CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this	s form. 1 Filer ID (Ethics Commiss 00088008	sion Filers)	2 Total pages filed: 22
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRS	Т	MI	OFFICE USE ONLY
NAME	Mr. Arthu	ur D.		Date Received ELECTRONICALLY FILED
	NICKNAME LAST	-	SUFFIX	01/09/2025
	Trey Wha	rton		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUIT	E#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 1242			Receipt # Amount
Change of Address	Huntsville, TX 77342			
	Trunsvine, 17, 17542			Date Processed
				Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRST	Γ	MI	=
TREASURER NAME	Mr. Clinto	on T.		
	NICKNAME LAST		SUFFIX	
	McLa		33.1	
6 CAMPAIGN	STREET ADDRESS (NO DO BOY I	DI EACE). ADT	/ SUITE #: CITY:	STATE; ZIP CODE
TREASURER ADDRESS	STREET ADDRESS (NO PO BOX F 1 Grapevine Cir	PLEASE), APT	/ SUITE #; CITY;	STATE; ZIP CODE
(Residence or Business)	Huntsville, TX 77320			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM (936) 661-3711	MBER EXTENSION		
8 REPORT TYPE		· —	Runoff Exceeded modified	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
			reporting limit	Tima Report (Madeir Grenning)
9 PERIOD	Month Day Year		Month Day	Year
COVERED	10/27/2024	THROUGH	12/31/2024	1
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
	11/05/2024	X General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
TI OTTICE	OTTICE FIEED (II dily)			ative Place Huntsville District 12
	1			
		GO TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 22

13 C / OH NAME	Wharton, Arthur D. (N	1r.)	14 Filer ID (00088008	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political of These expenditures may have been made officeholders are required to report this in	without the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Alliance for Life PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Drive		
		Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER	NAME	
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER	ADDRESS	
		4505 Corazon Cv		
		Round Rock, TX 78681		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHES OF LOANS, OR CONTRIBUTIONS MA		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES O	F LOANS)	\$ 31,804.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 16,298.99
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS C RIOD	OF THE LAST DAY OF THE	\$ 93,769.41
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LC TING PERIOD	DANS AS OF THE LAST DAY	\$ 40,000.00
17 AFFIDAVIT	•			
		l swear, or affirm, under true and correct and in under Title 15, Election	er penalty of perjury, that the acc ncludes all information required to n Code.	ompanying report is to be reported by me
			Mr. Arthur D. Wharton	
		Sig	nature of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
		aid		day
of	, 20, to ce	rtify which, witness my hand and seal of o	office.	
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oath
Signature of One	sor aurimistering	i milea name of officer authinistering	j ille oi officer	danimistering odu

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	JVEI	3 of 22
	ER NAM	ME Arthur D. (Mr.)	19 Filer ID 00088008	(Ethic	s Commission Filers)
		E SUBTOTALS	00000000	1	
		SCHEDULE		,	SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	31,554.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	250.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	16,298.99
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/22	
2	FILER NAME Wharton, Art	thur D. (Mr.)		3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 12/04/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Huntsville, TX 77320 pation / Job title (See Instructions)	9 Employer (See Instructions			
	T Tillelpai occu	pation 7 300 title (See Instructions)	Employer (See Manacions	,		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ ASSOCIATED GENERAL CONTRACTORS OF Contributor address; City; State; Zip Code AUSTIN, TX 78768			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Dusek, Mike Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Houston, TX 77024				
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions) Froghopper)		
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID#:_ Dusek, Mike Contributor address; City; State; Zip Code Houston, TX 77024)		Amount of Contribution (\$)	\$25.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Froghopper)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:_ENPAC TEXAS Contributor address; City; State; Zip Code AUSTIN, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/22
2	FILER NAME Wharton, Art			3 Filer ID (Ethics Commission Filers) 00088008
4	Date 11/02/2024	5 Full name of contributor out-of-state PAC (ID#:_ FREEMAN, ERNEST 6 Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$) \$500.00
8	Principal occu	HOUSTON, TX 77056 upation / Job title (See Instructions)	Employer (See Instructions)
_	ATTORNEY		THE FREEMAN LAW FI	
	Date 11/04/2024	Full name of contributor		Amount of Contribution (\$) \$1,000.00
	Principal occu	ANNA, TX 75409 spation / Job title (See Instructions)	Employer (See Instructions)
	CONSULTA		GALLAGHER CONSTR	
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: GM PAC Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$1,000.00
		WASHINGTON , DC 20001		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ HELMCAMP SCHIEFFER, TRACY Contributor address; City; State; Zip Code KURTEN, TX 77862)	Amount of Contribution (\$) \$1,000.00
	Principal occu LOBBYIST	ipation / Job title (See Instructions)	Employer (See Instructions SELF	
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_HOLFORD, WILLIAM Contributor address; City; State; Zip Code BASTROP, TX 78602)	Amount of Contribution (\$) \$50.00
	Principal occu MANAGER	pation / Job title (See Instructions)	Employer (See Instructions BLUEBONNET ELECTF	

