CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00067738	ssion Filers)	2 Total pages filed: 67
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Jeff C.			Date Received
10 000					ELECTRONICALLY FILED
					01/15/2025
	NICKNAME	LAST		SUFFIX	01/15/2025
		Leach			
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	800 Glen Rose Dr.				
ADDRESS					Receipt # Amount
Change of Address	Allen, TX 75013				
	,				Date Processed
					Data large and
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER	Mr.	Dan			
NAME		Ban			
	NICKNAME	LAST		SUFFIX	
	INICKINAIVIE	Panetti		SUFFIX	
		ranem			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX DI EVSE):	Λ D 7	/ SUITE #; CITY;	STATE; ZIP CODE
TREASURER	3513 Cross Bend Rd.	BOX PLEASE),	AP	/ 5011E #, CITT,	STATE, ZIP CODE
ADDRESS	3313 Closs Bellu Ru.				
(Residence or Business)					
	Plano, TX 75023				
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	XTENSION		
TREASURER	(214) 682-9248				
PHONE	(214) 002 0240				
8 REPORT					
TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasurer
		-	=		appointment (officeholder only)
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year	TU	IDOLICII	Month Day	Year
OOVERLED	10/27/2024	IH	IROUGH	12/31/202	24
40 51 5071011	EL ESTION BATE	1		ELECTION TVDE	
10 ELECTION	ELECTION DATE Month Day Year		rim on t	ELECTION TYPE	Othor
	Month Day Year 11/05/2024		rimary	Runoff	Other
	11/03/2024	ΧG	eneral	Special	
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT	(if known)
	State Representative Distr	rict 67 Collin		State Represent	tative District 67
	<u> </u>			<u> </u>	
		GO T	O PAGE 2		
		GOI	O PAGE Z		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 67

13 C / OH NAME	Leach, Jeff C. (The	Honorable)	14 Filer ID (00067738	Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholde	political contributions accepted or political expenditure. These expenditures may have been made without the officeholders are required to report this information	he candidate's or office	holder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	X GENERAL	Texas Alliance for Life					
		COMMITTEE ADDRESS					
	SPECIFIC	000 Centre Park Drive Suite 380					
		Austin, TX 78754					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Shaw, James					
		COMMITTEE CAMPAIGN TREASURER ADDRES	S				
		4505 Corazon Cv					
		Round Rock, TX 78681					
16 CONTRIBUTION TOTALS		MIZED POLITICAL CONTRIBUTIONS (OTHER THAN EES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00			
)	\$ 109,350.00					
EXPENDITURE TOTALS	3. TOTAL UNITE		\$ 2,638.89				
	4. TOTAL POLITI	CAL EXPENDITURES		\$ 121,993.62			
CONTRIBUTION BALANCE	5. TOTAL POLITI REPORTING P	CAL CONTRIBUTIONS MAINTAINED AS OF THE LA ERIOD	AST DAY OF THE	\$ 235,500.39			
OUTSTANDING LOAN TOTALS		PAL AMOUNT OF ALL OUTSTANDING LOANS AS (RTING PERIOD	OF THE LAST DAY	\$ 0.00			
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.					
		The Hone	orable Jeff C. Leach				
		Signature of	Candidate or Officehol	der			
AFFIX NO	TARY STAMP / SEAL A	BOVE					
Sworn to and subscribed before me, by the said, this the							
of	, 20, to	certify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 67
18 FILER N		19 Filer ID	(Ethics Com	mission Filers)
	Deff C. (The Honorable)	00067738	-	
	JLE SUBTOTALS F SCHEDULE		SUBTO	TAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	94,850.00
2. X	\$	14,500.00		
3.	\$			
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	121,993.62	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION		\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CO	ONTRIBUTIO	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/67	
2	FILER NAME Leach, Jeff (C. (The Honorable)			3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/13/2024	5 Full name of contributor AFSCME TX Correctional O6 Contributor address; City; State)	7	Amount of Contribution (\$)	\$2,500.00
_	Deinsinal	Huntsville, TX 77320		O Faralaura (Octabata ations			
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date 12/13/2024	Abbott Laboratories Employ Contributor address; City; State		00040279)		Amount of Contribution (\$)	\$500.00
	Principal occu	Abbott Park, IL 60064 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor Ahlberg, Trevor L (Mr.) Contributor address; City; State	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Irving, TX 75038 pation / Job title (See Instructions)		Employer (See Instructions Cottonwood Financial)		
	Date 12/13/2024	Full name of contributor Allen Boone Humphries Rot Contributor address; City; State Houston, TX 77027)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor American Homes 4 Rent PA Contributor address; City; State Las Vegas, NV 89119		00830083		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CO	NTRIBUTIO	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to	complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/67	
2	FILER NAME Leach, Jeff C	C. (The Honorable)			3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/14/2024	 Full name of contributor X American Property Casualty II Contributor address; City; State; 		00066742)	7	Amount of Contribution (\$)	\$3,000.00
		Chicago, IL 60631					
8	Principal occu	pation / Job title (See Instructions)	9	9 Employer (See Instructions)		
	Date 12/12/2024	Associated Builders and Cont				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor Calpine Corporation PAC Contributor address; City; State; Houston, TX 77002	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor Cammack & Strong PC Contributor address; City; State; Austin, TX 78701)		Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor Charter Communications Inc Contributor address; City; State; Austin, TX 78701				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 6/67	
2	FILER NAME Leach, Jeff (C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/13/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_	Duinning Langu	Austin, TX 78701	O Francis var (Can Instructiona			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	'	,	. , ,	,		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#: Deason, Darwin Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$6,000.00
		Dallas, TX 75219				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_FOMC PAC Contributor address; City; State; Zip Code Dallas, TX 75230			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Gonzales, Larry Contributor address; City; State; Zip Code Round Rock, TX 78681)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to cor	mplete this form	n.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/67	
2	FILER NAME Leach, Jeff C	. (The Honorable)			3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 11/06/2024	 Full name of contributor out-out-out-out-out-out-out-out-out-out-			7	Amount of Contribution (\$)	\$2,000.00
8	Principal occur	Layton, UT 84041 pation / Job title (See Instructions)	I ₉	Employer (See Instructions			
	Managemen			Elite Level Management		.c	
	Date 12/13/2024	Full name of contributor out-o HMWK LLC Contributor address; City; State; Zip 0)		Amount of Contribution (\$)	\$250.00
	Data disal sa sa	Austin, TX 78701		Facelouse (Constant and			
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-o	of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-on Jackson Walker PAC Contributor address; City; State; Zip of Dallas, TX 75201	of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			•				

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ons	S	CHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1 Total pages School Sch: 5/12 Rpt:		
2	FILER NAME	C. (The Honorable)			3 Filer ID (Ethics 00067738	Commissio	on Filers)
4	Date 12/14/2024	5 Full name of contributor Jaye, Olin6 Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code		7 Amount of Contri	bution (\$)	\$50.00
•	Dringing aggr	Plano, TX 75023		O Employer (Coo Instructionary	20)		
8		pation / Job title (See Instructions)		9 Employer (See Instructions			
	Real Estate	Broker ————————————————————————————————————		Olin Jaye Associates Ll	LLC		
	Date 12/13/2024	Full name of contributor Keffer Konsulting LLC Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code		Amount of Contri	bution (\$)	\$1,000.00
		Eastland, TX 76448					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)		
	Date 10/30/2024	Full name of contributor Kirby Corp PAC Contributor address; City; Sta	out-of-state PAC (ID#:_		Amount of Contri	bution (\$)	\$1,000.00
		Houston, TX 77007					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	ns)		
	Date 12/13/2024	Full name of contributor Lesch, Melissa Contributor address; City; Sta Grapevine, TX 76051)	Amount of Contri	bution (\$)	\$500.00
		pation / Job title (See Instructions))	Employer (See Instructions	· ·		
	Bond Agent			PCL Contract Bonding A	Agency		
	Date 12/13/2024	Full name of contributor Linebarger Goggan Blair & Contributor address; City; Sta Austin, TX 78760			Amount of Contri	bution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/67	
2	FILER NAME Leach, Jeff C	C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/11/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
•	Dringinal acqu	Austin, TX 78731	9 Employer (See Instructions			
•	Lawyer	pation / Job title (See Instructions)	9 Employer (See Instructions Loewy Law Firm)		
	Date 12/14/2024	Full name of contributor X out-of-state PAC (ID#: CI McGuire Woods Federal PAC Fund Contributor address; City; State; Zip Code	00225342		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Richmond, VA 23219 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#: North Texas Automobile Dealers PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Irving, TX 75062				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#: Oncor Texas State Political Action Committee Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Dallas, TX 75202 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#: Oncor Texas State Political Action Committee Contributor address; City; State; Zip Code Dallas, TX 75202			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		I				

