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 00051630	sion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable	D. Bryan			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
		Hughes				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 450				Receipt #	Amount
Change of Address	Mineola, TX 75773					
	Willicola, 1X 13113				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>	
TREASURER NAME	Mr.	Steve				
	NICKNAME	LAST		SUFFIX		
	INICKNAME	Dement		SUFFIX		
		Dement				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	4595 Kinsey Dr.	,		, ,		·
(Residence or Business)	Tidor TV 75700					
	Tyler, TX 75703					
7 CAMPAIGN	AREA CODE PHON	NE NUMBER E	EXTENSION			
TREASURER PHONE	(903) 534-8000					
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after cam	paign treasurer
				L	appointment (office	
	July 15	8th day before 6		Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD COVERED	Month Day Year	TI	IDOLICII	Month Day	Year	
	07/01/2024	IH	IROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
			eneral	Special	_	
			0110101			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Senator District 1			State Senator Di		
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 201

13 C / OH NAME	14 Filer ID 00051630	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made withou d officeholders are required to report this informati	t the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRI	=00	
		COMMITTEE CAMPAIGN TREASURER ADDRI	-33	
16 CONTRIBUTION TOTALS	\$ 10.00			
	NS)	\$ 916,232.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 0.00		
	4. TOTAL POLITION	CAL EXPENDITURES		\$ 154,001.96
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PI	AL CONTRIBUTIONS MAINTAINED AS OF THE ERIOD	LAST DAY OF THE	\$ 3,011,209.06
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOANS A RTING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required t	companying report is o be reported by me
		The Hon	orable D. Bryan Hugh	es
		Signature	of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	day			
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 201
18 FILER NAME Hughes, D. Bryan (The Honorabl	e)	19 Filer ID 00051630	(Ethics Com	mission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		L	SUBTO	TAL AMOUNT
1. X SCHEDULE A1: MONE	TARY POLITICAL CONTRIBUTIONS		\$	915,837.00
2. X SCHEDULE A2: NON-N	MONETARY (IN-KIND) POLITICAL CONTRIBU	UTIONS	\$	395.00
3. SCHEDULE B: PLEDG	ED CONTRIBUTIONS		\$	
4. SCHEDULE E: LOANS			\$	
5. X SCHEDULE F1: POLIT	ICAL EXPENDITURES FROM POLITICAL CO	ONTRIBUTIONS	\$	137,436.54
6. SCHEDULE F2: UNPAI	D INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PURC	HASE OF INVESTMENTS FROM POLITICAL	CONTRIBUTIONS	\$	
8. X SCHEDULE F4: EXPEN	NDITURES MADE BY CREDIT CARD		\$	8,064.37
9. X SCHEDULE G: POLITIC	CAL EXPENDITURES FROM PERSONAL FU	INDS	\$	8,501.05
10. SCHEDULE H: PAYME	NT FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$	
11. SCHEDULE I: NON-PO	LITICAL EXPENDITURES FROM POLITICAL	CONTRIBUTIONS	\$	
12. X SCHEDULE K: INTERE TO FILER	ST, CREDITS, GAINS, REFUNDS, AND CON	ITRIBUTIONS RETURNED	\$	45,095.14
			•	

	MONEI	ARY POLITICAL CONTRIBUTION	ა	SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this forn	n	1 Total pages Schedule A1: Sch: 1/73 Rpt: 4/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3 Filer ID (Ethics Commissio 00051630	n Filers)
4	Date 12/13/2024	 5 Full name of contributor	536573)	7 Amount of Contribution (\$)	\$1,500.00
8	Principal occu	North Chicago, IL 60064 pation / Job title (See Instructions) 9	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor)	Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/22/2024	Full name of contributor out-of-state PAC (ID#: AT&T Texas PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor x out-of-state PAC (ID#: C002) Abbott Laboratories Employee PAC Contributor address; City; State; Zip Code	2274431)	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Abbott Part, IL 60064-6001 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:Ahlberg, Trevor L. Contributor address; City; State; Zip Code Irving, TX 75038		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) Cottonwood Financial Te		
		,			

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/73 Rpt: 5/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 12/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00	
		Livingston, TX 77351					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#: Allen Sr., Randolph Mike Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
	Principal occu	Paris, TX 75460 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Date 12/11/2024	Full name of contributor x out-of-state PAC (ID#: CALC) Altria Group, Inc., AltriaPAC Contributor address; City; State; Zip Code Washington, DC 20001	00089136)		Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 12/11/2024	Full name of contributor	000830083		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/14/2024	Full name of contributor x out-of-state PAC (ID#: CAMERICAN PROPERTY Casualty Insurance Assoc. (In Contributor address; City; State; Zip Code Chicago, IL 60631-3512			Amount of Contribution (\$)	\$3,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
		l					

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/73 Rpt: 6/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 12/10/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00	
		Thousand Oaks, CA 91320					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 07/22/2024	Full name of contributor out-of-state PAC (ID#:_Andres, Warren Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
	Principal occu	Dallas, TX 75225 pation / Job title (See Instructions)	Employer (See Instructions	 s)			
	Date 10/22/2024	Full name of contributor X out-of-state PAC (ID#: CAPACHE Corporation PAC Contributor address; City; State; Zip Code Houston, TX 77042-3643	000279224)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>s)</u>			
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_Aransas-Corpus Christi Pilots PAC Contributor address; City; State; Zip Code Corpus Christi, TX 78403-2767)	•	Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 12/12/2024	Full name of contributor X out-of-state PAC (ID#: CARRELL ARCH Health Services LLC Good Government Contributor address; City; State; Zip Code Brentwood, TN 37027	Fund	•	Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/73 Rpt: 7/201	
2	FILER NAME				3	Filer ID (Ethics Commissi	on Filers)
	Hughes, D. E	Bryan (The Honorable)				00051630	
4	Date 12/11/2024	5 Full name of contributor Arnold, Greg6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10,000.00
		Texarkana, TX 75504					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)		
	President &	CEO		The Arnold Companies			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/04/2024	Associated General Contr	actors of Texas-PAC				\$5,000.00
		Contributor address; City; St	ate; Zip Code				
		Austin, TX 78768					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	** ***
	11/07/2024	Atmos Energy Corporation					\$3,000.00
		Contributor address; City; St	ate; Zip Code				
		Dallas, TX 75240-2630					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/11/2024	Austin Police Association	PAC				\$1,000.00
		Contributor address; City; St	ate; Zip Code				
		Austin, TX 78721					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	11/21/2024	BEARBACKERPAC	_				\$5,000.00
		Contributor address; City; St	ate; Zip Code				
		Houston, TX 77056					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL (ONS	SCHEDULE A1			
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/73 Rpt: 8/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 07/20/2024	5 Full name of contributor BNSF RAILPAC6 Contributor address; City; S	x out-of-state PAC (ID#: C		7	Amount of Contribution (\$)	\$2,500.00
		Fort Worth, TX 76161-00					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Date 12/13/2024	Full name of contributor BPA PAC Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instruction:	<u> </u>	Employer (See Instructions	·/-		
	Fillicipal occu	pation / Job title (See Instructions	5)	Employer (See instructions	·)		
	Date 10/07/2024	Full name of contributor Bank of America State & Contributor address; City; S		00043489)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Wilmington, DE 19808 pation / Job title (See Instruction:	5)	Employer (See Instructions	<u> </u> s)		
	Date 11/05/2024	Full name of contributor Barham, Jimmy Contributor address; City; S Paris, TX 75461-6531				Amount of Contribution (\$)	\$200.00
	Principal occu Owner	pation / Job title (See Instructions	5)	Employer (See Instructions Barham Bail Bonds	<u>I</u> S)		
	Date 11/05/2024	Full name of contributor Barr, John H. Contributor address; City; S Tyler, TX 75701	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 6/73 Rpt: 9/201
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission Filers) 00051630
4	Date 12/14/2024	 Full name of contributor			7	Amount of Contribution (\$) \$500.00
_	Deinsinal assu	Tyler, TX 75703	٦	Free lever (Coo le structions	<u></u>	
8	Nonprofit Au	pation / Job title (See Instructions) ctioneer	9	Employer (See Instructions Self employed	5)	
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: Beard, Ty and Torri Contributor address; City; State; Zip Code Tyler, TX 75703-5740)	•	Amount of Contribution (\$) \$10,000.00
		pation / Job title (See Instructions)		Employer (See Instructions		
	Attorney			Beard & Harris Attorney	'S a	tt Law
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#: Beef-PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$1,000.00
	Principal occu	Amarillo, TX 79106 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: Beer Alliance of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701			-	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#: Boating Trades Assoc. of Metropolitan Houston Contributor address; City; State; Zip Code Houston, TX 77054	, P		•	Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
			1			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/73 Rpt: 10/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/12/2024	5 Full name of contributor out-of-state PAC (ID#:_ Border Health PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25,000.00
_	<u> </u>	McAllen, TX 78504				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/07/2024	Full name of contributor out-of-state PAC (ID#:_ Bosworth, Michael & Susan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Tyler, TX 75711 upation / Job title (See Instructions)	Employer (See Instructions			
	Insurance A		Bosworth & Associated)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Bresnen, Steven & Amy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu Attorneys	pation / Job title (See Instructions)	Employer (See Instructions Self Employed)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Broadway Rusty Nail Contributor address; City; State; Zip Code Tyler, TX 75702			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_Brookshire PAC Contributor address; City; State; Zip Code Tyler, TX 75710-1411			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/73 Rpt: 11/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
		Tyler, TX 75702				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Buie, Herbert C. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Dringing! goog	Tyler, TX 75701-5820	Employer (Coo Instructions			
	Director	pation / Job title (See Instructions)	Employer (See Instructions Southside Bank)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ Buie, Herbert C. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Tyler, TX 75701-5820				
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions Southside Bank)		
	Date 12/08/2024	Full name of contributor out-of-state PAC (ID#:_ Bunch, Ray Contributor address; City; State; Zip Code Mount Pleasant, TX 75455)		Amount of Contribution (\$)	\$2.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Butler Snow PAC Contributor address; City; State; Zip Code Ridgeland, MS 39158-6010)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains hov	v to complete this f	orm.		1	Total pages Schedule A1: Sch: 9/73 Rpt: 12/201			
2	FILER NAME Hughes, D. I	Bryan (The Honorable)				ı	Filer ID (Ethics Commission 00051630	on Filers)		
4	Date 12/13/2024	5 Full name of contributor CLEAT PAC6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78701								
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See	Instructions)	s)				
	Date 12/11/2024	Full name of contributor CRAFTPAC Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$1,000.00		
	Principal occu	Austin, TX 78766	<u></u>	Employer (See	Instructions	·,				
	Principal occu	pation / Job title (See Instructions	o)	Employer (See	: ITISTITUCTIONS	»)				
	Date 10/11/2024	Full name of contributor Cain, Sally H. Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$200.00		
	Principal occu	Dallas, TX 75214 pation / Job title (See Instructions	5)	Employer (See	Instructions	<u> </u>				
		()								
	Date 09/03/2024	Full name of contributor Cano, Charlie Contributor address; City; S Gilmer, TX 75645-2968	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$2,000.00		
	Principal occu CEO	pation / Job title (See Instructions	5)	Employer (See Etex Telepho			e			
	Date 12/11/2024	Full name of contributor Cardwell, Ginger Contributor address; City; S Tyler, TX 75701-1654	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$250.00		
	Principal occu Consultant	pation / Job title (See Instructions	5)	Employer (See		5)				

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orm	1.	1	Total pages Schedule A1: Sch: 10/73 Rpt: 13/201		
2	FILER NAME Hughes, D. E	Bryan (The Honorable)				3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 09/12/2024	5 Full name of contributor Carona Sr., John J. (The F6 Contributor address; City; Sta)	7	Amount of Contribution (\$)	\$2,500.00	
_	Dringing Lagra	Dallas, TX 75205	1,		Frankrija (Cas Instructions				
8		pation / Job title (See Instructions) Chief Executive Officer	,		Employer (See Instructions Associa)			
	Date 09/20/2024	Full name of contributor Carrillo, Victor (The Honora Contributor address; City; Sta	······				Amount of Contribution (\$)	\$200.00	
		Rockwall, TX 75032-8451							
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions)			
	Date 10/28/2024	Full name of contributor Carroll, James Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$100.00	
		Longview, TX 75605							
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions)			
	Date 11/05/2024	Full name of contributor Carter, James & Brenda Contributor address; City; Sta Mineola, TX 75773	out-of-state PAC (ID#: tte; Zip Code				Amount of Contribution (\$)	\$50.00	
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor Casselberry, Donald Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$300.00	
	Principal occu Founder & C	pation / Job title (See Instructions)			Employer (See Instructions Quorum Public Affairs, I				
	23.7401 & 0		l		C. 2.2 22 (mano, 1				