	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: 3/9 Rpt: 6/22	
2	FILER NAME Wharton, Ar			3	Filer ID (Ethics Commission 00088008	n Filers)
4	Date 12/02/2024	5 Full name of contributor out-of-state PAC (ID#:_ HOLLAND AND KNIGHT TEXAS PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	DALLAS, TX 75201 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ HOMEPAC OF TEXAS Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/29/2024	Full name of contributor out-of-state PAC (ID#:_HOUSTON POLICE RETIRED OFFICERS ASS Contributor address; City; State; Zip Code	OC PAC		Amount of Contribution (\$)	\$500.00
		HOUSTON, TX 77219				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ HUSCH BLACKWELL STRATEGIES Contributor address; City; State; Zip Code JEFFERSON CITY, MO 65101)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ K&L GATES LLP 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 CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/22	
2	FILER NAME Wharton, Ar			3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ LINEBARGER GOGGAN BLAIR & SAMPSON I 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78760				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ LONGBOW CONSULTING PARTNERS LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	AUSTIN, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_MANN, FRANCESCA Contributor address; City; State; Zip Code BORISVIEW, TX 58495			Amount of Contribution (\$)	\$1.00
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions RETIRED)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_NAIFA TEXAS IFAPAC Contributor address; City; State; Zip Code AUSTIN, TX 78746			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ ONCOR TEXAS STATE PAC Contributor address; City; State; Zip Code DALLAS, TX 75202			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/22	
2	FILER NAME Wharton, Art	thur D. (Mr.)		3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
_	Daine in all accord	AUSTIN, TX 78757				
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#:_RASTI, KELLY Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu	SAN ANTONIO, TX 78256 pation / Job title (See Instructions)	Employer (See Instructions) TX ASSOC. OF SB)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ RURAL FRIENDS OF ELECTRIC COOP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/24/2024	Full name of contributor out-of-state PAC (ID#:_ SMITHAM, BRICE Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ TALHI LIFE INSURANCE PAC Contributor address; City; State; Zip Code AUSTIN, TX 78767			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/22	
2	FILER NAME Wharton, Ar	thur D. (Mr.)		3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ TEXANS FOR REASONABLE SOLUTIONS PAGE 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_	<u> </u>	AUSTIN, TX 78741				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#: TEXAS AGGREGATE & CONCRETE ASSOC. 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)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS ASSOC. OF MUTUAL INS. CO-PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		YOAKUM, TX 77995				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS DAIRYMEN PAC Contributor address; City; State; Zip Code AUSTIN, TX 78711)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	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)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/22	
2	FILER NAME Wharton, Ar	thur D. (Mr.)		3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 12/12/2024	5 Full name of contributor out-of-state PAC (ID#:_ TEXAS STATE FARM AGENTS PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Deignaignal annu	LAKEWAY, TX 78734	D. Faralayar (God Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS SURPLUS LINES ASSOCIATION PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	AUSTIN, TX 78766 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS TRIAL LAWYERS ASSOC. PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ THE TEXAS STATE UNIVERSITY SYSTEM PA Contributor address; City; State; Zip Code AUSTIN, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ TITUS, JEAN ANN Contributor address; City; State; Zip Code DALLAS, TX 75231			Amount of Contribution (\$)	\$500.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/22	
2	FILER NAME Wharton, Art	hur D. (Mr.)		3	Filer ID (Ethics Commission 00088008	on Filers)
4	Date 12/03/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Dein sin al a sau	AUSTIN, TX 78759	O Frankrije (Con kratinski specialist			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/17/2024	Full name of contributor out-of-state PAC (ID#:_ TREMBLAY, RYLEY Contributor address; City; State; Zip Code ABBOTTMOUTH, AK 07302			Amount of Contribution (\$)	\$1.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ TXANA PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Dringing oggu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation 7 300 title (See Instructions)	Employer (See Instructions	<i>)</i>		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_VALERO PAC Contributor address; City; State; Zip Code SAN ANTONIO, TX 78269)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_VISTRA EMPLOYEE PAC Contributor address; City; State; Zip Code IRVING, TX 75039)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/22
2	FILER NAME Wharton, Art			3 Filer ID (Ethics Commission Filers) 00088008
4	Date 10/27/2024	 Full name of contributor		7 Amount of Contribution (\$) \$1.00
		WEST LEONOR, SD 95440		
8	Principal occu RETIRED	upation / Job title (See Instructions)	9 Employer (See Instruction RETIRED	ns)
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#: WINE AND SPIRITS WHOLESALERS OF TEX Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,000.00
	Principal occu	AUSTIN, TX 78701 upation / Job title (See Instructions)	Employer (See Instruction	ns)