	MONET	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 10/67	
2	FILER NAME Leach, Jeff (C. (The Honorable)			3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/13/2024	5 Full name of contributor Penn Entertainment Inc Tex6 Contributor address; City; State)	7	Amount of Contribution (\$)	\$2,000.00
	Dringing Loggy	Wyomissing, PA 19610		O Employer (Coa Instructions			
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date 11/06/2024	Full name of contributor X Pfizer PAC Contributor address; City; State	out-of-state PAC (ID#: <u>C</u>	00016683		Amount of Contribution (\$)	\$2,000.00
		New York, NY 10017	•				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor PharmPAC Contributor address; City; State	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78757					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor Red Rock Texas PAC Contributor address; City; State Austin, TX 78701				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor Sullivan, Raymond Contributor address; City; State Austin, TX 78735				Amount of Contribution (\$)	\$1,000.00
	Principal occu GR Consulta	pation / Job title (See Instructions)		Employer (See Instructions Sullivan Public Affairs)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/12 Rpt: 11/67
2	FILER NAME Leach, Jeff C	C. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067738
4	Date 12/13/2024	 Full name of contributor		7	Amount of Contribution (\$) \$1,500.00
_	Dringing Loggy	Austin, TX 78759	D. Employer (See Instructions		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Texans for Reasonable Solutions PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
	Principal occu	Austin, TX 78741 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
		,		,	
	Date 12/13/2024	Full name of contributor ut-of-state PAC (ID#:_ Texas Aggregates & Concrete Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
		Austin, TX 78701			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association for Interior Design PAC Contributor address; City; State; Zip Code Houston, TX 77269			Amount of Contribution (\$) \$700.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Bail PAC Contributor address; City; State; Zip Code Austin, TX 78731)		Amount of Contribution (\$) \$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
		· ·			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/67	
2	FILER NAME Leach, Jeff C	C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/13/2024	 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	5)		
	Date 10/28/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78703		<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#: Texas Land Title Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78703				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Texas McDonald's Operators Association PAC Contributor address; City; State; Zip Code Athens, TX 75751			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Sands PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION		LE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/67	
2	FILER NAME Leach, Jeff (C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 11/06/2024	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 12/12/2024	Full name of contributor out-of-state PAC (ID#: Texas Society of Certified Public Accountants Paccountaints Paccountributor address; City; State; Zip Code Dallas, TX 75254			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#: 12/13/2024 Texas Towing & Storage Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Dringing occu	Spring, TX 77386	Employer (See Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUI	LE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/67	
2	FILER NAME Leach, Jeff (C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/12/2024	 Full name of contributor	7	Amount of Contribution (\$)	\$2,000.00	
_	Dringing! goog	Fort Worth, TX 76185	O Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas and Southwestern Cattle Raisers Assoc 9 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Fort Worth, TX 76185 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor x out-of-state PAC (ID#: C00284885 12/13/2024 The Home Depot Inc PAC Contributor address; City; State; Zip Code		C00284885)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ The Posey Law Firm P.C. Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ The Real Estate Council PAC Contributor address; City; State; Zip Code Dallas, TX 75201			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTR		SCHEDUI	LE A1		
	The Instru	ction Guide explains how to comp	rm.	1	Total pages Schedule A1: Sch: 12/12 Rpt: 15/67		
2	FILER NAME Leach, Jeff (C. (The Honorable)			3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 12/13/2024	 Full name of contributor out-of-sta TxANA PAC Contributor address; City; State; Zip Cod 		7	Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	9 Employer (See Instructions	5)		
	Date Full name of contributor X out-of-state PAC (ID#: C00116020 12/12/2024 Vulcan Materials Company PAC Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$1,000.00
	Principal occu	Birmingham, AL 35238 Dation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Date 12/13/2024	Full name of contributor out-of-star Wholesale Beer Distributors of Texas Contributor address; City; State; Zip Cod Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 10/30/2024	Yarbrough, James				Amount of Contribution (\$)	\$50.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	<u>;</u>)		
	Date 11/06/2024	Full name of contributor out-of-state Zachry Corporation PAC Contributor address; City; State; Zip Cod San Antonio, TX 78265			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 16/67 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Leach, Jeff C. (The Honorable) 00067738 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 8 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/28/2024 Texas Defense PAC \$14,500.00 Research & Data 7 Contributor address; City; State; Zip Code Austin, TX 78768 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

Contributions / Donations Made by - Candidate/Officeholder/Political Committee Credit Card Payment			nmittee I	Gilt/Awards/Memorials Legal Services The Instruction Gi	·		ages	/Contract Labor		OTHER (er		category not listed above)
<u> </u>	T	_			and explains in			1	_	F:1 15		(Filting O
1	Total pages Schedule F1:	ı							3	Filer ID		(Ethics Commission Filers)
	Sch: 1/51 Rpt: 17/67		Leach, Jeff (C. (The Honora	.ble)					000677	38	
4	Date	5	Payee name									
	11/06/2024		5th Street Pi	izza								
6	Amount (\$)	7	Payee addres	ss; City;	State:	Zip Co	de					
ľ	\$259.51	l	111 N Centr	•	State,	Zip 00	uc					
	Ψ239.31			ai Expwy								
			#102									
			Allen, TX 75	013								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	dule)	(b)	Description				
	OF		Event Exper			,		Check if travel	outsi	de of Texas.	Comp	olete Schedule T.
	EXPENDITURE		·					Check if Austin,	, TX,	officeholder	living	expense
								Dinner for car	mp	aign eve	nt	
9	Complete ONLY if direct		andidate/Offic	ceholder name	Of	fice sou	ght			Offic	e he	ld
	expenditure to benefit C/O	Η										
	Date		Payee name									
	10/28/2024		7-Eleven - A	llen								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$35.38		1004 W McE	Dermott								
			AU TV 75	010								
			Allen, TX 75	013								
	PURPOSE OF	(a)	Category (Se	e Categories listed at t	he top of this sched	dule)	(b)	Description				
	EXPENDITURE		Travel In Dis	strict				=				olete Schedule T.
								Campaign/off				
								Campaignion	lice	noidei it	JEIC	naige
		<u> </u>										
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	ceholder name	Of	fice sou	ght			Offic	e he	ld
	experialitate to bettern 6/01											
	Date		Payee name									
	11/25/2024		7-Eleven - A	llen								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$41.81		1004 W McE	Dermott		·						
	,											
			Allen, TX 75	012								
		_										
	PURPOSE OF			e Categories listed at t	he top of this sched	dule)	(b)	Description				
	EXPENDITURE		Travel In Dis	strict				Check if travel of Check if Austin,				olete Schedule T.
								Campaign/off				
								Campaign/011	iice	noidei It	u c i C	naige
	Operation ONE VIII II	<u> </u>	Name	l l-l	~.	···	and a st			0.00		La
	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offic	ceholder name	Of	fice sou	gnt			Offic	e he	Ια
	Superioritate to belieff 0/01	•										
1												

SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 2/51 Rpt: 18/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/23/2024	7-Eleven - Allen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.00	1004 W McDermott
		Allen, TX 75013
8	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
		Campaign/Officeholder fuel charge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/31/2024	7-Eleven - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.97	1004 W McDermott
		Allen, TX 75013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign/Officeholder office supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/26/2024	ADT
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,160.00	3220 Keller Springs
		Carrollton, TX 75006
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/Officeholder security service fees -
		apportioned
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/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: 3/51 Rpt: 19/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/26/2024	ADT
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,740.75	3220 Keller Springs
		Carrollton, TX 75006
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign/Officeholder security upgrades
		Campaign/Onlocholder Security appraises
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
	Date	Payee name
	11/04/2024	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$621.22	208 S Akard St
		Suite 2954
		Dallas, TX 75202
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder technology supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/07/2024	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	208 S Akard St
		Suite 2954
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder cell/internet charges
	0 1 0 0 0 0 0 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 4/51 Rpt: 20/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/20/2024	AT&T Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$487.47	208 S Akard St
		Suite 2954
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZAI ZABITORZ	Check if Austin, TX, officeholder living expense
		Campaign/officeholder cell phone/internet charges
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
·	expenditure to benefit C/OI	
	Date	Payee name
	12/03/2024	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	208 S Akard St
	¥==****	Suite 2954
		Dallas, TX 75202
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder cell phone/internet charges
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	12/19/2024	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$634.85	208 S Akard St
		Suite 2954
		Dallas, TX 75202
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder cell/internet charges
		Sampaig. 2 simon section of things
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

spense Event Expense Loan Repayment/Reimbu

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 5/51 Rpt: 21/67	2 FILER NAME Leach, Jeff C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067738
4	Date 12/19/2024	5 Payee name AT&T Inc
6	Amount (\$) \$489.46	7 Payee address; City; State; Zip Code 208 S Akard St Suite 2954 Dallas, TX 75202
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder technology supplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/19/2024	Payee name AT&T Inc
	Amount (\$) \$114.31	Payee address; City; State; Zip Code 208 S Akard St Suite 2954 Dallas, TX 75202
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder technology supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/23/2024	Payee name AT&T Inc
	Amount (\$) \$272.25	Payee address; City; State; Zip Code 208 S Akard St Suite 2954 Dallas, TX 75202
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/Officeholder cell/internet charges
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			ttee L	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)		
				ne instruction Gu	ide explains now to	comp	nete this form.	_			
1	Total pages Schedule F1:	l						3	Filer ID	(Ethics Commission Filers	5)
	Sch: 6/51 Rpt: 22/67	Le	each, Jeff C	C. (The Honoral	ole)				00067738		
4	Date	5 Pa	yee name								
	10/31/2024	l	len Rotary	Club							
6	Amount (\$)	7 Pa	yee address	s; City;	State; Zip	Code	<u> </u>				
ľ	\$400.00	1	.0 E Stacy	•	Otato, E.p	oouo					
	Ψ100.00		io L Otacy								
		 		200							
		All	len, TX 750	J02							
8	PURPOSE	(a) Ca	ategory (See	Categories listed at th	e top of this schedule)	(b	Description				
	OF EXPENDITURE			/Donations Ma						plete Schedule T.	
		Ca	andidate/O	fficeholder/Polit	ical Committee		ш		officeholder living		
							Campaign/off	lice	noidei men	iberstilb lee	
_		<u> </u>				Щ.					
9	Complete ONLY if direct expenditure to benefit C/OH		ididate/Office	eholder name	Office	sough	t		Office h	eld	
		•									
	Date	Pa	yee name								
	11/01/2024	An	mazon								
	Amount (\$)	Pa	yee address	s; City;	State; Zip	Code)				
	\$103.92	41	.0 Terry Av	e N							
			•								
		ا م	eattle, WA	98109							
	PURPOSE					1/1-	N =				
	PURPOSE OF			Categories listed at th		(1)	DescriptionCheck if travel	nutei	de of Teyas Com	plete Schedule T.	
	EXPENDITURE		Tice Overn	ead/Rental Exp	ense		<u> </u>		officeholder living		
							Campaign/off				
	Complete ONLY if direct	I Can	didate/Office	eholder name	Office	 souah	t		Office he	eld	
	expenditure to benefit C/O					3					
_	Dete	_									
	Date		yee name								
	11/04/2024	All	nazon								
	Amount (\$)	l .	yee address	•	State; Zip	Code	2				
	\$207.84	41	.0 Terry Av	e N							
		Se	eattle, WA	98109							
	PURPOSE	(a) Ca	ategory (See	Categories listed at th	e ton of this schedule)	(b) Description				
	OF			ead/Rental Exp		`		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			·			_		officeholder living		
							Campaign/off	fice	holder office	e supplies	
	Complete ONLY if direct		didate/Office	eholder name	Office	sough	t		Office h	eld	
	expenditure to benefit C/O	H									
I											

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Legal Services The Instruction Guid		Vage	s/Contract Labor		OTHER (enter a	category not listed above)
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1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)
	Sch: 7/51 Rpt: 23/67		Leach, Jeff (C. (The Honorabl	e)				00067738	
4	Date	5	Payee name							
	11/05/2024		Amazon							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip Co	ode				
	\$55.20		410 Terry Av	ve N						
			•							
			Seattle, WA	00100						
Ļ		<u> </u>								
8	PURPOSE OF	(a)		e Categories listed at the		(b)	Description			
	EXPENDITURE		Office Overh	nead/Rental Expe	ense				officeholder living	plete Schedule T.
							Campaign/off			
							odinpaign, on		1101001 011100	о одрушоо
Ļ	Commission ONII V if direct	<u> </u>	Condidate/Offic		Office				Office he	-1.d
9	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	Office sou	ignt			Office he	eia
	<u>'</u>									
	Date		Payee name							
	11/15/2024		Amazon							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode				
	\$38.96		410 Terry Av	ve N						
			Seattle, WA	98109						
	DUDDOCE	(-)				(1-)				
	PURPOSE OF	(a)		e Categories listed at the		(D)	Description Check if travel (nutei	de of Teyes Com	plete Schedule T.
	EXPENDITURE		Office Overr	nead/Rental Expe	ense				officeholder living	
							Campaign/off			
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office sou	ıaht			Office he	eld
	expenditure to benefit C/OI					·9···				
	Data	<u> </u>								
	Date		Payee name							
	11/26/2024		Amazon							
	Amount (\$)		Payee addres	•	State; Zip Co	ode				
	\$703.35		410 Terry Av	ve N						
			Seattle, WA	98109						
	PURPOSE	(a)	Category (Se	e Categories listed at the	ton of this schedule)	(b)	Description			
	OF	 ` ´	Event Exper		top of this scriedule)	`		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE						Check if Austin,	, TX,	officeholder living	g expense
							Campaign pa	ırac	le decor, ca	ndy
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office sou	ıght			Office he	eld
	expenditure to benefit C/OI	Н								
l										

SCHEDULE F1

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

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

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 co	omplete this form		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID ((Ethics Commission Filers)
Sch: 8/51 Rpt: 24/67	Leach, Jeff C. (The Honorable)		00067738	
4 Date	5 Payee name		•	
12/09/2024	Amazon			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$38.92	410 Terry Ave N			
	Seattle, WA 98109			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	า	
OF	Office Overhead/Rental Expense		ravel outside of Texas. Comple	ete Schedule T.
EXPENDITURE	'		Austin, TX, officeholder living ex	
		Campaigr	n/officeholder office s	supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held	I
Date	Payee name			
12/18/2024	Amazon			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$208.93	410 Terry Ave N			
	Seattle, WA 98109			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	า	
OF EXPENDITURE	Office Overhead/Rental Expense		ravel outside of Texas. Comple	
			Austin, TX, officeholder living ex n/officeholder office s	
		Campaigi	il/officeriolaer office s	supplies
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held	·
expenditure to benefit C/O		ugiit	Office field	•
Data				
Date 12/18/2024	Payee name Amazon			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$68.13	410 Terry Ave N			
	Seattle, WA 98109	i		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense		ravel outside of Texas. Comple Austin, TX, officeholder living ex	
			n/officeholder office s	
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ught	Office held	l
expenditure to benefit C/O		•		