	MONET	ARY POLITICAL C	CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 11/73 Rpt: 14/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/18/2024	5 Full name of contributor Caterpillar Inc. PAC6 Contributor address; City; States	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,500.00
_		Irving, TX 75039	T-				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	S)		
	Date 12/11/2024	Full name of contributor Cavender, Joe M. Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
		Tyler, TX 75703-0574	ļ		_		
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Cavender's Boot City	S)		
	Date 10/11/2024	Full name of contributor Centene Corporation PAC Contributor address; City; Sta		00397851)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	St. Louis, MO 63105 pation / Job title (See Instructions)).	Employer (See Instructions	<u> </u> s)		
	Date 12/06/2024	Full name of contributor Charter Communications, Contributor address; City; Sta)	-	Amount of Contribution (\$)	\$15,000.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		
	Date 12/12/2024	Full name of contributor Charter Schools Now PAC Contributor address; City; Sta				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		
			I				

	MONET	ARY POLITICAL C	IONETARY POLITICAL CONTRIBUTIONS				
	The Instru	ction Guide explains how	to complete this fo	rm.	1		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/11/2024	5 Full name of contributor [Chevron Employees PAC (6 Contributor address; City; Sta			7	Amount of Contribution (\$)	\$2,500.00
		San Ramon, CA 94583					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 10/22/2024	Full name of contributor [Choctaw Nation of Oklahor Contributor address; City; Sta)		Amount of Contribution (\$)	\$5,000.00
	Dringing agg	Durant, OK 74702		Employer (See Instructions	·/		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/05/2024	Chubb Group Holdings, Inc Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Philadelphia, PA 19106 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 11/21/2024	Full name of contributor [Cigna Group Employee PA Contributor address; City; Sta Philadelphia, PA 19192		00085316)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/07/2024	Full name of contributor Coe, Janet & Joe Contributor address; City; Sta Winnsboro, TX 75494-2302	•			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I				

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 13/73 Rpt: 16/201			
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)		
4	Date 11/19/2024	 Full name of contributor out-of-state PAC (ID#: Coffey, Daryl R. (The Honorable) Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00		
		Lampasas, TX 76550							
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Criminal Court Judge	s) 				
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#: Coffey, Debra (The Honorable) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00		
		Lampasas, TX 76550	_		Ĺ				
	VP Govt. Aff	pation / Job title (See Instructions) airs		Employer (See Instructions Smart Start LLC	5)				
	Date 11/21/2024	Full name of contributor X out-of-state PAC (ID#: Comcast Corporation & NBCUniversal PAC Contributor address; City; State; Zip Code	C0()		Amount of Contribution (\$)	\$2,500.00		
	Principal occu	Philadelphia, PA 19103 pation / Job title (See Instructions)		Employer (See Instructions	;)				
		, , , , , , , , , , , , , , , , , , , ,			,				
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: Congress Ventures, LLC Capital Partners Cons Contributor address; City; State; Zip Code Austin, TX 78703	ulti			Amount of Contribution (\$)	\$1,500.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> 5)				
	Date 11/15/2024	Full name of contributor X out-of-state PAC (ID#: ConocoPhillips SPIRIT PAC Contributor address; City; State; Zip Code Bartleville, OK 74004	COO	0112896)		Amount of Contribution (\$)	\$2,500.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)				
			1						

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains hov	v to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 14/73 Rpt: 17/201		
2	FILER NAME Hughes, D. E	Bryan (The Honorable)				3	Filer ID (Ethics Commissi 00051630	on Filers)	
4	Date 12/13/2024	5 Full name of contributor Crow, Harlan R.6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$7,500.00	
8	Principal occu	Dallas, TX 75219-3913 pation / Job title (See Instructions	s) [1	<u> </u>	Employer (See Instructions	·/-			
0	Chairman of		5)	ฮ	Crow Holdings)			
	Date 10/11/2024	Full name of contributor Dallas Police Officer PAC Contributor address; City; S)		Amount of Contribution (\$)	\$1,000.00	
		Dallas, TX 75215							
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)			
	Date 10/11/2024	Full name of contributor Dentaquest Political Action Contributor address; City; S		00	782292)		Amount of Contribution (\$)	\$1,000.00	
	Dringinal accu	Boston, MA 02129 pation / Job title (See Instructions			Employer (See Instructions	·/-			
	r illicipai occu	pation / Job title (See Instructions	5)		Employer (See instructions	·)			
	Date 11/05/2024	Full name of contributor Dickinson, Barbara Contributor address; City; S Longview, TX 75604	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$20.00	
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)			
	Date 12/11/2024	Full name of contributor Dobson, Sean Contributor address; City; S Austin, TX 78746	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$10,000.00	
	Principal occu Chairman, C	pation / Job title (See Instructions	6)		Employer (See Instructions The Amherst Group LLC				
	Shairman, C				e / timerot Group LLC	_			

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to compl	ete this for	m.	1	Total pages Schedule A1: Sch: 15/73 Rpt: 18/201			
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)		
4	Date 12/09/2024	 Full name of contributor	te PAC (ID#:)	7	Amount of Contribution (\$)	\$2,500.00		
_		McKinney, TX 75072							
8	Principal occu CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Lamar Companies LLC	5)				
	Date 11/04/2024	Full name of contributor out-of-state Edwards, Curtis H. Contributor address; City; State; Zip Code	te PAC (ID#:			Amount of Contribution (\$)	\$6.00		
	Dringing Lagra	Gilmer, TX 75645		Frankrijer (Cookratii stare	_				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 10/11/2024	Eli Lilly and Company PAC Contributor address; City; State; Zip Code	te PAC (ID#: <u>C00</u>)		Amount of Contribution (\$)	\$2,000.00		
	Principal occu	Indianapolis, IN 46285 pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 11/05/2024	Elmore, John T.				Amount of Contribution (\$)	\$100.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 11/05/2024	Enge, Joel	te PAC (ID#:			Amount of Contribution (\$)	\$50.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)				
			I						

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/73 Rpt: 19/201
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission Filers) 00051630
4	Date 11/05/2024	 Full name of contributor out-of-state PAC (ID#:_ ExxonMobil PAC, PAC of Texas Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$1,000.00
_		Irving, TX 75039			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_Faust, Tyson D. Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$5,000.00
	Deinainal agai	Houston, TX 77027			
	Chairman/Cl	pation / Job title (See Instructions)	Employer (See Instructions Faust Distributing Co.	5)	
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Fieldstead and Company Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$10,000.00
		Irvine, CA 92623	1 - 4 4 4		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Finley, Joel Trace Contributor address; City; State; Zip Code Driftwood, TX 78619)		Amount of Contribution (\$) \$500.00
	Principal occu Principal	pation / Job title (See Instructions)	Employer (See Instructions Gateway Partners Gove		ment Affairs
	Date 07/22/2024	Full name of contributor out-of-state PAC (ID#:_Fleming, JoAnn Contributor address; City; State; Zip Code Flint, TX 75762)		Amount of Contribution (\$) \$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>,</u>	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDU	ULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/73 Rpt: 20/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 10/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Focused Advocacy PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5,000.00	
_		Austin, TX 78746					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_Foley & Lardner LLP Texas Campaign Fund Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	Dallas , TX 75201-3340 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Ford, Curtis E. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
		Austin, TX 78746					
	CEO	pation / Job title (See Instructions)	Employer (See Instructions) Media Choice)			
	Date 11/14/2024	Full name of contributor out-of-state PAC (ID#:_Franks, Charlene Contributor address; City; State; Zip Code Karnack, TX 75661)		Amount of Contribution (\$)	\$50.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Friends of the TTU System PAC Contributor address; City; State; Zip Code Lubbock, TX 79409			Amount of Contribution (\$)	\$10,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/73 Rpt: 21/201			
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)		
4	Date 12/11/2024	 Full name of contributor out-of-state PAC (ID#:_ Friends of the University PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$5,000.00		
_	Deinainal agai	Austin, TX 78763	O Francisco (Coo Instructions					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))				
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_Funds Available for Involved Reporters Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
	Principal occu	Athens, TX 75751 pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 11/21/2024	Full name of contributor X out-of-state PAC (ID#: Gainwell Holding Corp. PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$4,000.00		
		Conway, AR 72034						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Garrett, John R. Contributor address; City; State; Zip Code Tyler, TX 75701			Amount of Contribution (\$)	\$2,500.00		
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Fair Oil Co.)				
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_Garver, C.M. Contributor address; City; State; Zip Code Houston, TX 77055			Amount of Contribution (\$)	\$7,500.00		
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Garver Real Estate)				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/73 Rpt: 22/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 09/20/2024	 Full name of contributor out-of-state PAC (ID#:_Germania Farm Mutual PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$1,000.00
_	Discipal	Brenham, TX 77834	O Frankrica (Con Instruction			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Gibson III, Lee R. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Tyler, TX 75703 upation / Job title (See Instructions)	Employer (See Instructions)		
	President &		Southside Bank			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Glenn, David B. Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Texarkana, TX 75503				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Glenney, Chris Contributor address; City; State; Zip Code Tyler, TX 75707			Amount of Contribution (\$)	\$750.00
	•	opation / Job title (See Instructions) Operations NE Texas/N Louisiana	Employer (See Instructions Christus Health)		
	Date 09/29/2024	Full name of contributor out-of-state PAC (ID#:_ Good Government Fund Contributor address; City; State; Zip Code Ft. Worth, TX 76102)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 20/73 Rpt: 23/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/04/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00
Ω	Principal occu	Ft. Worth, TX 76102 pation / Job title (See Instructions)	Employer (See Instructions			
0	Fillicipal occu	pation / Job title (See instructions)	employer (See Instructions	')		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Grace & McEwan Consulting LLC Political Fund 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	<u> </u>		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Gray Reed PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77056 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Greer, James & Carol (The Honorable) Contributor address; City; State; Zip Code Hallsville, TX 75650			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Gregg, Aaron C. Contributor address; City; State; Zip Code Fullerton, CA 92832)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self employed	()		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/73 Rpt: 24/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/11/2024	J2024 Gulf States Toyota Inc. State PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,000.00
•	Dringing occur	Houston, TX 77077 pation / Job title (See Instructions)	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ HMWK LLC 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)		
	· ····o.pa ooda	panon, cos uno (cos monasnono)		,		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ HOMEPAC of TEXAS Texas Association of Buil Contributor address; City; State; Zip Code	ders		Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/13/2024	Full name of contributor out-of-state PAC (ID#:_ HOSPAC - State Contributor address; City; State; Zip Code Austin, TX 78701-2180)		Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ HS Law PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDU	LE A1
	The Instruc	ction Guide explains how to c	omplete this forn	1.	1	Total pages Schedule A1: Sch: 22/73 Rpt: 25/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commissi 00051630	on Filers)
4	Date 12/07/2024	Haberle, Fred	p Code)	7	Amount of Contribution (\$)	\$25,000.00
8	Principal occur	Tyler, TX 75703 pation / Job title (See Instructions)	ام	Employer (See Instructions			
0	VicePresider			Orion Pipeline, LLC	,		
	Date 12/05/2024	Full name of contributor ou Hager Campaign Contributor address; City; State; Zi	nt-of-state PAC (ID#: p Code)		Amount of Contribution (\$)	\$2,500.00
		Tyler, TX 75702-7226					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor ou ou Halliburton Co. PAC (HALPAC) Contributor address; City; State; Zi)		Amount of Contribution (\$)	\$2,500.00
		Houston , TX 77072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor ou Hancock, Brian & Jan Contributor address; City; State; Zi Tyler, TX 75703	ut-of-state PAC (ID#: p Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occup Owner/Presid	pation / Job title (See Instructions)		Employer (See Instructions E&P Services Group)		
	Date 12/11/2024	Full name of contributor ou Hardin, Jeffrey Contributor address; City; State; Zi	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occup	oation / Job title (See Instructions)		Employer (See Instructions Tomahawk Energy Serv		s II C	
	3			. S. Marian Energy Serv			