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: 13/22 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Wharton, Arthur D. (Mr.) 80088000 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/28/2024 **Texas Realtors PAC** \$250.00 Advertising 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

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1: Sch: 1/9 Rpt: 14/22	2 FILER NAME Wharton, Arthur D. (Mr.)	3 Filer ID (Ethics Commission Filers) 00088008
4	Date 11/02/2024	5 Payee name Anedot	
	Amount (\$) \$20.30	7 Payee address; City; State; Zip Code 1920 MCKINNEY AVE 7TH FLOOR DALLAS, TX 75201	
8	PURPOSE OF EXPENDITURE	Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROCESSING FEE
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 12/13/2024	Payee name Anedot	
	Amount (\$) \$8.30	Payee address; City; State; Zip Code 1920 MCKINNEY AVE 7TH FLOOR DALLAS, TX 75201	
	PURPOSE OF EXPENDITURE	Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROCESSING FEE
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 10/27/2024	Payee name Anedot	
	Amount (\$) \$0.34	Payee address; City; State; Zip Code 1920 MCKINNEY AVE 7TH FLOOR DALLAS, TX 75201	
	PURPOSE OF EXPENDITURE	Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROCESSING FEE
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbur

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction G			Vages	/Contract Labor		OTHER (enter a	a category not listed	above)
┝	T-t-1 O-bd-1- F1:	1_	EII ED NAME						_	Ell- ID	(Ethias Cameri	i Fil)
	Total pages Schedule F1: Sch: 2/9 Rpt: 15/22	2		= rthur D. (Mr.)					3	Filer ID 00088008	(Ethics Commi	ssion Filers)
4	Date	5	Payee name						_			
	11/24/2024		Anedot									
6	Amount (\$)	7	Payee addre	ss; City;	State:	Zip Co	de					
	\$0.34		1920 MCKI		,							
l	, , , ,		7TH FLOO									
l												
L		L	DALLAS, T	X 75201		-						
8	PURPOSE OF	(a)		ee Categories listed at	the top of this sche	edule)	(b)	Description				
l	EXPENDITURE		Accounting	/Banking						de of Texas. Cor officeholder livin	nplete Schedule T.	
l								PROCESSIN			g expense	
l								TROCESSIN				
Ļ	Operation ONE Wife disease	L_	0			Y (:				O#: I-	-1-1	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ceholder name	C	Office sou	gnt			Office h	eia	
H	Date	Π	Payee name									
l	11/17/2024		Anedot									
⊢	Amount (\$)	┝	Payee addre	ss; City;	Stato:	Zip Co	,do					
l	\$0.34		1920 MCKI		State,	Zip Co	ue					
l	Φ0.34											
l			7TH FLOO									
			DALLAS, T	X 75201								
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sche	edule)	(b)	Description				
l	OF EXPENDITURE		Accounting	/Banking				=			nplete Schedule T.	
l								ш		officeholder livin	g expense	
l								PROCESSIN	IG I			
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Off	ceholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
Г	Date		Payee name									
l	11/13/2024		Anedot									
H	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de					
l	\$0.34		1920 MCKI	NNEY AVE		•						
l			7TH FLOO	R								
			DALLAS, T									
L		<u> </u>										
l	PURPOSE OF	(a)		ee Categories listed at	the top of this sche	edule)	(b)	Description	o. ito	do of Toyon Con	anleta Cabadula T	
l	EXPENDITURE		Accounting	/Banking				<u></u>		officeholder livin	nplete Schedule T.	
l								PROCESSIN			g expense	
\vdash	Complete ONLY if direct	L(Candidate/Off	ceholder name		Office sou	aht			Office h	eld	
	expenditure to benefit C/OI					55 564	J			200 11		
\vdash												
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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

pursement Solicitation/Fundraising Expense
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 Sch: 3/9 Rpt: 16/2	
4 Date 12/02/2024	5 Payee name Anedot
6 Amount (\$) \$1.	7TH FLOOR DALLAS, TX 75201
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete ONLY if dire expenditure to benefit	
Date 11/01/2024	Payee name Anedot
Amount (\$) \$3.	Payee address; City; State; Zip Code 1920 MCKINNEY AVE 7TH FLOOR DALLAS, TX 75201
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete ONLY if dire expenditure to benefit	
Date 11/18/2024	Payee name BCS CHAMBER OF COMMERCE
Amount (\$) \$20.	Payee address; City; State; Zip Code 1733 BRIARCREST DR STE 200 BRYAN, TX 77802
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense TICKET EXP
Complete ONLY if dire expenditure to benefit	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

