 W Erwin St Tyler, TX 75702 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Payee address; City, 3205 W Erwin St Tyler, TX 75702 (b) Description Event expense (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office sought Office held	See previous EXPENDITURES CHARGED TO A CREDIT CARD (a) Amount Charged \$1,849.56 12/03/2024 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (a) Payee name (b) Payee address; City, State, 3205 W Erwin St Tyler, TX 75702 (a) Category (See Categories listed at the top of this schedule) Event Expense (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Candidate/Officeholder name City, State, 3205 W Erwin St Tyler, TX 75702 (b) Description Event expense

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 1/2 Rpt: 26/27	
2	FILER NAME		3	Filer II) (Ethics Commission Fi	lers)
	Eltife, Kevin	P. (Mr.)		0003	5573	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
-	08/19/2024	Energy Transfer LP				520.48
		6 Address of person from whom amount is received; City; State; Zip Code				201.10
		Address of person from whom amount is received, City, State, 21p Code				
		Dallas, TX 75225				
			olitic	val con	I ribution returned to filer	
		Partnership distribution	Ontic	ai con	indution returned to life.	
					·	
	Date	Name of person from whom amount is received			Amount (\$)	
	08/21/2024	Energy Transfer LP			.] \$15,9	955.80
		Address of person from whom amount is received; City; State; Zip Code				
		Dallas, TX 75225				
		_ ·	olitic	cal con	ribution returned to filer	
		Proceeds from sale				
	Date	Name of person from whom amount is received			Amount (\$)	
	11/19/2024	Energy Transfer LP			\$13,4	104.39
		Address of person from whom amount is received; City; State; Zip Code			"[
		Dallas, TX 75225				
			olitic	cal con	ribution returned to filer	
		Partnership distribution				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/14/2024	Enterprise Products Partner LP MLP			\$4	120.00
		Address of person from whom amount is received; City; State; Zip Code			1	
		Houston, TX 77002				
		Purpose for which amount is received	olitic	al con	ribution returned to filer	
		Partnership distribution				
	Date	Name of person from whom amount is received			Amount (\$)	
	11/14/2024	Enterprise Products Partner LP MLP				120.00
		Address of person from whom amount is received; City; State; Zip Code	•••••			
		Houston, TX 77002				
		Purpose for which amount is received	olitic	al con	ribution returned to filer	
		Partnership distribution				

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

SCHEDULE K

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	The Instruction Guide explains how to complete this form.			Total pages Schedule K: Sch: 2/2 Rpt: 27/27			
2	FILER NAME		3 Filer II	(Ethics Commission F	ilers)		
l	Eltife, Kevin P. (Mr.)			00036573			
4	Date 09/09/2024	Name of person from whom amount is received UBS Financial Services Address of person from whom amount is received; City; State; Zip Code		8 Amount (\$)	\$0.40		
		Tyler, TX 75703-4400					
		7 Purpose for which amount is received	olitical cont	ribution returned to filer			
Г	Date	Name of person from whom amount is received		Amount (\$)			
l	10/07/2024	UBS Financial Services			\$0.38		
		Address of person from whom amount is received; City; State; Zip Code Tyler, TX 75703-4400					
		Purpose for which amount is received	olitical cont	ribution returned to filer			
l		Interest income					
F	Date	Name of person from whom amount is received		Amount (\$)			
l	11/07/2024	UBS Financial Services		(4)	\$0.01		
l							
		Tyler, TX 75703-4400	list - l				
		Purpose for which amount is received	olitical cont	ribution returned to filer			
F	Date	Name of person from whom amount is received	Amount (\$)				
l	12/06/2024	UBS Financial Services			\$0.14		
		Address of person from whom amount is received; City; State; Zip Code					
l		Tyler, TX 75703-4400					
l		· · · · · · · · · · · · · · · · · · ·	olitical cont	ribution returned to filer			
l		Interest income					