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/51 Rpt: 25/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/20/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,731.90	410 Terry Ave N
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Technology supplies for Capitol office
		. Someony, emphase in
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	11/07/2024	Atkinson, Julie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,325.00	1508 Cool Springs Drive
		Allen, TX 75013
	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 staff wages
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	11/07/2024	Atkinson, Julie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$15,000.00	1508 Cool Springs Drive
		Allen, TX 75013
	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/officeholder staff wages
		Campaign/onicentider stan wages
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/51 Rpt: 26/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/03/2024	Atkinson, Julie (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,050.00	1508 Cool Springs Drive
		Allen, TX 75013
8	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 staff wages
		Campaigh stan wages
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/26/2024	Atkinson, Julie (Ms.)
H	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1508 Cool Springs Drive
	7-,000	
		Allen, TX 75013
H	PURPOSE	
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/Officeholder staff wages
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/Oi	
	Date	Payee name
	11/14/2024	Austin Airport Food & Beverage Court
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.81	3600 Presidential Blvd
		Austin, TX 78719
	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
		Meal during Campaign/officeholder travel
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/51 Rpt: 27/67 Leach, Jeff C. (The Honorable) 00067738 4 Date Payee name 12/04/2024 Austin Airport Food & Beverage Court 6 Amount (\$) Payee address; City; State; Zip Code \$87.72 3600 Presidential Blvd Austin, TX 78719 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal during Campaign/officeholder travel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/16/2024 Austin Airport Food & Beverage Court Amount (\$) Payee address; City; State; Zip Code \$46.81 3600 Presidential Blvd Austin, TX 78719 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal during Campaign/officeholder travel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/19/2024 Austin Airport Food & Beverage Court Amount (\$) Payee address: City: State; Zip Code \$47.76 3600 Presidential Blvd Austin, TX 78719 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal during Campaign/officeholder travel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gitt/Awards/Memorials Ex Legal Services The Instruction Guid	pense F		pense ages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:								Filer ID	(Ethics Commission Filers)	
L	Sch: 12/51 Rpt: 28/67	Leach,	Jeff C. (The Honorable	e)					00067738		
4	Date	5 Payee r	name								
	11/27/2024	Beaco	n Strategies								
6	Amount (\$)	7 Payee a	address; City;	State;	Zip Coo	de					
	\$5,000.00	PO Bo	x 1696								
		Liberty	Hill, TX 78642								
8	PURPOSE	(a) Catego	y (See Categories listed at the	top of this schedu	ule)	(b)	Description				_
	OF EXPENDITURE		ting Expense		,		-		de of Texas. Com		
	EXI ENDITORE						—		officeholder living	expense	
							Campaign co	IISU	illing		
9	Complete ONLY if direct	Condide	o/Officeholder name	0"	fice sour	nh+			Office he	old.	_
a	Complete ONLY if direct expenditure to benefit C/OI		e/Officeholder name	OII	fice soug	JIIL			Onice ne	au	
	Date	Payee r	name								
	12/13/2024	Bryant	Matthew								
	Amount (\$)	Payee a	address; City;	State;	Zip Cod	de					
	\$300.00	6800 C	CR 487								
		Nevad	a, TX 75173								
	PURPOSE	(a) Catego	y (See Categories listed at the	top of this sched	ule)	(b)	Description				_
	OF EXPENDITURE		Expense						de of Texas. Com		
							Check if Austin, Security for C		officeholder living		
							Security for C	an	ipaigi1/0111ce	illoluer everit	
_	Complete ONLY if direct	Candidat	e/Officeholder name	Off	fice soug	nht			Office he	ald.	_
	expenditure to benefit C/O		o, omounded name	Oli	Jou	g: 1L			Since He		
\vdash	Date	Doves :	2200								=
	11/19/2024	Payee r	name !'s - Temple								
			<u> </u>	Ctata	7in Oct	40					_
	Amount (\$)	,	address; City; I General Bruce Dr	State;	Zip Coo	лe					
	\$57.55	4155 N	i General Bruce Dr								
		Temple	e, TX 76501								
	PURPOSE	(a) Catego	y (See Categories listed at the	top of this schedu	ule)	(b)	Description				
	OF EXPENDITURE	Travel	Out of District				_		de of Texas. Comp		
							Campaign/off		officeholder living holder fuel c		
							Campaign/011		noider idel (a.go	
\vdash	Complete ONLY if direct	Candidat	e/Officeholder name	Off	fice soug	tht			Office he	eld	_
	expenditure to benefit C/O		5. 5strioted number	Oli	5549	y. 12			J00 110		
											-

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Contributions/ Officials India Committee
Graduates/Officials India Committee

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

	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: 13/51 Rpt: 29/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/22/2024	Buc-ee's - Temple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.25	4155 N General Bruce Dr
		Temple, TX 76501
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
		Gampaign monocholder later shall ge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/26/2024	Buc-ee's - Temple
	Amount (\$)	Payee address; City; State; Zip Code
	\$56.37	4155 N General Bruce Dr
		Temple, TX 76501
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Campaign/officeholder living expense Campaign/officeholder fuel charge
		Campaign of fider of alge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	12/10/2024	Cabela's - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$371.38	1 Cabela Dr
	Ψ571.50	1 Cabela Di
		Allen, TX 75002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for event with legislators
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct 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 Committ

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/51 Rpt: 30/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/16/2024	Capitol Cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.54	1001 Congress Ave
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss Campaign/officeholder duties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	'
	Date	Payee name
	11/05/2024	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$514.24	1400 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense Gifts for staff and campaign supporters
		Onto for start and earnpaight supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/16/2024	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$222.78	1400 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Gifts for campaign supporters
		Onto for earripting it supporters
_	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 Com

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

	Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 15/51 Rpt: 31/67	Leach, Jeff C. (The Honorable) 00067738					
4	Date	5 Payee name					
	12/20/2024	Children's Advocacy Center of Collin County					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$1,000.00	2205 Los Rios Blvd					
		Plano, TX 75074					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.					
		Candidate/Officeholder/Political Committee Campaign/officeholder event sponsorship					
		Campaign/onicentiaen event sponsorsinp					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
	Date	Payee name					
	11/01/2024	Collin County Republican Party					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$500.00	2963 W. 15th Street					
		Suite 2981					
		Plano, TX 75075					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Candidate/Officeholder/Political Committee Campaign sponsorship for election night event					
		Campaign sponsorship for election night event					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	11/25/2024	Courtyard Marriott - New Braunfels					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,069.40	750 I 35					
		New Braunfels, TX 78130					
	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					
		Lodging for officeholder/staff event					
		Loughing for difficultivities event					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	y					
1							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/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: 16/51 Rpt: 32/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/05/2024	Diaz, Ana
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3926 Ermine Way
		Farmers Branch, TX 75234
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign/Officeholder living expense Campaign/Officeholder cleaning fee for event
		Sampaign/Officeriolder cleaning fee for event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/29/2024	Dropbox
_	Amount (\$)	Payee address; City; State; Zip Code
	\$172.69	333 Brannan St,
	Ψ172.03	333 Brainfait St,
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign/officeholder online storage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
_	D :	
	Date	Payee name
	11/29/2024	Dropbox
	Amount (\$)	Payee address; City; State; Zip Code
	\$172.69	333 Brannan St,
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Campaign online storage
		Campaign online storage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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 co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 17/51 Rpt: 33/67	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		
	12/30/2024	Dropbox		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$172.69	333 Brannan St,		
		San Francisco, CA 94107		
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.
	LXI LINDITORE			Check if Austin, TX, officeholder living expense
				Campaign/Officeholder online storage
_	Complete ONLY if direct	Condidate/Officeholder name Office acu	abt	Office hold
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	gnı	Office held
_	D-4-			
	Date	Payee name		
	12/05/2024	Eggleston, King, Davis LLP		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$10,000.00	102 Houston Ave		
		Suite 300		
		Weatherford, TX 76086		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Legal Services		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign/officeholder legal fees
				, , , , , , , , , , , , , , , , , , ,
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O		-	
	Date	Payee name		
	11/12/2024	Element Hotel Austin		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$365.99	109 E 7th Street		
		Austin, TX 78701		
	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(2)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver out or blocklet		X Check if Austin, TX, officeholder living expense
				Campaign/officeholder lodging
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/Ol	¬		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula F1:	1
_	Total pages Schedule F1: Sch: 18/51 Rpt: 34/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/15/2024	Element Hotel Austin
6	Amount (\$) \$386.15	7 Payee address; City; State; Zip Code 109 E 7th Street Austin, TX 78701
8	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. Check if Austin, TX, officeholder living expense Campaign/officeholder lodging
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/05/2024	Element Hotel Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$9,290.27	109 E 7th Street
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder lodging deposit for session
		Campaign/onicenduel louging deposit for session
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/09/2024	Elke's Market
	Amount (\$)	Payee address; City; State; Zip Code
	\$722.45	105 N Greenville Ave
		Allen, TX 75002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Catering for Campaign/officeholder event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		xpens Wages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)
	Sch: 19/51 Rpt: 35/67	Leach, Jeff	C. (The Honorable)					00067738	
4	Date	5 Payee name							
	12/02/2024	Fairmont A							
6	Amount (\$)	7 Payee addre	ess; City; S	State; Zip Co	ode				
	\$402.36	101 Red R	iver Street						
		Austin, TX	78701						
8	PURPOSE	(a) Category (c	see Categories listed at the top of th	sia aabadula)	(b)	Description			
	OF	Travel Out		iis scriedule)	(~)	_ ·	outsio	de of Texas. Comp	olete Schedule T.
	EXPENDITURE	Traver ear	or Biotriot			X Check if Austin,	TX,	officeholder living	expense
						Campaign/off	ice	holder lodgir	ng
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ught			Office he	ld
	Date	Payee name	<u> </u>						
	12/09/2024	Fairmont A							
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	ode				
	\$1,111.69	101 Red R		, ,					
	+-,								
		Austin, TX							
	PURPOSE OF		see Categories listed at the top of the	nis schedule)	(b)	Description			
	EXPENDITURE	Travel Out	of District			—		de of Texas. Comp officeholder living	
						Check if Austin, Campaign/off			
						-ampaign/on			·⊎
	Complete ONLY if direct		iceholder name	Office sou	<u>l</u> ught			Office he	ld
	expenditure to benefit C/OI	T							
	Date	Payee name							
	12/23/2024	Firestone							
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	ode				
	\$1,535.30	1330 W Mo	Dermott Drive						
		Allen, TX 7	5013						
	PURPOSE	(a) Category (S	see Categories listed at the top of th	nis schedule)	(b)	Description			
	OF EXPENDITURE	Transporta	tion Equipment And Re			ш		de of Texas. Comp	
		Expense				_		officeholder living	
						apportioned	псе	noluer venic	cle maintenance -
	Commission ONU Wife allows	Condition 10	iaabaldan nam	O#:		1-11		Off: 1	lai
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sou	ıgnt			Office he	·Iα