Constituting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		se s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)		
1	Total pages Schedule F1:	2	FILER NAM						3	Filer ID	(Ethics Commission Fi	ers)
-	Sch: 4/9 Rpt: 17/22			Arthur D. (Mr.)						00088008	(Euros Commission 1	0.0)
4	Date	5	Payee name									
	12/19/2024			TIONAL BANK								
6	Amount (\$)	7	Payee addre	ess; City;	State	e; Zip Co	de					
	\$3.00		PO BOX 6	59								
			HUNTSVIL	LE, TX 77342								
8	PURPOSE	(a)	Category (S	See Categories listed at th	ne top of this sc	chedule)	(b)	Description				
	OF EXPENDITURE		Accounting	g/Banking							plete Schedule T.	
								Check if Austin, SERVICE FEE		officeholder living	g expense	
								SERVICETE	_			
9	Complete ONLY if direct	Ц,	Candidata/Of	ficeholder name		Office co:	ab+			Office he	old.	
9	expenditure to benefit C/Ol		Candidate/Oil	licenolder name		Office sou	gnı			Office ne	eiu	
	Date		Payee name	9								
	11/19/2024		FIRST NA	TIONAL BANK								
	Amount (\$)	H	Payee addre	ess; City;	State	e; Zip Co	de					
	\$3.00		PO BOX 6	59								
			HUNTSVIL	LE, TX 77342								
	PURPOSE	(a)	Category (S	See Categories listed at th	ne top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Accounting	g/Banking							plete Schedule T.	
								SERVICE FEE		officeholder living	j expense	
								SERVICETE	_			
	Complete ONLY if direct	<u> </u>	Candidate/Of	ficeholder name		Office sou	thr			Office he	7ld	
	expenditure to benefit C/O		ourididate/On	neemolder riame		Omec sou	giit			Onice no	Sid	
	Date		Dayles norma	`								
	12/01/2024		Payee name Furniture b									
					C+	7:- C	de					
	Amount (\$)		Payee addre	ess; City; BERGH DR	State	e; Zip Co	ue					
	\$730.62		4204 LIND	DEKUH DK								
				T) / 75004								
			ADDISON,	TX 75001								
	PURPOSE OF	(a)		See Categories listed at th		chedule)	(b)	Description				
	EXPENDITURE		Office Ove	rhead/Rental Exp	ense			Check if travel or Check if Austin,			plete Schedule T.	
								RENTAL EXP			onpense	
								/\	_'			
	Complete ONLY if direct	Ц,	Candidate/Of	ficeholder name		Office sou	thr			Office he	5 d	
	expenditure to benefit C/O		Caranatt/Off	noonolaci name		Jinoc Sou(giil			Onice He		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission	Filers)
Sch: 5/9 Rpt: 18/22	Wharton, Arthur D. (Mr.)		00088008	
4 Date	5 Payee name			
10/30/2024	GRIFFIN COMMUNICATIONS			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$1,070.51	176 VENICE COVE			
	AUSTIN, TX 78737			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Consulting Expense		utside of Texas. Complete Schedule T.	
LAFENDITORE		ш	TX, officeholder living expense	
		CONSULTING	∍ EXP	
O Complete CNII V if direct	Condidate Office holder name Office and	abt	Office hold	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	gnı	Office held	
Date	Payee name			
12/02/2024	GRIFFIN COMMUNICATIONS			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$1,000.00	176 VENICE COVE			
	AUSTIN, TX 78737			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Consulting Expense	ш	utside of Texas. Complete Schedule T. TX, officeholder living expense	
		CONSULTING		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O	Н			
Date	Payee name			
12/31/2024	Huntsville Item			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$240.50	1409 10th Street			
·				
	Huntsville, TX 77310			
PURPOSE		(b) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T.	
EXPENDITURE	Advertising Expense	Check if Austin,	TX, officeholder living expense	
		newspaper ad	I	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O	п			

SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	<u> </u>								
	Sch: 6/9 Rpt: 19/22	Wharton, Arthur D. (Mr.) 00088008								
4	Date	5 Payee name								
	10/31/2024	Madisonville Meteor								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$485.00	PO BOX 999								
		Madisonville, TX 77864								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Advertising Expense								
	EXPENDITORE	Check if Austin, TX, officeholder living expense								
		NEWSPAPER ADS								
_										
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	11/05/2024	RAIL & RYE								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,958.30	101 RAILRAOD STREET								
		NAVASOTA, TX 77868								
	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 EVENT EXPENSE								
		EVENT EXPENSE								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI									
	Data									
	Date	Payee name RAIL & RYE								
	11/05/2024									
	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,272.89	101 RAILRAOD STREET								
		NAVASOTA, TX 77868								
	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 EVENT EXP								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit 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		ges	Contract Labor OTF	vel Out of Distri HER (enter a ca	ict ategory not listed above)
┝	Total pages Schedule F1:				er ID	(Ethics Commission Filers)
	Sch: 7/9 Rpt: 20/22	Wharton, Arthur D. (Mr.)			088008	(Ethics Commission Filers)
4	Date 10/31/2024	5 Payee name ROBERTSON COUNTY NEWS				
L	10/31/2024					
6	Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 114 W FOURTH ST	е			
		HEARNE, TX 77859				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description		
	OF EXPENDITURE	Advertising Expense		Check if travel outside of		
l	EXPENDITURE			Check if Austin, TX, office	eholder living e	xpense
				ADVERTISING EXF	D	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht		Office held	t
Г	Date	Payee name				
	11/27/2024	ROBERTSON COUNTY REPUBLICAN WOMEN	V			
┝	Amount (\$)					
	` '	Payee address; City; State; Zip Code	e			
	\$1,000.00	9959 JACKRABBIT LANE				
		BRYAN, TX 77808				
⊢	PURPOSE	(a) Cotogony	h)	Description		
	OF	,	٠,	Check if travel outside of	Texas Comple	ete Schedule T
	EXPENDITURE	Event Expense		Check if Austin, TX, office		
				니 EVENT SPONSOR		
┡	0 1: 0 1: 0				0.00	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt		Office held	d
L	experience to benefit 6/6/	•				
	Date	Payee name				
	11/04/2024	TEXANA PUBLIC AFFAIRS				
H	Amount (\$)	Payee address; City; State; Zip Code				
	` '		C			
	\$1,092.01	PO BOX 114				
		CHAPPELL HILL, TX 77426				
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description		
	OF	Consulting Expense	~,	Check if travel outside of	Texas, Comple	ete Schedule T.
l	EXPENDITURE	Consulting Expense		Check if Austin, TX, office		
l				ロ CONSULTING EXP		•
				2202102/		
L	0 1. 0	0 111 100 111			0.00	
ĺ	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt		Office held	מ
l	expenditure to benefit C/O	1				

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Officeholds/ (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	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: 8/9 Rpt: 21/22	Wharton, Arthur D. (Mr.) 00088008
4	Date	5 Payee name
	12/24/2024	TEXANA PUBLIC AFFAIRS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	PO BOX 114
		CHAPPELL HILL, TX 77426
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 CONSULTING EXP
		CONSOLTING EXP
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	12/13/2024	TEXAS HOUSE REPUBLICAN CAUCUS
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO BOX 13305
		AUSTIN, TX 78711
	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 ADV EXP
		ABV EXI
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	11/01/2024	THE BANNER PRESS
	Amount (\$)	Payee address; City; State; Zip Code
	\$368.80	2430 STRINGER ST
		BRENHAM, TX 77833
	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 NEWSPAPER ADS
		NEWSPAPER ADS
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct 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	/ - al Comm	nittee	Food/Beverage E Gift/Awards/Mem Legal Services The Instructio	xpense orials Expense on Guide explains		xpense /ages/Contr			Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	ı							3	Filer ID	(Ethics Commission F	ilers)
	Sch: 9/9 Rpt: 22/22			rthur D. (Mr.))					80088000		
4	Date		ayee name									
	12/01/2024		HE WHITI									
6	Amount (\$)	ı	ayee addre		State	e; Zip Co	de					
	\$2,669.50	3	01 BRAZC	S STREET								
		А	USTIN, T	K 78701								
8	PURPOSE	(a) C	ategory (S	ee Categories liste	d at the top of this so	chedule)	(b) Des					
	OF EXPENDITURE	0	Office Over	head/Rental	Expense					de of Texas. Comp officeholder living		
								NTAL EXF		officeriolder living	expense	
9	Complete ONLY if direct expenditure to benefit C/Ol		ndidate/Offi	ceholder nam	е	Office sou	ght			Office he	ld	