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 23/73 Rpt: 26/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 07/01/2024	5 Full name of contributor Harris, Aaron6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	Deinsinal	North Richland Hills, TX 761		Frankrik (Ozakati katika			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor Harrison M.D., Craig Contributor address; City; State				Amount of Contribution (\$)	\$2,000.00
	Principal occu	Tyler, TX 75703 pation / Job title (See Instructions)		Employer (See Instructions)		
	Surgeon	,		Self Employed			
	Date 12/14/2024	Full name of contributor Hartnett, Will Ford (The Hon Contributor address; City; State)		Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75201					
	Principal occu Principal	pation / Job title (See Instructions)		Employer (See Instructions The Hartnett Law Firm)		
	Date 07/11/2024	Full name of contributor Haskins, Shirley (Mrs.) Contributor address; City; State Emory, TX 75440				Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 10/27/2024	Full name of contributor Hawkins, Jay Contributor address; City; State Holly Lake Ranch, TX 75765)		Amount of Contribution (\$)	\$20.00
	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 f	orm.	1	Total pages Schedule A1: Sch: 24/73 Rpt: 27/201
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission Filers) 00051630
4	Date 08/21/2024	Full name of contributor)	7	Amount of Contribution (\$) \$5,000.00
_		Homer, LA 71040			
8	Principal occu Owner	pation / Job title (See Instructions)	9 Employer (See Instructions Hays Oil Services)	
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Hazelwood, Sheryl Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$20.00
	Principal occu	Livingston, TX 77399 pation / Job title (See Instructions)	Employer (See Instructions		
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions)	
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Heavin, H. Gary Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$10,000.00
	<u> </u>	Gatesville, TX 76528			
	Entrepreneu	pation / Job title (See Instructions) r	Employer (See Instructions Self employed)	
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ Hibbs, Tisa & Billy Contributor address; City; State; Zip Code Tyler, TX 75701)		Amount of Contribution (\$) \$500.00
	Principal occu Chairman &	pation / Job title (See Instructions) CEO	Employer (See Instructions Heartland Security Insur		ce Group
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Hicks Ph.D, Marian B Contributor address; City; State; Zip Code Palestine, TX 75802			Amount of Contribution (\$) \$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	

	MONET	ARY POLITICAL C	NS	SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 25/73 Rpt: 28/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/19/2024	5 Full name of contributor [Hillco PAC6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	7	Amount of Contribution (\$)	\$5,000.00
Ω	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	T _a	Employer (See Instructions	; <u>)</u>		
0	r inicipal occu	pation / 300 title (See instructions)		Employer (See instructions	·)		
	Date 11/26/2024	Full name of contributor Hochheim Prairie PAC Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/11/2024	Full name of contributor Holland and Knight Texas Contributor address; City; Sta				Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75201					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor [Holly, Larry & Nancy Contributor address; City; Sta Gladewater, TX 75647-253	tte; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/18/2024	Full name of contributor Holmes, James Contributor address; City; Sta Dallas, TX 75201	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		pation / Job title (See Instructions) Businessman		Employer (See Instructions Holmes PLLC, Robur LL			
	, atomey and	Zasinossinari		. Journey 1 ELO, Nobul El			

	MONET	ONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/73 Rpt: 29/201			
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)		
4	Date 11/21/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00		
_	<u> </u>	Bellaire, TX 77401						
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))				
	Date 12/11/2024	Full name of contributor			Amount of Contribution (\$)	\$2,000.00		
	Principal occu	San Antonio, TX 78256 upation / Job title (See Instructions)	Employer (See Instructions)				
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Huggins III, Joe O. Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00		
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions Houston Distributing Co.		nc.			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Hughey Jr., Gaylord T. Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00		
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self Employed)				
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Hunt, Woody L. Contributor address; City; State; Zip Code El Paso, TX 79913-0667)		Amount of Contribution (\$)	\$5,000.00		
	Principal occu Chairman &	upation / Job title (See Instructions) CEO	Employer (See Instructions Hunt Companies, Inc.)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/73 Rpt: 30/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 10/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00	
_		Houston, TX 77002					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:_ Husch Blackwell LLP Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
	Dringing Lagor	St. Louis, MO 63105	Frankrija (Cas Instructiona				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:_ Husch Blackwell Strategies LLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
		Jefferson City, MO 65101					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_INDEPAC Contributor address; City; State; Zip Code Austin, TX 78750)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Incline PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL C	NS 	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 28/73 Rpt: 31/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/21/2024	5 Full name of contributorJES HOldings LLC - Texa6 Contributor address; City; St			7	Amount of Contribution (\$)	\$2,500.00
		Columbia, MO 65203					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor Jackson Walker L.L.P. PA Contributor address; City; St			•	Amount of Contribution (\$)	\$1,500.00
	District	Dallas, TX 75201-2725	\	Franks on (Octobration	<u> </u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 12/12/2024	Full name of contributor Jackson, Mary Elizabeth (Contributor address; City; St)	•	Amount of Contribution (\$)	\$1,500.00
		Tyler, TX 75706			L		
	Administration	pation / Job title (See Instructions on)	Employer (See Instructions Christus Health	S)		
	Date 10/14/2024	Full name of contributor Jocelyn Dabeau Governm Contributor address; City; St Austin, TX 78731-6134)		Amount of Contribution (\$)	\$1,250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/04/2024	Full name of contributor Johnson, Casey Contributor address; City; St Longview, TX 75605-7352				Amount of Contribution (\$)	\$2,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Longview Bridge & Roa			
	-						

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/73 Rpt: 32/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 08/28/2024	5 Full name of contributor out-of-state PAC (ID#:_ Johnson, Joel 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00	
_		Tyler, TX 75701					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Johnson, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$7,500.00	
	Principal occu	Houston, TX 77007 pation / Job title (See Instructions)	Employer (See Instructions				
	Principal occu President	pation / Job title (See Instructions)	Silver Eagle Houston)			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Johnston, Jody Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
		Alba, TX 75410					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Junior and Community College PAC Contributor address; City; State; Zip Code Austin, TX 78701-1686			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Karlsruher, Jessica Contributor address; City; State; Zip Code Austin, TX 78737			Amount of Contribution (\$)	\$150.00	
	Principal occu Principal	pation / Job title (See Instructions)	Employer (See Instructions Root Strategies)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/73 Rpt: 33/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission Filers) 00051630		
4	Date 11/07/2024	 Full name of contributor		7	Amount of Contribution (\$) \$50.00		
_		Alba, TX 75410					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ Kickapoo Traditional Tribe of Texas Contributor address; City; State; Zip Code Eagle Pass, TX 78852			Amount of Contribution (\$) \$25,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 07/01/2024	Full name of contributor out-of-state PAC (ID#:_ King, Connie Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$50.00		
	Principal occu	Texarkana, TX 75503 pation / Job title (See Instructions)	Employer (See Instructions				
	- Timoipai occu	pation 7 000 title (See Instructions)	Employer (See manuchons				
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Kirby Corp. PAC Contributor address; City; State; Zip Code Houston, TX 77007)		Amount of Contribution (\$) \$2,500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_Kuhl, Jr. P.C., P. John Contributor address; City; State; Zip Code Houston, TX 77056)		Amount of Contribution (\$) \$500.00		
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions SK Law)			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 31/73 Rpt: 34/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	5 Full name of contributor LUMPAC6 Contributor address; City; State;)	7	Amount of Contribution (\$)	\$5,000.00
_	Drivainal	Austin, TX 78703		Familia var (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 11/05/2024	Full name of contributor Lacey, Nancy Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Dringing age	Fairview, TX 75069		Employer (Coo Instructions			
	Telecom	pation / Job title (See Instructions)		Employer (See Instructions ICBS)		
	Date 12/13/2024	Full name of contributor Lambeth, Jim Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Flint, TX 75762					
	Principal occu Capital Partr	pation / Job title (See Instructions) ner		Employer (See Instructions Linebarger Attorneys at	•	W	
	Date 12/13/2024	Full name of contributor Linebarger Goggan Blair & Sa Contributor address; City; State; Austin, TX 78760				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/11/2024	Lloyd Gosselink Rochelle & T				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 f	orm.	1	Total pages Schedule A1: Sch: 32/73 Rpt: 35/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 10/11/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
8	Principal occu	Dallas, TX 75201-6776 pation / Job title (See Instructions)	9 Employer (See Instructions)			
		,					
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_Longbow Partners Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Driverinal con-	Austin, TX 78701	Franks von (Cook both vot in no				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_Loomis, David Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
		Magnolia, TX 77353-1067					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Lovil, Betty Ann Contributor address; City; State; Zip Code Tyler, TX 75709			Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/09/2024	Full name of contributor out-of-state PAC (ID#:_Luke, Carol Contributor address; City; State; Zip Code Yantis, TX 75497			Amount of Contribution (\$)	\$20.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1				
	The Instru	ction Guide explains how to complete t	this for	m.	1	Total pages Schedule A1: Sch: 33/73 Rpt: 36/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/05/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$20.00
_		Mineola, TX 75773	1-		_		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 07/03/2024	Full name of contributor out-of-state PAG Mahroum, Eric Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$300.00
	Principal occu	Houston, TX 77062 pation / Job title (See Instructions)		Employer (See Instructions	:) 		
	Consultant	pation / vob title (oce mondations)		Mahroum Communication		, LLC	
	Date 11/25/2024	Full name of contributor out-of-state PAC Maier, Richard N. Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78751					
	Principal occu Real Estate	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
Date Full name of contributor X out-of-state PAC (ID#: C002) 07/20/2024 Management & Training Corp. PAC Contributor address; City; State; Zip Code Centerville, UT 84014		0208322)		Amount of Contribution (\$)	\$750.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/18/2024	Full name of contributor X out-of-state PAC Marathon Oil Company Employees PAC (I Contributor address; City; State; Zip Code Houston, TX 77024				Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	ı	Total pages Schedule A1: Sch: 34/73 Rpt: 37/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		ı	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 11/05/2024	5 Full name of contributor out-of-state PAC (ID#:_ Martin, Claudia 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00	
_		Mineola, TX 75773-0631					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	6)			
	Date 12/07/2024	Full name of contributor out-of-state PAC (ID#:_ Martin III, Ruben Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Kilgore, TX 75663 pation / Job title (See Instructions)	Employer (See Instructions	-)			
	President	pation / 300 title (See Instructions)	Martin Resource Manag		ent Corp.		
	Date 11/05/2024	Full name of contributor)		Amount of Contribution (\$)	\$10.00	
		Lindale, TX 75771					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 10/24/2024	Full name of contributor out-of-state PAC (ID#:_ McCabe, Elizabeth C. Contributor address; City; State; Zip Code Dallas, TX 75229			Amount of Contribution (\$)	\$2,500.00	
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	5)			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ McGarrett, Wanda Contributor address; City; State; Zip Code Jefferson, TX 75673)		Amount of Contribution (\$)	\$2.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/73 Rpt: 38/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 11/05/2024	5 Full name of contributor out-of-state PAC (ID#:_McGee, Edgar L. 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00	
_	Deignainal agai	Flint, TX 75762-0476	lo Frankrian (Con Instruction				
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 10/11/2024	Full name of contributor X out-of-state PAC (ID#: McGuire Woods Federal PAC Fund Contributor address; City; State; Zip Code	C00225342)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ McGuire, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Dallas, TX 75205 pation / Job title (See Instructions)	Employer (See Instructions)			
		g Partner & CEO	Andrews Distributing	,			
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ McKenzie, Michael Contributor address; City; State; Zip Code Sulphur Springs, TX 75482			Amount of Contribution (\$)	\$20.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/11/2024	Full name of contributor x out-of-state PAC (ID#: 4 McKesson Corp. Employees Political Fund Contributor address; City; State; Zip Code Washington, DC 20004	C00108035)		Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 36/73 Rpt: 39/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/10/2024	5 Full name of contributor McKinney, Raymond6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
		Tyler, TX 75703					
8	Principal occu President/CE	pation / Job title (See Instructions)	9	Employer (See Instructions The Genecov Group	s)		
	Date 12/11/2024	Full name of contributor McRae, Cody A. Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Investor			OmniBase Services of	Гех	as	
	Date 11/19/2024	Full name of contributor McWhorter, Early Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
		Marshall, TX 75672-7608					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 11/05/2024	Full name of contributor Melton, Michael & Lydia Contributor address; City; Sta Wake Village, TX 75501	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)		
	Date 09/12/2024	Full name of contributor Merck Employees PAC Contributor address; City; Sta	x out-of-state PAC (ID#: CC)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 37/73 Rpt: 40/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 07/01/2024	 Full name of contributor out-of-state PAC (ID#:_Miers, Harriet Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$1,500.00	
_		Dallas, TX 75230					
8	Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions) Locke Lord LLP)			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_Mills, Bruce Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
	Principal occu	Dodd City, TX 75438 pation / Job title (See Instructions)	Employer (See Instructions)			
	<u>'</u>	, , , , , , , , , , , , , , , , , , ,					
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Minton Jr., John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00	
		Tyler, TX 75701					
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Potter Minton, PC)			
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_ Minton Jr., John Contributor address; City; State; Zip Code Tyler, TX 75701			Amount of Contribution (\$)	\$500.00	
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Potter Minton, PC)			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_Mitchell, Wanda R. Contributor address; City; State; Zip Code Longview, TX 75605			Amount of Contribution (\$)	\$20.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 38/73 Rpt: 41/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/05/2024	 Full name of contributor out-of-state PAC (ID#:_ Mobbs, Jennifer Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$20.00
		Tyler, TX 75701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/31/2024	Full name of contributor out-of-state PAC (ID#:_ Moore, Douglas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Hideaway, TX 75771				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ NABIP Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Cranford, NJ 07016				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor X out-of-state PAC (ID#: NACDS PAC Contributor address; City; State; Zip Code Arlington, VA 22209	C00022368)		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#:_ 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)		

	MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 39/73 Rpt: 42/201
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051630
4	Date 11/21/2024	Full name of contributor		7 Amount of Contribution (\$) \$2,500.0
8	Principal occur	Fort Worth, TX 76107 Ipation / Job title (See Instructions)	• Employer (See Instructions	
ŏ	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Nall, Mike Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$500.0
	Dringing one	Kingwood, TX 77345	Franks or (See Instructions	
	Investor	pation / Job title (See Instructions)	Employer (See Instructions OmniBase Services of T	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: North Texas Automobile Dealers PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$5,000.0
		Irving, TX 75062		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
	Date 09/21/2024	Full name of contributor out-of-state PAC (ID#:_ Norton, Scott Contributor address; City; State; Zip Code Texarkana, TX 75503		Amount of Contribution (\$) \$1,000.0
	Principal occu Executive Di	pation / Job title (See Instructions) irector/CEO	Employer (See Instructions TexAmericas Center	5)
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas PAC Contributor address; City; State; Zip Code Dallas, TX 75202-1234		Amount of Contribution (\$) \$4,000.0
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions) ()
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	MONET	ARY POLITICAL (ONS	SCHEDULE A1			
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/73 Rpt: 43/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/05/2024	5 Full name of contributorOne Gas, Inc. PAC6 Contributor address; City; S	x out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
		Tulsa, OK 74103					
8	Principal occu	pation / Job title (See Instruction	5)	9 Employer (See Instructions	s)		
	Date 08/07/2024	Full name of contributor One Gas, Inc. PAC Contributor address; City; S	X out-of-state PAC (ID#: (C00554444)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Tulsa, OK 74103 pation / Job title (See Instruction	5)	Employer (See Instructions	<u> </u>		
			-,		,		
	Date 10/26/2024	Full name of contributor Oxton, Patricia Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Dringing! goog	Longview, TX 75604 pation / Job title (See Instruction		Employer (See Instructions	<u></u>		
	Fillicipal occu	pation / 300 title (See Instruction	5)	Employer (See Instructions	·)		
	Date 10/07/2024	Full name of contributor PNC PAC Contributor address; City; S Washington, DC 20006	x out-of-state PAC (ID#: <u>C</u>	000035519		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor Parrish, Judy & Pat Contributor address; City; S Marshall, TX 75672-2706	·)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 41/73 Rpt: 44/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission Filers) 00051630		
4	Date 12/13/2024	Full name of contributor		7	Amount of Contribution (\$) \$250.00		
		Tyler, TX 75702					
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#:_Patterson, Cary Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$25,000.00		
	Dringinal occu	Texarkana, TX 75503 pation / Job title (See Instructions)	Employer (See Instructions				
	Attorney	pation / 300 title (See Instructions)	Self employed	,			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Payne, Paul & Ophelia Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$50.00		
		Reno, TX 75462					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Penn Entertainment Inc. Texas PAC Contributor address; City; State; Zip Code Wyomissing, PA 19610			Amount of Contribution (\$) \$2,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Perkins, James I. (Mr.) Contributor address; City; State; Zip Code Tyler, TX 75711)		Amount of Contribution (\$) \$25,000.00		
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Citizens 1st Bank)			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 42/73 Rpt: 45/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commissi 00051630	on Filers)
4	Date 08/15/2024	 Full name of contributor out-of-state PAC (ID#: Perot Jr., Ross Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25,000.00
8	Principal occu	Dallas, TX 75219 pation / Job title (See Instructions)	9 Employer (See Instructions)		
_	Chairman	pation / oob title (occ mondellons)	The Perot Group	,		
	Date 11/21/2024	Full name of contributor x out-of-state PAC (ID#:_Pfizer PAC Contributor address; City; State; Zip Code	C00016683)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	New York City, NY 10001 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/27/2024	Full name of contributor out-of-state PAC (ID#: PharmPac Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#: Pipe Fitters Local Union 211 Contributor address; City; State; Zip Code Deer Park, TX 77536			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#:_Plumbers Local Union No. 68 PAC Fund Contributor address; City; State; Zip Code Houston, TX 77249-8746			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
			'			

	MONET	ARY POLITICAL (SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 43/73 Rpt: 46/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/11/2024	5 Full name of contributor Poinsett PLLC6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
_	Deinsinal	Austin, TX 78701	, I	O Faralassa (O a lastrusticas			
8	Principal occu	pation / Job title (See Instructions	i)	9 Employer (See Instructions	S)		
	Date 07/10/2024	Full name of contributor Pojman, Joe (Dr.) Contributor address; City; St				Amount of Contribution (\$)	\$100.00
	Dringinal occu	Austin, TX 78754	. I	Employer (See Instructions	·/-		
	Pilicipai occu	pation / Job title (See Instructions		Employer (See Instructions	·)		
	Date 10/11/2024				Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Austin, TX 78768 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
	•	`	,	, , ,			
	Date 12/10/2024	Full name of contributor Populus Financial Group, Contributor address; City; St Irving, TX 75062				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 12/11/2024	Full name of contributor Precast PAC Contributor address; City; St Austin, TX 78716	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL (SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 44/73 Rpt: 47/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/25/2024	5 Full name of contributor Provider Coalition for Car6 Contributor address; City; S		rsing Home Coalition)	7	Amount of Contribution (\$)	\$7,500.00
		Lewisville, TX 75057					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Date 12/13/2024	Full name of contributor Quest Diagnostics Inc. PA Contributor address; City; S		C000329185)	-	Amount of Contribution (\$)	\$500.00
	Delegale al acces	Secaucus, NJ 07094		Familia va (Oa a la atrocatica da	<u></u>		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor RECA-Good Government Contributor address; City; S)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	6)	Employer (See Instructions	s)		
	Date 10/11/2024	Full name of contributor Ralsky, Michael Contributor address; City; S Dallas, TX 75204)	•	Amount of Contribution (\$)	\$500.00
	Principal occu Vice Preside	pation / Job title (See Instructions nt	s)	Employer (See Instructions MV Transportation	5)		
	Date 12/11/2024	Full name of contributor Red Rock Texas PAC Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 45/73 Rpt: 48/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	5 Full name of contributor Republic Services, Inc. Er		nment PAC	7	Amount of Contribution (\$)	\$1,500.00
		Phoenix, AZ 85054					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Date 11/05/2024	Full name of contributor Republic Services, Inc. Er Contributor address; City; St				Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>. </u>		
	Date 12/09/2024	Full name of contributor Republican Women of Wo Contributor address; City; St				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Quitman, TX 75783-1437 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
	Date 08/28/2024	Full name of contributor Rice-Tims, Cynthia Contributor address; City; St				Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 07/20/2024	Full name of contributor Riceland Consulting LLC Contributor address; City; St Eagle Lake, TX 77434	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>. </u>		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	5		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm	1.	1	Total pages Schedule A1: Sch: 46/73 Rpt: 49/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)				3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/07/2024	5 Full name of contributor Richey, Marilyn6 Contributor address; City; St	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$1,000.00
_		Tyler, TX 75701	, I _a					
8	Principal occu Retired	pation / Job title (See Instructions	9		Employer (See Instructions Retired)		
	Date 11/10/2024	Full name of contributor Riley, Koni Contributor address; City; St)		Amount of Contribution (\$)	\$50.00
	Dringing! aggs	Mineola, TX 75773	. I		Employer (See Instructions			
	Principal occu	pation / Job title (See Instructions	5)	ı	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor Riter III, A.W. Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00
		Tyler, TX 75703						
	Principal occu Principal	pation / Job title (See Instructions	(3)		Employer (See Instructions Riter Group)		
	Date 11/21/2024	Full name of contributor Rock Holdings Inc. State Contributor address; City; St Lansing, MI 48933		003	88827)		Amount of Contribution (\$)	\$1,250.00
	Principal occu	pation / Job title (See Instructions	(3)	E	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor Rodriguez, Oscar Contributor address; City; St Austin, TX 78705	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu President	pation / Job title (See Instructions	(3)		Employer (See Instructions Texas Association of Bro		dcasters	

	MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Sche Sch: 47/73 Rpt:			
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3 Filer ID (Ethics 0 00051630	Commission Filers)		
4	Date 12/11/2024	 Full name of contributor		7 Amount of Contrib	stantion (\$) \$2,000.00		
		Austin, TX 78701-2100					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)			
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID# Rydman, John & Lindy Contributor address; City; State; Zip Code	±:)	Amount of Contrib	\$2,500.00		
	Principal occu	Houston, TX 77007 pation / Job title (See Instructions) wner	Employer (See Instructions Spec's	ns)			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID# SA Prof Firefighters Assoc Local 624 Contributor address; City; State; Zip Code	<u>*</u> :)	Amount of Contrib	\$2,500.00		
	Principal occu	San Antonio, TX 78201-0000 pation / Job title (See Instructions)	Employer (See Instructions	ns)			
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID# SB Development Initiatives LLC Contributor address; City; State; Zip Code Addison, TX 75001	#:)	Amount of Contrib	sution (\$) \$15,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)			
	Date 12/11/2024	Full name of contributor x out-of-state PAC (ID# Safelite Group Inc. PAC Contributor address; City; State; Zip Code Columbus, OH 43235	#: C00526509)	Amount of Contrib	stantion (\$) \$500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)			
			-1				

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1 Sch: 48/73 Rpt: 51/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3 Filer ID (Ethics Commis 00051630	sion Filers)	
4	Date 10/11/2024	Full name of contributor)	7 Amount of Contribution (\$	\$1,000.00	
_	Dein ein al. a ann	Austin, TX 78701	O Frankrije (Con hadanski po	->		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	s)		
	Date 11/05/2024	Full name of contributor X out-of-state PAC (ID#: Sazerac Co., Inc. PAC (SazeracPAC) Contributor address; City; State; Zip Code	C00639138)	Amount of Contribution (\$	\$5,000.00	
	Principal occu	Washington, DC 20002 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Scott, James M. Contributor address; City; State; Zip Code		Amount of Contribution (\$	\$2,000.00	
		Beaumont, TX 77705-9628				
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions) Trans-Global Solutions,	•		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Scott, Michael J. Contributor address; City; State; Zip Code Irving, TX 75063)	Amount of Contribution (\$	\$5,000.00	
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self employed	s)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Scott II, William F. Contributor address; City; State; Zip Code Beaumont, TX 77705)	Amount of Contribution (\$	\$2,000.00	
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Trans-Global Solutions,			