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/51 Rpt: 36/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/08/2024	GoDaddy.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$536.88	14455 North Hayden Road, Suite 219
	l	
		Scottsdale, AZ 85260
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	l	Campaign/officeholder website renewal
	l	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	4
	Date	Payee name
	12/09/2024	GoDaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$191.75	14455 North Hayden Road, Suite 219
	l	
		Scottsdale, AZ 85260
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	l	Campaign/officeholder website hosting
	l	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	12/12/2024	GoDaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$191.75	14455 North Hayden Road, Suite 219
	, -	
		Scottsdale, AZ 85260
	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 Campaign/officeholder website hosting
	l	Campaign/onicendider website nosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 21/51 Rpt: 37/67 Leach, Jeff C. (The Honorable) 00067738 4 Date Payee name 11/12/2024 **Hyatt Hill Country** 6 Amount (\$) Payee address; City; State; Zip Code \$4,381.54 9800 Hyatt Drive San Antonio, TX 78251 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder/staff event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/12/2024 **Hyatt Hill Country** Amount (\$) Payee address; City; State; Zip Code \$737.09 9800 Hyatt Drive San Antonio, TX 78251 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder/staff event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/20/2024 Imperium Fundraising Amount (\$) Payee address: City: State; Zip Code \$6.047.50 PO Box 30392 Houston, TX 77249 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Fundraising consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/51 Rpt: 38/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/05/2024	Install Connect
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	505 W State Street
		Garland, TX 75040
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign sign installation and take down
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/28/2024	Janie Lopez Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	PO Box 2073
		San Benito, TX 78586
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Campaign contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Date	Payros namo
	10/28/2024	Payee name Kroger #0568 - Allen - Fuel Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.35	1320 W McDermott Dr
		Allen, TX 75013
	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.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onpenditure to beliefft C/OI	

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/51 Rpt: 39/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/01/2024	Kroger #0568 - Allen - Fuel Center
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$51.14	1320 W McDermott Dr
		Allen, TX 75013
8	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 Campaign/officeholder fuel charge
		Campaign/oilicentider der charge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/04/2024	Kroger #0568 - Allen - Fuel Center
H	Amount (\$)	Payee address; City; State; Zip Code
	\$56.98	1320 W McDermott Dr
		Allen, TX 75013
	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 Campaign/officeholder fuel charge
		Campaign/oilicentider der charge
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/30/2024	Kroger #0568 - Allen - Fuel Center
H	Amount (\$)	Payee address; City; State; Zip Code
	\$57.50	1320 W McDermott Dr
	Ψ37.30	1020 W MODELHIOLEDI
		Allen, TX 75013
Г	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/Officeholder fuel charge
_	Operation ONE VIII II	Overfields (Office halden areas
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
L		

SCHEDULE F1

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/51 Rpt: 40/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/05/2024	Kroger #0568 - Allen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$142.07	1320 W McDermott Dr
		Allen, TX 75013
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and bev for campaign event
		Toda and sor io: sampaign oronic
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/12/2024	Kroger #0568 - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$327.63	1320 W McDermott Dr
	, ,	
		Allen, TX 75013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Refreshments for Campaign/officeholder event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	•
	Date	Davies same
	12/12/2024	Payee name Kroger #0568 - Allen
	Amount (\$) \$28.08	Payee address; City; State; Zip Code 1320 W McDermott Dr
	Ψ20.00	1320 W MeDermott Di
		Allen, TX 75013
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Refreshments for Campaign/officeholder event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientale to beliefft C/O	•

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services		ing Expe ries/Wa(Contract Labor		OTHER (enter	a category not list	ed above)
	Credit Card Payment			The Instruction Gu	ide explains how t	o com	ple	te this form.				
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Com	mission Filers)
	Sch: 25/51 Rpt: 41/67		Leach, Jeff (C. (The Honoral	ole)					00067738		
4	Date	5	Payee name									
	12/30/2024		Kroger #056	8 - Allen								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Code	е					
	\$29.95		1320 W McI	Dermott Dr								
			Allen, TX 75	013								
8	PURPOSE	(a)	Category (so	e Categories listed at th	as top of this sphedule)	0	b)	Description				
	OF	'		nead/Rental Exp		`	,		outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITURE			,				—		officeholder livi		
								Campaign/Of	ffice	eholder offi	ce supplies	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office	sough	ht			Office I	neld	
	experialitate to beliefit C/Oi											
	Date		Payee name									
	11/08/2024		Love Field F	arking								
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code	е					
	\$65.00		8008 Herb k	Celleher Way								
			Dallas, TX 7	5235								
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(I	b)	Description				
	OF EXPENDITURE		Travel Out of		,			Check if travel of	outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITORE							ш		officeholder livi		
								Campaign/off	rice	nolder airp	ort parking	
	0 1: 0.11.7.7.1.	L_			0.00	Щ.				0.00		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	cenoider name	Office	sougr	nt			Office I	neia	
		_										
	Date		Payee name									
	11/14/2024		Love Field F	arking								
	Amount (\$)		Payee addres	•	State; Zip	Code	е					
	\$56.25		8008 Herb k	Celleher Way								
			Dallas, TX 7	5235								
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(I	b)	Description				
	OF EXPENDITURE		Travel Out of	of District				Check if travel of Check if Austin,			mplete Schedule T	
								Campaign/off				
								-ampaign/on		o.aor airp	on paining	
-	Complete ONLY if direct	Щ	Candidate/Offic	ceholder name	Office	SOriul	ht			Office I	neld	
	expenditure to benefit C/OI		aaa/ Oill		Onice	Jougi				0.11001		
1												

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/51 Rpt: 42/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/03/2024	Love Field Parking
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$45.00	8008 Herb Kelleher Way
		Dallas, TX 75235
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder airport parking
		Campaign/onlocal amport panning
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/16/2024	Love Field Parking
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$310.00	8008 Herb Kelleher Way
		Dallas, TX 75235
	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.
		Check if Austin, TX, officeholder living expense Campaign/officeholder airport parking
		Campaginomeender airport parking
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	12/19/2024	Love Field Parking
H	Amount (\$)	Payee address; City; State; Zip Code
	\$45.00	8008 Herb Kelleher Way
	, , , , ,	
		Dallas, TX 75235
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder airport parking
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
\vdash		

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 Credit Card Payment		tee Le	egal Services	·		ages	/Contract Labor		OTHER (enter	a category not	listed above)
				he Instruction Gu	ide explains h	ow to cor	mple	te this form.				
1	Total pages Schedule F1:	2 FIL	LER NAME						3	Filer ID	(Ethics C	ommission Filers)
	Sch: 27/51 Rpt: 43/67	Le	ach, Jeff C	. (The Honoral	ole)					00067738	3	
4	Date	5 Pa	yee name									
	11/12/2024	Lo	ve Field Pa	ırking								
6	Amount (\$)	7 Pa	yee address	; City;	State;	Zip Co	de					
	\$48.00	80	08 Herb Ke	elleher Way								
		l _{Da}	allas, TX 75	235								
8	PURPOSE			Categories listed at th		-11-2	(b)	Description				
	OF		avel Out of		ie top of this sched	uule)	()	Check if travel	outsi	de of Texas. Co	mplete Schedu	ıle T.
	EXPENDITURE	'''	aver out or	District				Check if Austin,				
								Campaign/Of	fice	eholder air	oort parkin	ng
9	Complete ONLY if direct		didate/Office	holder name	Of	ffice sou	ght			Office	held	
	expenditure to benefit C/O	Н										
	Date	Pa	yee name									
	10/31/2024	Lo	we's #0119	99 - Allen								
	Amount (\$)	Pa	yee address	; City;	State;	Zip Co	de					
	\$68.13	10	10 W McD	ermott Dr.								
		l _{All}	len, TX 750	13								
	PURPOSE			Categories listed at th			(h)	Description				
	OF	ı	olling Exper		ie top of this sched	dule)	(~)	Check if travel	outsio	de of Texas. Co	mplete Schedu	ıle T.
	EXPENDITURE	' "	ming Exper	130				Check if Austin,	, TX,	officeholder liv	ng expense	
								Supplies for p	olli	ing locatio	ns	
	Complete ONLY if direct		didate/Office	holder name	Of	ffice sou	ght			Office	held	
	expenditure to benefit C/OI	Н										
	Date	Pa	yee name									
	11/21/2024	Lo	we's #0119	9 - Allen								
	Amount (\$)	Pa	yee address	; City;	State;	Zip Co	de					
	\$134.17	10	10 W McD	ermott Dr.								
		All	len, TX 750	13								
	PURPOSE			Categories listed at th	no ton of this sabas	dulo)	(b)	Description				
	OF			ead/Rental Exp		uuie)	(- ,	Check if travel	outsi	de of Texas. Co	mplete Schedu	ıle T.
	EXPENDITURE			odan Contai Exp	701100			Check if Austin,	, TX,	officeholder liv	ng expense	
								Campaign/off	fice	holder Off	ce supplie	es
	Complete ONLY if direct		didate/Office	holder name	Of	ffice sou	ght			Office	held	
	expenditure to benefit C/OI	H										
l												

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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 Commis	ssion Filers)
	Sch: 28/51 Rpt: 44/67	Leach, Jeff C. (The Honorable) 00067738	
4	Date	5 Payee name	
	11/25/2024	Lowe's #01199 - Allen	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$324.10	1010 W McDermott Dr.	
		Allon TV 75012	
Ļ	DUDDOCE	Allen, TX 75013	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies and decor for Campaign/officeho	older event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
L	·		
	Date	Payee name	
L	11/12/2024	MailChimp	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$106.60	675 Ponce de Leon Ave NE Suite 5000	
		All 0 A 00000	
		Atlanta, GA 30308	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign/officeholder email service	
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	12/11/2024	MailChimp	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$106.60	675 Ponce de Leon Ave NE Suite 5000	
		Adams - CA 20200	
		Atlanta, GA 30308	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign/officeholder email service	
L			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experiorale to beliefft C/OI	ווכ	

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/51 Rpt: 45/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/13/2024	Manda's Lil Cookies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$485.00	88 Stone Hinge Drive
		Fairview, TX 75069
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
		Cookies for Campaign/officeholder event
		g
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	11/25/2024	McAdoo's Seafood
	Amount (\$) \$243.22	Payee address; City; State; Zip Code 196 N Castell
	φ243.22	190 N Castell
		New Braunfels, TX 78130
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Meeting to discuss Campaign/officeholder duties
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
	Date	Payee name
	12/09/2024	Moonshine Patio
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.80	303 Red River Street
		Austin, TX 78701
	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 duties
		Meeting to discuss earnpaign/omeenolder duties
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/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: 30/51 Rpt: 46/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/31/2024	Moonshine Patio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$540.00	303 Red River Street
		Austin, TX 78701
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
		Deposit for Campaign/Officeholder event
		Doposit for Gampaign/Ciniconcides event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	10/29/2024	Morgan Meyer for Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$774.98	3838 Oak Law
		#400
		Dallas, TX 75219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign fundraising event with legislators
	Complete CNII V if direct	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
H	D-4-	
	Date 11/25/2024	Payee name
		Myron's Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$566.50	136 N Castell
		New Braunfels, TX 78130
	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 duties
		sa.i.g to allocate Gampaign of motification
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 comp	plete	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 31/51 Rpt: 47/67	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		
	12/26/2024	Nebraska Furniture Mart		
6	Amount (\$)	7 Payee address; City; State; Zip Code	Э	
	\$2,120.35	5600 Nebraska Furniture Mart Drive		
		The Colony, TX 75056		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) [Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Ļ	Check if Austin, TX, officeholder living expense
			Г	Furniture and technology for Capitol office
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
9	expenditure to benefit C/Ol	•	ıı	Office field
H	Date	Davido namo		
	10/31/2024	Payee name Nordstrom Austin		
_	Amount (\$)			
	\$674.27	Payee address; City; State; Zip Code 2901 S Capital of Texas Hwy	=	
	Φ014.21	2901 3 Capital Of Texas Hwy		
		Austin TV 7074C		
		Austin, TX 78746		
	PURPOSE OF	5 , (con timegener moter at the top of time continue)) []	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense	ŀ	Check if Austin, TX, officeholder living expense
			(Gift for staff
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/Ol	1		
	Date	Payee name		
	12/05/2024	Public Storage		
	Amount (\$)	Payee address; City; State; Zip Code	Э	
	\$3,542.40	1251 W Exchange		
		Allen, TX 75013		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) [Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		L	Check if Austin, TX, officeholder living expense
			(Campaign/officeholder storage fees
L	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/O		ıı	Office riciu
H				
l				

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 (order a category pet 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: 32/51 Rpt: 48/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/13/2024	Purple Sage Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	3002 Bryker Drive
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign/Officeholder social media consulting
		Campaign/Onlocholder Social media consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/12/2024	Purple Sage Strategies
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	3002 Bryker Drive
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign/officeholder social media consulting
		Campaign/onicentide social media consulting
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/08/2024	Qi Austin
H	Amount (\$)	Payee address; City; State; Zip Code
	\$312.24	835 W 6th St
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Food/Beverage Expense
l	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss Campaign/officeholder duties
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

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

Event Expense Loan Repaymentv Fees Office Overhead/r Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Leaal Services Salaries/Wages/C