	MONET	ARY POLITICAL (CONTRIBUTIO	NS			SCHEDUI	LE A1
	The Instruc	ction Guide explains how	v to complete this fo	orm.		1	Total pages Schedule A1: Sch: 49/73 Rpt: 52/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)				3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	5 Full name of contributor Shipton, Patricia A.6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701-2157						
8	Principal occu Principal	pation / Job title (See Instructions	S) [9		nployer (See Instructions atricia A. Shipton Gove		mental Affairs	
	Date 11/05/2024	Full name of contributor Simms, Brenda H. Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00
	Dringinal accu	Longview, TX 75605 pation / Job title (See Instructions	s)	Er	nployer (See Instructions			
	Principal occu	pation / Job title (See Instructions	5)		nployer (See mstructions)		
	Date 12/01/2024	Full name of contributor Smith County Republican Contributor address; City; S)		Amount of Contribution (\$)	\$2,000.00
		Tyler, TX 75711						
	Principal occu	pation / Job title (See Instructions	5)	Er	nployer (See Instructions)		
	Date 12/13/2024	Full name of contributor Smith, Courtney Contributor address; City; S Henderson, TX 75654	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu University St	pation / Job title (See Instructions aff	5)		nployer (See Instructions T Tyler)		
	Date 12/14/2024	Full name of contributor Smith, Kelly Contributor address; City; S Tyler, TX 75703	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Owner	pation / Job title (See Instructions	5)		nployer (See Instructions oex Onshore)		

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to c	omplete this forn	1.	1	Total pages Schedule A1: Sch: 50/73 Rpt: 53/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/05/2024	 5 Full name of contributor ou ou Smith, Mickey & Bobbie (Judge 6 Contributor address; City; State; Zi 	, 		7	Amount of Contribution (\$)	\$150.00
		Kilgore, TX 75663					
8	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Self Employed, Four S (
	Date 10/03/2024	Full name of contributor ou Smith, Robert Contributor address; City; State; Zi	ut-of-state PAC (ID#: p Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75230 pation / Job title (See Instructions)		Employer (See Instructions)		
				Accident & Injury Chirop		etic	
	Date 11/05/2024	Full name of contributor ou Smitherman, Linda W. Contributor address; City; State; Zi	ut-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$10.00
		Longview, TX 75605					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor ou Southern Glazer's PAC of Texa Contributor address; City; State; Zi Austin, TX 78701				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor ou Southwestern Committee on Po Contributor address; City; State; Zi Amarillo , TX 79101				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTI	RIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to com	plete this form	n.	1	Total pages Schedule A1: Sch: 51/73 Rpt: 54/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	Spurr, Kristy L.	state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
		Buda, TX 78610					
8	Principal occu Board of Dire	pation / Job title (See Instructions) ectors		Employer (See Instructions Texas Self Storage Asso			
	Date 10/29/2024	Stein, David (The Honorable) Contributor address; City; State; Zip Co	state PAC (ID#: ode			Amount of Contribution (\$)	\$100.00
	Principal occu	Tyler, TX 75703 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Owner			Office Pride of East Tex	as		
	Date 11/05/2024	Full name of contributor out-of- Sterner, Jeanette (Colonel) Contributor address; City; State; Zip Co	state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Holly Lake Ranch, TX 75765					
	Principal occu Army C02	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 10/28/2024	Stewart, William	state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 10/11/2024	Full name of contributor out-of- Stone Hilton PLLC Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 52/73 Rpt: 55/201
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051630
4	Date 11/14/2024	 Full name of contributor		7 Amount of Contribution (\$) \$17.00
_	5	Longview, TX 75601	10 5 1 10 1 11	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)
	Date 12/08/2024	Contributor address; City; State; Zip Code	:)	Amount of Contribution (\$) \$1,000.00
	Principal occu	Tyler, TX 75709 pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Owner	,	Swann's Furniture & De	
	Date 12/08/2024	Full name of contributor out-of-state PAC (ID# Sween, Paul Contributor address; City; State; Zip Code	:)	Amount of Contribution (\$)
	Principal occu	Paradise Valley, AZ 85253 pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Bd. Member	& Senior Managing Partner	Dominium	
	Date 08/22/2024	Full name of contributor	C.	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Date 11/21/2024	Full name of contributor x out-of-state PAC (ID# T-Mobile PAC Contributor address; City; State; Zip Code Washington DC, DC 20004	: C00361758	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 53/73 Rpt: 56/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,000.00
_	Dein ein al. a. a.	Austin, TX 78759	O Frankrije (Construction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ TALHI Life Insurance PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ TBA Bank PAC - State Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ TEX HY-PAC Contributor address; City; State; Zip Code Houston, TX 77062-2918)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ TNLA PAC Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 54/73 Rpt: 57/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	ion Filers)
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ TREPAC/Texas Association of Realtors 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$15,000.00
•	Dringing oggu	Austin, TX 78768-2246	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions) 		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ TSAPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701-1665 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ TXCPA PAC Contributor address; City; State; Zip Code Addison, TX 75001			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Tamft Family PAC Contributor address; City; State; Zip Code Austin, TX 78701-1634			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Targa Resources Corp. Texas PAC Contributor address; City; State; Zip Code Houston, TX 77002)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 55/73 Rpt: 58/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/11/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,000.00
		Omaha, NE 68154				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Compassionate Healthcare PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78701-1600 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: Texas Academy of Physician Assistants (TAPA) Contributor address; City; State; Zip Code Austin, TX 78737			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Aggregates & Concrete Association PAC Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
		l				

	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: 56/73 Rpt: 59/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Agricultural Aviation Association AG-Air F 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Agricultural Cooperative Council PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Alliance for Life PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Pawn Brokers PAC Contributor address; City; State; Zip Code Crawford, TX 76638-3235			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 fo	orm.	1	Total pages Schedule A1: Sch: 57/73 Rpt: 60/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/18/2024	Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
_	Dein sin al a ser	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Chemistry Council/Texas Chemistry Allian Contributor address; City; State; Zip Code Austin, TX 78701-1586	nce FreePAC		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas College of Emergency Physicians PAC (E Contributor address; City; State; Zip Code	EMPACT)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	· 					
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: Texas Consumer Credit Coalition PAC Contributor address; City; State; Zip Code New Braunfels, TX 78131)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Cornerstone Credit Union League PAC Contributor address; City; State; Zip Code Dallas, TX 75265-5147)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION)NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 58/73 Rpt: 61/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/21/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Dringing	Austin, TX 78711	To Frankrije (God kretivskije)	_		
8	Рппсіраї осси	upation / Job title (See Instructions)	9 Employer (See Instructions)) 		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dental Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78704 upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Food & Fuel Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occi	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions			
	- molpai occa	pation 7 000 tale (Gee instructions)	Employer (See Instructions)			
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#: Texas Forestry Association PAC Contributor address; City; State; Zip Code Lufkin, TX 75902-1488)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	,)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Funeral Directors Association PAC Contributor address; City; State; Zip Code Austin, TX 78741			Amount of Contribution (\$)	\$2,500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	.)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDU	LE A1
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 59/73 Rpt: 62/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	 Full name of contributor out-of-state PAC (II Texas Health Care Association PAC (THCAF Contributor address; City; State; Zip Code 	PAC)	7	Amount of Contribution (\$)	\$5,000.00
_	<u> </u>	Austin , TX 78701		Ţ		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	IS)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (II Texas Homecare & Hospice PAC - State Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78759 pation / Job title (See Instructions)	Employer (See Instructions) (S)		
	r inicipal occu	pation / Job title (See Instructions)	Employer (See instructions	13)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (II Texas Impact, a CRH PAC Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78726				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (II Texas Leads PAC Contributor address; City; State; Zip Code Austin, TX 78767	D#:)		Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	l IS)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (II Texas Lobby Partners LLP Contributor address; City; State; Zip Code Austin, TX 78701-2132	D#:)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
			•			

	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: 60/73 Rpt: 63/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Manufactured Housing Assoc. PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78759				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	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)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringing! goog	Austin, TX 78701	Employer (Coo Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION)NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 61/73 Rpt: 64/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 11/21/2024	 Full name of contributor out-of-state PAC (ID#:_ Texas Mortgage Bankers PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5,000.00
	Dringing one	Austin, TX 78701	To Familiary (Coo Instructions			
8	Рппсіраї осси 	upation / Job title (See Instructions)	9 Employer (See Instructions)	S)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Nurse Practitioners PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78735 upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Oil and Gas Association Good Governme		T	Amount of Contribution (\$)	\$5,000.00
		Contributor address; City; State; Zip Code Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	s)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705			Amount of Contribution (\$)	\$10,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	s)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Physical Therapy Assn. PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78737 upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> s)		
			1			

	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: 62/73 Rpt: 65/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Poultry P.A.C. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	i illicipai occa	pation / vob title (oce monucularis)	Employer (See Matractions	,		
	Date 12/11/2024	Full name of contributor)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78757				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Radiological Society PAC Contributor address; City; State; Zip Code San Antonio, TX 78257)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Regional Bank Federal PAC Contributor address; City; State; Zip Code Harlingen, TX 78552			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 63/73 Rpt: 66/201
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission Filers) 00051630
4	Date 11/21/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$5,500.00
0	Dringing aggu	Austin, TX 78701	D. Employer (See Instructions	<u></u>	
0	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 Spine and Joint Hospital Ltd. PAC Contributor address; City; State; Zip Code		•	Amount of Contribution (\$) \$10,000.00
	Principal occu	Tyler, TX 75701 pation / Job title (See Instructions)	Employer (See Instructions	 s)	
		,			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Texas State Association of Fire Fighters PAC Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$) \$1,000.00
		Austin, TX 78701		Ĺ	
	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 State Wide Telephone Cooperative, Inc. P Contributor address; City; State; Zip Code Austin, TX 78701-1865			Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Telephone Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
		-			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 64/73 Rpt: 67/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_		Austin, TX 78746				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Water Quality Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Carrolton, TX 75006 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Wildlife Association PAC Contributor address; City; State; Zip Code New Braunfels, TX 78132			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas and Southwestern Cattle Raisers Assoc. Contributor address; City; State; Zip Code Fort Worth, TX 76185-1988)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: The American Electric Power Company-Texas Contributor address; City; State; Zip Code Washington, DC 20004			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL C	ONTRIBUTION	<u> </u>		SCHEDUI	_E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 65/73 Rpt: 68/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 10/07/2024	5 Full name of contributor [The Boeing Company PAC			7	Amount of Contribution (\$)	\$1,500.00
		Arlington, VA 22202					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor The Chickasaw Nation Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Ada, OK 74820 pation / Job title (See Instructions)		Employer (See Instructions	()		
		,			,		
	Date 10/11/2024	Full name of contributor [The Herrera Law Firm Inc. Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,500.00
		San Antonio, TX 78207	1				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor The Home Depot PAC Contributor address; City; Sta Washington, DC 20004	x out-of-state PAC (ID#: COC te; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor The Posey Law Firm, P.C. Contributor address; City; Sta Austin, TX 78701	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			L				