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

	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: 33/51 Rpt: 49/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/09/2024	Qi Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$205.89	835 W 6th St
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder dinner with staff
		Campagn/oniceriolder difficil with staff
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/08/2024	Racetrac - Allen
H	Amount (\$)	Payee address; City; State; Zip Code
	\$37.42	840 W Exchange Pkwy
		Allen, TX 75013
	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 Campaign/officeholder fuel charge
		Campaign/onicenduct det charge
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	11/19/2024	Racetrac - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.76	840 W Exchange Pkwy
		Allen, TX 75013
Г	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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 34/51 Rpt: 50/67	Leach, Jeff C. (The Honorable)
4	Date	5 Payee name
	11/25/2024	Racetrac - Allen
6	Amount (\$) \$68.68	7 Payee address; City; State; Zip Code 840 W Exchange Pkwy Allen, TX 75013
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/26/2024	Racetrac - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.09	840 W Exchange Pkwy
		Allen, TX 75013
	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
		Campaign/Officeholder fuel charge
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/21/2024	Sahualla, Ellic
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,500.00	1100 Congress Ave
		Austin, TX 78701
_	PURPOSE	
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder staff wages
L		
	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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/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 co	-	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 35/51 Rpt: 51/67	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		•
	10/29/2024	Shell Gasoline - Allen		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$54.88	301 S Federal		
		Allen, TX 75013		
8	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.
	LAFLINDITORL			Check if Austin, TX, officeholder living expense
				Campaign/officeholder fuel charge
_				200
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date	Payee name		
	11/12/2024	Shell Gasoline - Allen		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$52.81	301 S Federal		
		Allen, TX 75013		
	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
				Campaign/officeholder fuel charge
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		yııı	Office field
	Data			
	Date	Payee name		
	11/19/2024	Shell Gasoline - Allen		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$56.16	301 S Federal		
		Allen, TX 75013		
	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
				Campaign/officeholder fuel charge
				Campaign of the following the
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI	•	Ailt	Since 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 nagge Schodule F1:	1
_	Total pages Schedule F1: Sch: 36/51 Rpt: 52/67	Leach, Jeff C. (The Honorable)
_		
4	Date	5 Payee name
L	11/27/2024	Shell Gasoline - Allen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$62.65	301 S Federal
		Allen, TX 75013
	DUDDOCE	1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
0	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	12/02/2024	Shell Gasoline - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.58	301 S Federal
		Allen, TX 75013
		1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel subside of Taylor Camplete Schedule T
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
		Campaign/omocroticol last shargs
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	• · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
L	12/03/2024	Shell Gasoline - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.79	301 S Federal
		Allen, TX 75013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/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: 37/51 Rpt: 53/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/04/2024	Shell Gasoline - Allen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$58.42	301 S Federal
		Allen, TX 75013
8	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.
		Campaign/officeholder living expense Campaign/officeholder fuel charge
		Sampaign/officerrolder later charge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Dougo nama
	12/09/2024	Payee name Shell Gasoline - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.09	301 S Federal
		Allen, TX 75013
	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.
		Campaign/officeholder living expense Campaign/officeholder fuel charge
		Campaign/onicenduel luel charge
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 12/23/2024	Payee name Shell Gasoline - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.62	301 S Federal
		Allen, TX 75013
	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 Campaign/Officeholder fuel charge
		Campaign/Onicendider der charge
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbu

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

Fees Office Over Food/Beverage Expense Polling Exp Frinting Exp Equal Services Salaries/W

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

	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: 38/51 Rpt: 54/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/25/2024	Shell Gasoline - Jarrell
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23.78	11710 N I 35
		Jarrell, TX 76537
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	expenditure to benefit G/O	'
	Date	Payee name
	11/07/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$285.98	2702 Love Field Dr
		Dallas, TX 75235
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder airfare
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Payee name
	11/07/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$285.98	2702 Love Field Dr
		Dallas, TX 75235
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder airfare
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	-

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		inting Exp alaries/Wa		e /Contract Labor		OTHER (enter	a category not listed a	above)
	ordan dara r dyment			The Instruction Gu	iide explains how	v to con	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 39/51 Rpt: 55/67		Leach, Jeff	C. (The Honoral	ole)					00067738		
4	Date	5	Payee name									
	11/12/2024		Southwest A	Airlines								
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Cod	le					
	\$16.00		2702 Love F	ield Dr								
			Dallas, TX 7	5235								
_	PURPOSE	(0)				- 1,	/b\	5 12				
8	OF	(a)	,	e Categories listed at th	ne top of this schedule	e) ((D)	Description Check if travel	nutei	de of Teyes Co	nplete Schedule T.	
	EXPENDITURE		Fees					=		officeholder livir		
								Campaign/off	fice	holder airli	ne fees	
9	Complete ONLY if direct		 Candidate/Offic	ceholder name	Offic	e soug	ht			Office h	neld	
	expenditure to benefit C/OI	Н										
	Date	Π	Payee name									
	12/16/2024		Southwest A	Airlines								
_	Amount (\$)	┝	Payee addres		State; Z	in Cod	lo.					
	\$622.36		2702 Love F		State, 2	.ip C00	ic					
	Ψ022.30		Z/UZ LUVE F	Telu Di								
			5 II = 5\(-5 \)									
			Dallas, TX 7	5235								
	PURPOSE OF	(a)		e Categories listed at th	ne top of this schedule	e) ((b)	Description				
	EXPENDITURE		Travel Out o	of District				-		de of Texas. Cor officeholder livir	nplete Schedule T.	
								Campaign/off				
								Campang.			oa. go	
	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	Offic	e soug	ıht			Office h	neld	
	expenditure to benefit C/O						,					
-	Date	Т	Davisa nama									
	12/23/2024		Payee name Southwest A	Virlings								
					04-4 7	· O	1-					
	Amount (\$)		Payee addres		State; Z	.ip Coo	ie					
	\$313.98		2702 Love F	-ieia Di								
			Dallas, TX 7	5235								
	PURPOSE OF	(a)		e Categories listed at th	ne top of this schedule	e) ((b)	Description				
	EXPENDITURE		Travel Out o	of District				ш		de of Texas. Coi officeholder livir	mplete Schedule T.	
								Campaign/off				
								pa.g., on		2.30. 4.111		
\vdash	Complete ONLY if direct	L	Candidate/Offic	ceholder name	Offic	e soug	ıht			Office h	neld	
	expenditure to benefit C/O		Janarado O III	John Hame	Onic	.5 55ug	,			311100 1		
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1												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 40/51 Rpt: 56/67 00067738 Leach, Jeff C. (The Honorable) 4 Date Payee name Starbucks #06321 - Allen 11/04/2024 6 Amount (\$) Payee address; City; State; Zip Code \$25.00 904 W McDermott Allen, TX 75013 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Breakfast for campaign poll volunteers Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/07/2024 Starbucks #06321 - Allen Amount (\$) Payee address; City; State; Zip Code \$19.65 904 W McDermott Allen, TX 75013 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss Campaign/officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/12/2024 Starbucks #06321 - Allen Amount (\$) Payee address: City: State; Zip Code \$25.00 904 W McDermott Allen, TX 75013 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss Campaign/officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 41/51 Rpt: 57/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/26/2024	Starbucks #06321 - Allen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.52	904 W McDermott
		Allen, TX 75013
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss Campaign/officeholder duties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/16/2024	Starbucks #06321 - Allen
	Amount (\$) \$18.35	Payee address; City; State; Zip Code 904 W McDermott
	Φ10.55	904 W McDeffilott
		Allen, TX 75013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LAI LIIDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss Campaign/officeholder duties
_	C. L. Chilly if divers	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/23/2024	Starbucks #06321 - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.83	904 W McDermott
		Allen, TX 75013
	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 duties
		wiceting to discuss Campaign/Oniceholder duties
_	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 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: 42/51 Rpt: 58/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/05/2024	State Farm
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,750.00	3661 N Plano Rd
		Richardson, TX 75082
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/Officeholder insurance premiums - legal
		Campagn Onlocholder mountaine premiums regul
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	12/05/2024	TD Auto
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,649.26	PO Box 100295
		Columbiz, SC 29202
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense Lack if Austin, TX, officeholder living expense Campaign/officeholder vehicle maintenance -
		apportioned
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/29/2024	Targeted Victory
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.20	2311 Wilson Blvd
		Suite 200
		Arlington, VA 22201
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign website maintenance
\vdash	Complete ONE V if dies -t	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		

SCHEDULE F1

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

Event Expense Loan repayment.
Fees Office Overhead/f
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Magns/C

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 43/51 Rpt: 59/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	11/25/2024	The Hideaway
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29.00	262 Jahn St
		New Braunfels, TX 78130
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss Campaign/officeholder duties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-t
_	Date	Payee name
	12/02/2024	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$146.00	2901 W PARKER RD
		Plano, TX 75023
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Campaign/officeholder postage fees
		Campaign/oniocholaen postage lees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/07/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.86	1455 Market St #400
		San Francisco, CA 94103
	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.
		Check if Austin, TX, officeholder living expense Campaign/officeholder ground transportation
		Campaign/oniceriolder ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
l		

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		
_	Total pages Cab - dul - E4		.)
1	Total pages Schedule F1:)
	Sch: 44/51 Rpt: 60/67	Leach, Jeff C. (The Honorable) 00067738	
4	Date	5 Payee name	
	11/07/2024	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$55.93	1455 Market St #400	
		San Francisco, CA 94103	
<u>_</u>	DUDDOS-		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign/officeholder ground transportation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
"	expenditure to benefit C/O		
L			
	Date	Payee name	
L	11/12/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$49.18	1455 Market St #400	
		San Francisco, CA 94103	
	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.	
	-	Campaign/officeholder ground transportation	
		Campaign/officeholder ground transportation	
<u> </u>	Operation ONE VIII II	Out listes (Office helder name	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	,		
	Date	Payee name	
	11/13/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$51.99	1455 Market St #400	
		San Francisco, CA 94103	
	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.	
		Compaign/officeholder living expense	
		Campaign/officeholder ground transportation	
	0 1. 5		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Superiorde to belieff 6/01	··	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 45/51 Rpt: 61/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/02/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.57	1455 Market St #400
		San Francisco, CA 94103
8	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.
		Campaign/officeholder living expense Campaign/officeholder ground transportation
		Campaign/oincertoider ground transportation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	12/03/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.70	1455 Market St #400
	φ50.70	1433 Warket St #400
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	12/06/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.48	1455 Market St #400
	φ31.40	1433 Warket St #400
		San Francisco CA 04102
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder ground transportation
	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/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: 46/51 Rpt: 62/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/09/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.37	1455 Market St #400
		San Francisco, CA 94103
8	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.
		Check if Austin, TX, officeholder living expense Campaign/officeholder ground transportation
		Campaign/onlocholder ground transportation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/13/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.00	1455 Market St #400
		San Francisco, CA 94103
	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.
		Check if Austin, TX, officeholder living expense Campaign/officeholder ground transportation
		Campagn/onicentide ground transportation
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/13/2024	Uber
H	Amount (\$)	Payee address; City; State; Zip Code
	\$67.66	1455 Market St #400
	Ψ07.00	1433 Warket St #400
		San Francisco, CA 94103
Г	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder ground transportation
\vdash	Complete ONII V if allow	Condidate Office helder name Office appets
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
\vdash		
1		

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 Cabadula F1:		rc)
1	Total pages Schedule F1:		13)
	Sch: 47/51 Rpt: 63/67	Leach, Jeff C. (The Honorable) 00067738	
4	Date	5 Payee name	
	12/13/2024	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$34.62	1455 Market St #400	
		San Francisco, CA 94103	
Ļ			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign/officeholder ground transportation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/O		
L	·		
	Date	Payee name	
	12/16/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$75.63	1455 Market St #400	
		San Francisco, CA 94103	
	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.	
		Check if Austin, TX, officeholder living expense	
		Campaign/officeholder ground transportation	
_			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
L			
	Date	Payee name	
	12/18/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.61	1455 Market St #400	
		San Francisco, CA 94103	
	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.	
	Za Enditone	Check if Austin, TX, officeholder living expense	
		Campaign/officeholder ground transportation	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	expenditure to belieff C/Of	· · · · · · · · · · · · · · · · · · ·	

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

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

	Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 48/51 Rpt: 64/67	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	12/18/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$80.82	1455 Market St #400
		San Francisco, CA 94103
8	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.
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder ground transportation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.92	1455 Market St #400
	Ф04.92	1433 Market St #400
		San Francisco, CA 94103
	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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/20/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.41	1455 Market St #400
	Ψ100.41	1400 Market of #400
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Travel Out of District Travel Out of District
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment		nittee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commission F	ilers)		
	Sch: 49/51 Rpt: 65/67	1	C. (The Honorable)					00067738	`	,		
4	Date	5 Payee name	:									
	12/20/2024	Uber										
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	de							
l	\$20.08	1455 Mark	et St #400									
l												
		San Franci	sco, CA 94103									
8	PURPOSE	(a) Category (S	See Categories listed at the top of t	his schedule)	(b)	Description						
l	OF EXPENDITURE	Travel Out	of District			=		ide of Texas. Com				
l						_		, officeholder living	nd transportation			
l						Campaignion	1100	inolaci groui	na transportation			
9	Complete ONLY if direct	Candidate/Of	iceholder name	Office sou	ght			Office he	eld			
	expenditure to benefit C/OI	H										
	Date	Payee name										
l	12/20/2024	Uber										
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de							
l	\$82.43	1455 Mark	et St #400									
l												
		San Franci	sco, CA 94103									
l	PURPOSE OF		See Categories listed at the top of t	his schedule)	(b)	Description						
l	EXPENDITURE	Travel Out	of District			=		ide of Texas. Com , officeholder living				
l						_			nd transportation			
						Campaignion	1100	inolaci groui	na transportation			
	Complete ONLY if direct	Candidate/Of	iceholder name	Office sou	ght			Office he	eld			
	expenditure to benefit C/OI	Н										
F	Date	Payee name	·									
	12/23/2024	Uber										
Г	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode							
l	\$97.92	1455 Mark	et St #400									
l												
		San Franci	sco, CA 94103									
	PURPOSE	(a) Category (S	See Categories listed at the top of t	his schedule)	(b)	Description						
l	OF EXPENDITURE	Travel Out	of District					ide of Texas. Com	•			
l						_		, officeholder living				
						Campaign/Oi	IIC	enolaer grou	nd transportation			
\vdash	Complete ONLY if direct	Candidata/Of	iceholder name	Office sou	ah+			Office he	ald			
	Complete ONLY if direct expenditure to benefit C/OI		ICENUIUEI HAIHE	Onice Sot	yııl			Onice ne	au .			
\vdash												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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 comp	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 50/51 Rpt: 66/67	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		·
	12/23/2024	Uber		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$168.56	1455 Market St #400		
		San Francisco, CA 94103		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Travel Out of District	į	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE			Compaign Officeholder living expense
				Campaign/Officeholder ground transportation
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	at.	Office held
9	expenditure to benefit C/OI		IL	Office field
_	Data			
	Date	Payee name Walmart - Allen		
	12/11/2024			
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$219.42	730 W Exchange Pkwy		
		Allen, TX 75013		
	PURPOSE OF	, ,	b)	Description
	EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Food/beverages for Campaign/officeholder event
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	12/27/2024	Young, Lauren		
	Amount (\$)	Payee address; City; State; Zip Code	e	
	\$2,500.00	7800 Northcrest Blvd.		
		Austin, TX 78752		
	PURPOSE		b)	Description
	OF	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		j	Check if Austin, TX, officeholder living expense
				Campaign/Officeholder staff wages
	Operation Chilly III	Condidate (Office lead)	-,	000
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	nmittee	Gift/Awa Legal S	everage Exp ards/Memori ervices I struction	als Expense			Expens Wages	e /Contract L			Travel in District Travel Out of Dis OTHER (enter a	trict category not listed abo	ve)
1	Total pages Schedule F1:	2	FILER NAM	Ξ								3	Filer ID	(Ethics Commission	n Filers)
	Sch: 51/51 Rpt: 67/67		Leach, Jeff	C. (Tł	ne Hono	rable)							00067738		
4	Date	5	Payee name												
	12/27/2024		Zgabay, Ca	assidy											
6	Amount (\$)	7	Payee addre	ss;	City;		State;	Zip C	ode						
	\$2,500.00		712 W Mor	iroe											
	. ,														
			Austin, TX	78704											
8	PURPOSE	(a)	Category (S	ee Categ	ories listed	at the top of	this sche	dule)	(b)	Descrip	tion				
	OF EXPENDITURE		Salaries/W							_				plete Schedule T.	
	LAI LINDITORE									_			officeholder living		
										Campa	aign/Off	tice	holder staff	wages	
_	Complete ONE V if allows:	L	Condidate /C"	- dool	lor roa			ffica -:					Off: I	ald.	
9	Complete ONLY if direct expenditure to benefit C/OI	Η (Candidate/Off	icenoio	ier name		U	ffice so	ugnı				Office he	eia	