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 66/73 Rpt: 69/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	 Full name of contributor	÷)	7	Amount of Contribution (\$)	\$1,000.00
_	Deinsinal	Frisco, TX 75035	To Freehood (One hadronting			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor X out-of-state PAC (ID# The Travelers Companies, Inc. PAC Contributor address; City; State; Zip Code	±. <u>C00376376</u>)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Hartford, CT 06183 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
		,				
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID# The US Oncology Network PAC Contributor address; City; State; Zip Code	÷)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	The Woodlands, TX 77380 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	•	,				
	Date 12/14/2024	Contributor address; City; State; Zip Code	t:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Owner/Presi	Tyler, TX 75703 pation / Job title (See Instructions) dent	Employer (See Instructions Don's TV & Appliance	<u> </u> ;)		
	Date 10/11/2024	Full name of contributor X out-of-state PAC (ID# Toyota Motor North America, Inc. PAC, Toyota Contributor address; City; State; Zip Code Washington, DC 20004	a/Lexus PAC		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how t	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 67/73 Rpt: 70/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)			3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/13/2024	 Full name of contributor Tractor Supply Company P. Contributor address; City; State 		0763664)	7	Amount of Contribution (\$)	\$1,500.00
_		Brentwood, TN 37027					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Date 12/11/2024	Full name of contributor Tracy, Charles G. Contributor address; City; Stat)		Amount of Contribution (\$)	\$500.00
	Dringing aggr	Houston, TX 77005-2441	İ	Employer (See Instructions	_		
	Investor	pation / Job title (See Instructions)		OmniBase Services of T		as	
	Date 12/11/2024	Full name of contributor Tran, Thi A Contributor address; City; Stat	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77079					
	Volunteer	pation / Job title (See Instructions)		Employer (See Instructions Texas Community Asso	•	Advocates	
	Date 10/18/2024	Full name of contributor Trone, Robert Contributor address; City; Stat Bethesda, MD 20817				Amount of Contribution (\$)	\$3,000.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Total Wine & More	5)		
	Date 12/11/2024	Full name of contributor Troxclair PC Contributor address; City; Stat Austin, TX 78701	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 68/73 Rpt: 71/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Austin, TX 75801 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipal occu	sauoti / oob title (ooe matacaons)	2 Employer (See Instructions	,		
	Date 12/11/2024	Full name of contributor			Amount of Contribution (\$)	\$2,500.00
	D: : 1	Austin, TX 75801	- 1 (O) : ::			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#:_ Tx Chiropractic Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ TxANA PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor	C00064766)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 69/73 Rpt: 72/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	 Full name of contributor	C00164145)	7	Amount of Contribution (\$)	\$2,000.00
_	5	San Antonio, TX 78288-0453				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/11/2024	Full name of contributor X out-of-state PAC (ID#: CURION Pacific Corp. Fund For Effective Government Contributor address; City; State; Zip Code Washington, DC 20004	nent		Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Uzzell, Lonny Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Dringing Lagra	Tyler, TX 75703-4545	Franks var (Caa katrustia ra			
	Banker	pation / Job title (See Instructions)	Employer (See Instructions Southside Bank)		
	Date 11/21/2024	Full name of contributor X out-of-state PAC (ID#: 9 VSP Holding Co., Inc. PAC Contributor address; City; State; Zip Code Rancho Cordona, CA 95670	C00493502)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Verizon Communications Inc. Good Governmen Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1			
	The Instru	ction Guide explains how to complete tl	1	Total pages Schedule A1: Sch: 70/73 Rpt: 73/201		
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/14/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
		Birmingham, AL 35238-5014				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	s)		
	Date 12/11/2024	Full name of contributor		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	s)			
	Date Full name of contributor out-of-state PAC (ID#:) 12/06/2024 Waits, Ken Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Tyler, TX 75701 pation / Job title (See Instructions)	Employer (See Instruction	s)		
	Date 11/05/2024	Full name of contributor out-of-state PAC Walker, Lowell (The Honorable) Contributor address; City; State; Zip Code DeKalb, TX 75559	(ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Mayor	pation / Job title (See Instructions)	Employer (See Instruction City of DeKalb	s)		
	Date Full name of contributor out-of-state PAC (ID#: C00034595) 11/05/2024 Wells Fargo & Co. Employee PAC Contributor address; City; State; Zip Code Washington, DC 20006-3817				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 71/73 Rpt: 74/201			
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)	
4	Date 09/27/2024 5 Full name of contributor out-of-state PAC (ID#:) Wexler, Adam 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00		
_	Delicalization	Miami, FL 33130	<u> </u>	Faralaga (Octobration	<u></u>		
8	Chairman of	pation / Job title (See Instructions) the Board	9	Employer (See Instructions PrizePicks	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/14/2024 Whiteside Ph.D, C.H. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	Kilgore, TX 75662						
	Principal occupation / Job title (See Instructions) Employer (See Instruction Founder, retired Ana-Lab Corp.				5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00		
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID# Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$2,500.00
	Principal occupation / Job title (See Instructions) Employer (See Instruction				5)		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID# Wilkey, Stephen Contributor address; City; State; Zip Code Larue, TX 75770)		Amount of Contribution (\$)	\$250.00
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Self employed	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 72/73 Rpt: 75/201	
2	FILER NAME Hughes, D. I	Bryan (The Honorable)		3	Filer ID (Ethics Commission 00051630	on Filers)
4	Date 12/11/2024	<u> </u>		7	Amount of Contribution (\$)	\$2,000.00
_		Beaumont, TX 77705				
8	Principal occu	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions))		
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00	
	Mineola, TX 75773 Principal occupation / Job title (See Instructions) Employer (See Instruction					
	Retired Exxon		Exxon		Assessed of Oscidentians (A)	
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00	
		Mineola, TX 75773				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Exxon)		
Date Full name of contributor out-of-state PAC (ID#: 11/05/2024 Willson, Daniel Contributor address; City; State; Zip Code Tyler, TX 75703				Amount of Contribution (\$)	\$1,500.00	
Principal occupation / Job title (See Instructions) Founder & CEO Employer (See Instructions) Paradigm Homecare)		
Date Full name of contributor out-of-state PAC (ID#:) 11/07/2024 Wilson, Flora J. Contributor address; City; State; Zip Code Tyler, TX 75701-4123			Amount of Contribution (\$)	\$150.00		
Principal occupation / Job title (See Instructions) Employer (See Instructions)						

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 73/73 Rpt: 76/201	
2	FILER NAME Hughes, D. E	Bryan (The Honorable)		3	Filer ID (Ethics Commission Filers) 00051630	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Wine and Spirits Wholesalers of Texas PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$15,000.00		
		Austin 78701-2441 Namibia				
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)					
	Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Wynne III, James & Sharon (The Honorable) Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00		
	Principal occu	Tyler, TX 75701 pation / Job title (See Instructions)	<u> </u>			
Principal Wynne Building C						
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$) \$10,000.00		
	Dringing	Addison, TX 75001-4400	Francis (Co. Jacky skiego	<u></u>		
	Investor	pation / Job title (See Instructions)	Employer (See Instructions Self employed	»)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ ZACOPAC, Zachry Corp. PAC Contributor address; City; State; Zip Code San Antonio , TX 78265-3240)		Amount of Contribution (\$) \$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor x out-of-state PAC (ID#: Contributor address; City; State; Zip Code Wilmington, DE 19850-5437	C00279455)		Amount of Contribution (\$) \$1,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 77/201					
2 FILER NAME			3 Filer ID (Ethic	s Commission Filers)				
	Bryan (The Honorable)		00051630	,				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5 Date 12/08/2024	 Full name of contributor out-of-state PAC (ID#:	contribution (\$) \$20.00	9 In-kind contribution description I Membership dues for the Republican Women of Wood County for the year 2025. I Dutside of Texas. Complete Schedule T.					
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See ii	nstructions)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: TREPAC/Texas Association of Realtors Contributor address; City; State; Zip Code			In-kind contribution Contribution Advertising for fundraising Event in support of Senator Bryan Hughes				
	Austin, TX 78768-2246		Check if travel of	I butside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		nstructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: TREPAC/Texas Association of Realtors Contributor address; City; State; Zip Code			In-kind contribution description I Advertising for fundraising event in support of Senator Bryan Hughes				
	Austin, TX 78768-2246		Check if travel of	loutside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ii	nstructions)				
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions)								
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political 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		mmittee	Legal Services		Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed a	above)
	Credit Card Payment			The Instruction G	uide explains ho	w to con	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 1/82 Rpt: 78/201		Hughes, D.	Bryan (The Ho	norable)					00051630		
4	Date	5	Payee name									
	12/10/2024		7-Eleven - F	orney								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zin Cor	de.					
Ĭ	\$50.90	ľ	100A E. US		Otato,	p	40					
	400.00			, 55								
			Formou TV	7E106								
		<u> </u>	Forney, TX									
8	PURPOSE OF	(a)		ee Categories listed at		ule)	(b)	Description				
	EXPENDITURE		-	ion Equipment	And Related			=		officeholder living	nplete Schedule T.	
			Expense					Gasoline for I			g expense	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	ice soug	aht			Office h	eld	
	expenditure to benefit C/O						y .					
	Date	Π	Dayoo nama									
	07/10/2024		Payee name	ederal Credit U	Inion							
		_	Payee addre		State;	Zin Cor	40					
	Amount (\$)		,		,	Zip Cot	ue					
	\$1,226.05		10000 N. C	entral Expy., Su	iile 1400							
			5 II									
			Dallas, TX	75231-2319								
	PURPOSE OF	(a)		ee Categories listed at		ule)	(b)	Description				
	EXPENDITURE		Transportat Expense	ion Equipment	And Related			=		officeholder living	nplete Schedule T. g expense	
			Схрепве					Vehicle lease			5 - p	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	ice soug	ght			Office h	eld	
	expenditure to benefit C/O	Н										
	Date	Π	Payee name									
	08/12/2024		•	ederal Credit U	nion							
	Amount (\$)		Payee addre		State;	Zin Cod	de					
	\$1,226.05		•	entral Expy., Su	•	p						
	+ =,==0.00			-								
			Dallas, TX	75221-2210								
	DUDDOOF	(-)					/I- \					
	PURPOSE OF	(a)		ee Categories listed at		ule)	(D)	Description Check if travel	outsi	de of Texas Com	nplete Schedule T.	
	EXPENDITURE		Expense	ion Equipment	And Related			므		officeholder living		
								Vehicle lease)			
	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	ice souç	ght			Office h	eld	
	expenditure to benefit C/O	Н										

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: 2/82 Rpt: 79/201	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	09/10/2024	Advancial Federal Credit Union
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,226.05	10000 N. Central Expy., Suite 1400
		Dallas, TX 75231-2319
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Fxpense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense
		Vollidio locado
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/O	
-	Date	Dove name
	10/10/2024	Payee name Advancial Federal Credit Union
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,226.05	10000 N. Central Expy., Suite 1400
		Dallas, TX 75231-2319
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense
		Verilicie lease
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	11/12/2024	Advancial Federal Credit Union
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,226.05	10000 N. Central Expy., Suite 1400
		Dallas, TX 75231-2319
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Vehicle lease
		verille lease
_	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

t Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a contrary set listed above)

	Contributions/ Donations Made By 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: 3/82 Rpt: 80/201	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/10/2024	Advancial Federal Credit Union
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,226.05	10000 N. Central Expy., Suite 1400
		Dallas, TX 75231-2319
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense
		Vehicle lease
_	0 1. 5	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/13/2024	Amazon Marketplace
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.59	440 Terry Ave. N.
		Seattle, WA 98109
	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.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder matters
_	Commission ONE V. C. P.	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	· 	
	Date	Payee name
	08/19/2024	Amazon Marketplace
	Amount (\$)	Payee address; City; State; Zip Code
	\$358.76	440 Terry Ave. N.
		Seattle, WA 98109
	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 officeholder matters
_	Complete ONLY if allower	Condidate/Officeholder name Office assists
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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 co	ompl	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 4/82 Rpt: 81/201	Hughes, D. Bryan (The Honorable) 00051630					
4	Date	5 Payee name		-			
	09/10/2024	Amazon Marketplace					
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode				
	\$74.64	440 Terry Ave. N.					
		Seattle, WA 98109					
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.			
	EXI ENDITORE			Check if Austin, TX, officeholder living expense			
				Meeting to discuss officeholder matters			
0	Complete ONLY if direct	Candidate/Officeholder name Office so	laht	Office held			
9	Complete ONLY if direct expenditure to benefit C/OI		ugnt	Office field			
	Data						
	Date	Payee name					
	09/30/2024	Amazon Marketplace					
	Amount (\$)	Payee address; City; State; Zip Co	ode				
	\$14.24	440 Terry Ave. N.					
		Seattle, WA 98109					
	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 officeholder matters			
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>I</u> ught	Office held			
	expenditure to benefit C/OI						
	Date	Payee name					
	09/25/2024	Amazon Marketplace					
	Amount (\$)	Payee address; City; State; Zip Ci	ode				
	\$59.19	440 Terry Ave. N.					
	, , , ,						
		Seattle, WA 98109					
	PURPOSE		(h)	Description			
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(6)	Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	1 000/Deverage Expense		Check if Austin, TX, officeholder living expense			
				Meeting to discuss officeholder matters			
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held			
	expenditure to benefit C/OI	-					

SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committe Credit Card Payment			Food/Beverage Exper Gift/Awards/Memorial Legal Services The Instruction G	s Expense		xpens /ages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2 FILE	R NAME					3	Filer ID	(Ethics Commission Filer	s)
L	Sch: 5/82 Rpt: 82/201	Hugh	nes, D. Bryan (The Ho	norable)					00051630		
4	Date	5 Paye	e name								
	09/24/2024	Ama	zon Marketplace								
6	Amount (\$)	7 Paye	e address; City;	State;	Zip Co	de					
	\$259.71	440	Terry Ave. N.								
		Seat	tle, WA 98109								
8	PURPOSE	(a) Cate	gory (See Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		/Beverage Expense	,	,		<u> </u>		de of Texas. Comp		
	EXI ENDITORE								officeholder living		
							Meeting to dis	scu	ss officerioic	ier matters	
9	Complete ONLY if direct	Condia	late/Officeholder name		effico corr	ab+			Office he	Id	
9	Complete ONLY if direct expenditure to benefit C/O		late/Officeholder name		ffice sou	ynı			Office he		
	Date	Paye	e name								
	10/10/2024	Ama	zon Marketplace								
	Amount (\$)	Paye	e address; City;	State;	Zip Co	de					
	\$189.29	440	Terry Ave. N.								
		Seat	tle, WA 98109								
	PURPOSE	(a) Cate	JOry (See Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		/Beverage Expense				—		de of Texas. Comp		
							Meeting to dis		officeholder living		
							weeting to dis	scu	33 UIIICETIUIC	iei matters	
_	Complete ONLY if direct	Candid	late/Officeholder name		ffice sou	aht			Office he	ld	
	expenditure to benefit C/O		and official name	O	cc 30u	ອາເເ			Smoc ne		
_	Date	Dovo	nama								
	10/10/2024	,	e name zon Marketplace								
			•	Ctata	Zin Ca	do					
	Amount (\$) \$91.67	_	e address; City; Terry Ave. N.	State;	Zip Co	ue					
	Φ91.07	440	I CITY AVE. IV.								
		Seat	tle, WA 98109								
	PURPOSE	(a) Cate	JOry (See Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	Food	/Beverage Expense				ш		de of Texas. Comp officeholder living		
							Meeting to dis				
							g to die				
	Complete ONLY if direct	Candid	late/Officeholder name	0	ffice sou	ght			Office he	ld	
	expenditure to benefit C/OI			J		J			200 110		

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 Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (output a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 6/82 Rpt: 83/201	Hughes, D. Bryan (The Honorable) 00051630						
4	Date	5 Payee name						
	10/09/2024	Amazon Marketplace						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$51.21	440 Terry Ave. N.						
		Seattle, WA 98109						
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.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Meeting to discuss officeholder matters						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	11/06/2024	Amazon Marketplace						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$325.82	440 Terry Ave. N.						
		Seattle, WA 98109						
	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.						
	EXI ENDITORE	Check if Austin, TX, officeholder living expense						
		Reimburse Matthew Murdoch for office equipment						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Data							
	Date	Payee name						
	12/17/2024	Anedot, Inc.						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$78.30	450 Laurel St., Suite 2105						
		Baton Rouge, LA 70801						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Processing fee for credit card donation						
		1 rocessing fee for steak oard donation						
	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 C

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: 7/82 Rpt: 84/201	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/14/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		1 Toccssing fee for create early domains
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/O	
\vdash	Date	Dougo nomo
	12/14/2024	Payee name
		Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.80	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	D :	
	Date	Payee name
	12/14/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		Flocessing lee for clear donation
_	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 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 complete	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/82 Rpt: 85/201	Hughes, D. Bryan (The Honorable)	00051630
4	Date	5 Payee name	
	12/14/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$19.80	450 Laurel St., Suite 2105	
		Baton Rouge, LA 70801	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
	OF	Fees	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		P	Processing fee for credit card donation
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/13/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$29.55	450 Laurel St., Suite 2105	
		Baton Rouge, LA 70801	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense Processing fee for credit card donation
			rocessing fee for orealit daria donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	12/13/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$8.10	450 Laurel St., Suite 2105	
	Ψ0.10	400 Edulet St., Suite 2100	
		Baton Rouge, LA 70801	
	DUDD005		
	PURPOSE OF	, ,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees L	Check if Austin, TX, officeholder living expense
		P	Processing see for credit card donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/82 Rpt: 86/201	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/13/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.80	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
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
		Processing fee for credit card donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
	Date	Payee name
	12/12/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.80	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
		3 · · · · · · · · · · · · · · · · · · ·
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	1
	Date	Payee name
	12/12/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.80	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		1 Todassing fee for orealt data defiation
	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

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

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 10/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/10/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$195.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
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
		Processing fee for credit card donation
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Data	
	Date 12/09/2024	Payee name
		Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.80	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		1 100000111g 100 for order defiation
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
_	Date	Payee name
	12/07/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$975.30	450 Laurel St., Suite 2105
	ψ913.30	450 Laurer St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		1 Toccssing ice for creat card donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (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 complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 11/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/07/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
8	PURPOSE	(6) 0
•	OF	Category (See Categories listed at the top of this schedule) Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/07/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$195.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
	Opening the ONITY if allowed	Out district Office held a group of the state of the stat
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/06/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Processing fee for credit card donaton
	Complete ONII V if direct	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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/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: 12/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/04/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.80	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		1 Toccssing fee for create data donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/O	
-	Date	Dougo nama
		Payee name
	11/26/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$975.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		Processing fee for credit card donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	11/18/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
_	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 -

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: 13/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	11/10/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.25	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
		g to the state of
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/05/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	David and the second se
	Date 10/30/2024	Payee name Anedot, Inc.
	Amount (\$) \$1.08	Payee address; City; State; Zip Code 450 Laurel St., Suite 2105
	Ψ1.00	450 Laurer St., Suite 2105
		Baton Rouge, LA 70801
	DUDDOCE	Tax
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientare to benefit 6/01	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 14/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	10/29/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.20	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
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 Processing fee for credit card donation
		1 Todassing fee for orealt data defiation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Dove name
	10/28/2024	Payee name
		Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.08	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
_	_	
	Date	Payee name
	10/28/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.20	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
		Flocessing lee for clear donation
_	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 -

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	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: Sch: 15/82 Rpt:	2 FILER NAME Hughes, D. Bryan (The Honorable) 3 Filer ID (Ethics Commission Filers) 00051630
Ļ	-	
4	Date 10/27/2024	5 Payee name
		Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.08	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
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
		Processing fee for credit card donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	10/26/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.20	450 Laurel St., Suite 2105
	*	
		Baton Rouge, LA 70801
	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
		Processing fee for credit card donation
		3 · · · · · · · · · · · · · · · · · · ·
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	10/03/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.30	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	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
		Processing fee for credit card donation
		3 22 22 21 21 22 22 22 22 22 22 22 22 22
	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 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	plet	e this form.
1	Total pages Schedule F1: Sch: 16/82 Rpt:	FILER NAME Hughes, D. Bryan (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051630
4	Date 09/27/2024	5 Payee name Anedot, Inc.		
6	Amount (\$) \$97.80	7 Payee address; City; State; Zip Code 450 Laurel St., Suite 2105 Baton Rouge, LA 70801	Э	
8	PURPOSE OF EXPENDITURE	-		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fee for credit card donation
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	nt	Office held
	Date 09/21/2024	Payee name Anedot, Inc.		
	Amount (\$) \$39.30	Payee address; City; State; Zip Code 450 Laurel St., Suite 2105 Baton Rouge, LA 70801	Э	
	PURPOSE OF EXPENDITURE	-		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fee for credit card donation
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	nt	Office held
	Date 08/31/2024	Payee name Anedot, Inc.		
	Amount (\$) \$2.25	Payee address; City; State; Zip Code 450 Laurel St., Suite 2105	Э	
		Baton Rouge, LA 70801		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fee for credit card donation
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	nt	Office held

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 Legal Services 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	08/30/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.05	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/28/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.08	450 Laurel St., Suite 2105
		Baton Rouge, LA 70801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/28/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.28	450 Laurel St., Suite 2105
	¥-:	
		Baton Rouge, LA 70801
	PURPOSE	Tax
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Processing fee for credit card donation
	0 1: 0	
	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 - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al 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: 18/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630	
4	Date	5 Payee name	
	07/22/2024	Anedot, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.05	450 Laurel St., Suite 2105	
		Baton Rouge, LA 70801	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Processing fee for credit card donation	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	experialitare to benefit e/or		
	Date	Payee name	
	07/22/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.20	450 Laurel St., Suite 2105	
		Baton Rouge, LA 70801	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Processing fee for credit card donation	
		1 Tocessing fee for credit card doriation	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
+	Date	Payee name	_
	07/10/2024	Anedot, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.20	450 Laurel St., Suite 2105	
		Baton Rouge, LA 70801	
	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	
		Processing fee for credit card donation	
		1 Toccssing tee for credit card dollation	
_	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
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

sent Solicitation/Fundraising Expense
Iransportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card r dyment	The Instruction Guide explains how to con	nple	te this form.				
1	Total pages Schedule F1:	2 FILER NAME		3	I	Filer ID	(Ethics Commission File	ers)
	Sch: 19/82 Rpt:	Hughes, D. Bryan (The Honorable)			(00051630		
4	Date	5 Payee name						
	07/03/2024	Anedot, Inc.						
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de					
	\$12.00	450 Laurel St., Suite 2105						
		Baton Rouge, LA 70801						
8	PURPOSE	-	(b)	Description				
•	OF	Fees	(~)	Check if travel outs	side	e of Texas. Comp	plete Schedule T.	
	EXPENDITURE			Check if Austin, TX				
				Processing fee	fo	r credit car	d donation	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	jht			Office he	eld	
	experientare to benefit Grot	'						
	Date	Payee name						
	07/01/2024	Anedot, Inc.						
	Amount (\$)	Payee address; City; State; Zip Coo	de					
	\$2.25	450 Laurel St., Suite 2105						
		Baton Rouge, LA 70801						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees		Check if travel outs				
	LAI LINDITORE			Check if Austin, TX				
				Processing fee t	10	ii Creuit Cari	u uonalion	
	Complete ONLY if direct	Candidate/Officeholder name Office soug	tht			Office he	ald	
	expenditure to benefit C/OI		jiic			Office fie	aru -	
	Data							
	Date	Payee name						
	07/01/2024	Anedot, Inc.						
	Amount (\$)	Payee address; City; State; Zip Coc	de					
	\$2.25	450 Laurel St., Suite 2105						
		Baton Rouge, LA 70801						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	EXPENDITURE	Fees		Check if travel outs Check if Austin, TX				
				Processing fee				
				3				
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht			Office he	eld	
	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 Con

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/Political Committee Credit Card Payment			Legal Services The Instruction Guide explain		/ages	Contract Labor		OTHER (enter a	category not listed above	·)
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission	Filers)
	Sch: 20/82 Rpt:		Bryan (The Honorable)					00051630		•
4	Date	5 Payee name								
	07/01/2024	Anedot, Inc								
6	Amount (\$)	7 Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$58.80	450 Laurel	St., Suite 2105							
		Baton Rou	ge, LA 70801							
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	Fees				<u> </u>		de of Texas. Com		
						Processing fe		officeholder living		
						1 Toccssing ic		or credit car	a donation	
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	1								
	Date	Payee name								
	07/01/2024	Anedot, Inc								
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$4.20	450 Laurel	St., Suite 2105							
		Baton Rou	ge, LA 70801							
	PURPOSE OF	(a) Category (S	ee Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE	Fees						de of Texas. Comp officeholder living		
						Processing fe				
						1 roocssing ic		or orealt our	a donation	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI									
	Date	Payee name								
	08/06/2024	Bergfeld R	ealty							
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$404.26	110 N. Coll	ege Ave. #218							
		Tyler, TX 7	5702							
	PURPOSE OF		ee Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense					de of Texas. Comp officeholder living		
						Rent for Tyler			expense	
								J. 101 J11100		
-	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht			Office he	eld	
	expenditure to benefit C/OH									
-										
l										

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 compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/82 Rpt:	Hughes, D. Bryan (The Honorable)	00051630
4 Date	5 Payee name	•
09/04/2024	Bergfeld Realty	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$404.26	110 N. College Ave. #218	
	Tyler, TX 75702	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Onice Overneau/Rental Expense	Check if Austin, TX, officeholder living expense
		Rent for Tyler district office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
10/08/2024	Bergfeld Realty	
Amount (\$)	Payee address; City; State; Zip Code	
\$444.44	110 N. College Ave. #218	
	Tyler, TX 75702	
PURPOSE OF	, , ,	Description Chack if travel outside of Toyon, Complete Schodule T
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Rent for Tyler district office
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
experialitate to beliefft C/O		
Date	Payee name	
11/04/2024	Bergfeld Realty	
Amount (\$)	Payee address; City; State; Zip Code	
\$404.26	110 N. College Ave. #218	
	Tyler, TX 75702	
PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Rent for Tyler district office
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	H	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	al 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: 22/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/04/2024	Bergfeld Realty
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$404.26	110 N. College Ave. #218
		Tyler, TX 75702
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
		Rent for Tyler district office
		Them for Tyles district emice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	07/05/2024	Bergfeld Realty
H	Amount (\$)	Payee address; City; State; Zip Code
	\$404.26	110 N. College Ave. #218
		Tyler, TX 75702
	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
		Rent for Tyler district office
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/06/2024	Brazos Stamp and Engraving
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$129.90	1407 S. 31st St., Suite D
		Temple, TX 76504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE	Check if Austin, TX, officeholder living expense
		Engraving
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
I		

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category not listed above)

	Candidate/Officeholder/Politica			Legal Services		g Exper s/Wage	es/Contract Labor		OTHER (enter a	strict a category not listed above)	
	Credit Card Payment			The Instruction Gu	iide explains how to	comp	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission File	ers)
	Sch: 23/82 Rpt:		Hughes, D.	Bryan (The Hon	orable)				00051630		
4	Date	5	Payee name					_			
	07/08/2024			nbuch Campaig	n						
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Code					
	\$2,500.00		2800 Shorel	ine Dr., #310							
			Denton, TX	76210							
8	PURPOSE	(a)	Category (so	e Categories listed at th	oo top of this schodule)	(b)) Description				
	OF	<u> `</u> ´		Memorials Exp		`	_ `	outsi	ide of Texas. Con	plete Schedule T.	
	EXPENDITURE			·			ш	, TX,	, officeholder living	g expense	
							Contribution				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Office s	ought	t		Office h	eld	
	Date		Payee name								
	10/07/2024		Buc-ee's #3	6 Terrell							
	Amount (\$)		Payee address		State; Zip	Code					
	\$53.07		506 W. IH20)							
			Terrell, TX 7	'5160							
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(b)) Description				
	OF EXPENDITURE			on Equipment A	And Related		<u> </u>		ide of Texas. Con , officeholder livin	plete Schedule T.	
			Expense				Gasoline for l			g expense	
	Complete ONLY if direct		 Candidate/Offic	ceholder name	Office s	 ought	<u> </u>		Office h	eld	
	expenditure to benefit C/OI	Η				-					
	Date	Π	Payee name								
	09/30/2024		Buc-ee's #3	6 Terrell							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$57.85		506 W. IH20	•	,						
			Terrell, TX 7	'5160							
	PURPOSE	┝		e Categories listed at th		(b)) Description				
	OF	(۳)		e Categories listed at tr on Equipment A		(5)		outsi	ide of Texas. Con	nplete Schedule T.	
	EXPENDITURE		Expense	on Equipmont?	and resideod		Check if Austin	, TX,	, officeholder living	g expense	
							Gasoline for I	leas	sed vehicle		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Office s	ought	t		Office h	eld	
	onponditure to beliefft G/Of	•									

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/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: 24/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	11/18/2024	Buc-ee's #36 Terrell
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.57	506 W. IH20
		Terrell, TX 75160
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense
		Sussifie for leased verified
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	•	
	Date	Payee name
	12/18/2024	CEFCO 0078
	Amount (\$)	Payee address; City; State; Zip Code
	\$66.79	5011 Troup Hwy.
		Tyler, TX 75701
	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.
		Expense
		Gasonile for leased vehicle
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
	Date	Payee name
	09/09/2024	Cava Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$72.53	515 Congress Ave., Suite 140
		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 officeholder matters
	Complete ONLY if allowers	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 2 25 3/01	

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: 25/82 Rpt:	2 FILER NAME Hughes, D. Bryan (The Honorable) 3 Filer ID (Ethics Commission Filers) 00051630
4	Date	5 Payee name
	12/10/2024	Cavender's Boot City
6	Amount (\$) \$235.72	7 Payee address; City; State; Zip Code 4435 S. Lamar Blvd. Austin, TX 78745
8	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 Charity donation items
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/12/2024	Chevron #03004917 Conroe
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.97	19153 I45 S.
	DUPPOS	Conroe, TX 77385
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense Gasoline for leased vehicle
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/29/2024	Chevron Dallas
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.63	4151 N. Central Expy.
		Dallas, TX 75204
	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. Expense Check if Austin, TX, officeholder living expense
		Expense
		Sussific for leased verifice
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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 co	mplete	this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	•	3 Filer ID (Ethics Commission Filers)
Sch: 26/82 Rpt:	Hughes, D. Bryan (The Honorable)		00051630
4 Date	5 Payee name		1
08/02/2024	Chick-FIL-A Austin #02992		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$23.76	503 W. Martin Luther King Jr. Blvd.		
	Austin, TX 78701-1123		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription
OF EXPENDITURE	Food/Beverage Expense	`	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE			Check if Austin, TX, officeholder living expense
		I M	Meeting to discuss officeholder matters
		<u> </u>	0"
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ıght	Office held
Date	Payee name		
09/11/2024	Chick-FIL-A Austin #02992		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$47.69	503 W. Martin Luther King Jr. Blvd.		
	Austin, TX 78701-1123		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	escription
OF EXPENDITURE	Food/Beverage Expense	I ⊑	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		l L M	deeting to discuss officeholder matters
			.com g to allocate officeriolate manage
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>I</u> ıght	Office held
expenditure to benefit C/OI		3	
Date	Payee name		
09/09/2024	Chick-FIL-A Austin #02992		
Amount (\$)	Payee address; City; State; Zip Co	nde	
\$44.88	503 W. Martin Luther King Jr. Blvd.	Juc	
Ψ-1-1.00	See W. Wartin Lattier King Gr. Biva.		
	Austin, TX 78701-1123		
DUDDOCE		(6) 5	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(0) D	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	FOOU/Beverage Expense		Check if Austin, TX, officeholder living expense
		М	Meeting to discuss officeholder matters
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight	Office held
expenditure to benefit C/OI	H		

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 Cara r ayment	The Instruction Guide explains how to com	nple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 27/82 Rpt:	Hughes, D. Bryan (The Honorable)		00051630			
4	Date	5 Payee name		•			
	10/11/2024	Chick-FIL-A Austin #02992					
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le				
	\$22.30	503 W. Martin Luther King Jr. Blvd.					
		Austin, TX 78701-1123					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF	Food/Beverage Expense	• •	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE			Check if Austin, TX, officeholder living expense			
				Meeting to discuss officeholder matters			
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ht	Office held			
	Date	Payee name					
	11/25/2024	Chick-FIL-A Austin #02992					
	Amount (\$)	Payee address; City; State; Zip Cod	le				
	\$16.97	503 W. Martin Luther King Jr. Blvd.					
		Austin, TX 78701-1123					
	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 officeholder matters			
				Meeting to discuss officeriolder matters			
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held			
	expenditure to benefit C/O	9	, i i c	Office field			
-	Data	Device name					
	Date 11/18/2024	Payee name Chick-FIL-A Austin #02992					
	Amount (\$)	Payee address; City; State; Zip Cod	ie				
	\$24.01	503 W. Martin Luther King Jr. Blvd.					
		Austin, TX 78701-1123					
	PURPOSE OF	, ,	(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 officeholder matters			
H	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held			
	expenditure to benefit C/O	9					
H							
ı							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
ᆫ		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	s)
	Sch: 28/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630	
4	Date	5 Payee name	
	10/10/2024	Chick-FIL-A Austin #02992	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	\$179.11	503 W. Martin Luther King Jr. Blvd.	
	Ψ175.11	303 W. Martin Edition King St. Bivd.	
		Austin, TX 78701-1123	
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 officeholder matters	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/Oi		
	Date	Payee name	
	11/22/2024	Chick-FIL-A Austin	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$11.89	24th & Guadalupe	
	¥==:33		
		Austin TV 70712	
		Austin, TX 78713	
	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 officeholder matters	
		Weeting to discuss emberious matters	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
L	<u> </u>		
	Date	Payee name	
	11/15/2024	Circle K Gas Station - Waco	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$52.84	6312 I-35 N.	
		Waco, TX 76705	
\vdash	PURPOSE	To a second seco	
	OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense	
		Gasoline for leased vehicle	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
1	expenditure to benefit C/OI		
\vdash			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 29/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630					
4	Date	5 Payee name					
	07/16/2024	Citi Cards					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$1,440.62	PO Box 78045					
		Phoenix, AZ 85062-8045					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Credit Card Payment Credit Card Payment Credit Card Payment					
		Check if Austin, TX, officeholder living expense Payment of campaign/officeholder expenses					
		charged to credit card					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9	expenditure to benefit C/OI						
_	Data						
	Date	Payee name					
	07/05/2024	Citi Cards					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,805.67	PO Box 78045					
		Phoenix, AZ 85062-8045					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Credit Card Payment Credit Card Payment Credit Card Payment					
		Check if Austin, TX, officeholder living expense Payment of campaign/officeholder expenses					
		charged to credit card					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
_	Date	Device same					
	08/14/2024	Payee name Citi Cards					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$665.89	PO Box 78045					
		Phoenix, AZ 85062-8045					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Payment of campaign/officeholder expenses					
		charged to credit card					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

l	Credit Card Payment		The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 30/82 Rpt:		Hughes, D. Bryan (The Honorable)		00051630
4	Date	5	Payee name		
L	09/05/2024		Citi Cards		
6	Amount (\$)	7	Payee address; City; State; Zip Co	de	
	\$1,178.44		PO Box 78045		
l					
L			Phoenix, AZ 85062-8045		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE		Credit Card Payment		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Payment of campaign/officeholder expenses
					charged to credit card
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	Н			
Г	Date		Payee name		
	10/15/2024		Citi Cards		
	Amount (\$)		Payee address; City; State; Zip Co	de	
l	\$1,185.78		PO Box 78045		
			Phoenix, AZ 85062-8045		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Credit Card Payment		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Payment of campaign/officeholder expenses
					charged to credit card
┝	Complete ONLY if direct		Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	Н		•	
F	Date		Payee name		
	11/05/2024		Citi Cards		
	Amount (\$)		Payee address; City; State; Zip Co	de	
	\$171.90		PO Box 78045		
			Phoenix, AZ 85062-8045		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Credit Card Payment		Check if travel outside of Texas. Complete Schedule T.
l					Check if Austin, TX, officeholder living expense Payment of campaign/officeholder expenses
					charged to credit card
H	Complete ONLY if direct		Candidate/Officeholder name Office sou	<u>l</u> ight	Office held
	expenditure to benefit C/OI	Н		-	

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·			
	Sch: 31/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630			
4	Date	5 Payee name			
	11/04/2024	Citi Cards			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$680.08	PO Box 78045			
		Phoenix, AZ 85062-8045			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Payment of campaign/officeholder expenses			
		charged to credit card			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H			
	Date	Payee name			
	12/04/2024	Citi Cards			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,929.87	PO Box 78045			
		Phoenix, AZ 85062-8045			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Payment of campaign/officeholder expenses			
		charged to credit card			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	12/23/2024	City of Austin Parking Meters			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$3.40	PO Box 1088			
		Austin, TX 78767-1088			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Parking expense			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 32/82 Rpt:	Hughes, D. Bryan (The Honorable)	00051630
4	Date	5 Payee name	•
	08/13/2024	City of Austin Parking Meters	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$3.40	PO Box 1088	
		Austin, TX 78767-1088	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Parking expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
\vdash	Date		
	07/02/2024	Payee name Constant Contact	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$154.57	1601 Trapelo Rd., Ste. 329	
		Waltham, MA 02451-7357	
	PURPOSE OF	(Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Email service
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	08/02/2024	Constant Contact	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$154.57	1601 Trapelo Rd., Ste. 329	
		·	
		Waltham, MA 02451-7357	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Email service
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Orange to bonom of or	•	

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction Gu	Sal	_	es/Co	ontract Labor		OTHER (enter a	a category not listed	above)
Ļ		-			and explains now	to comp	ictc		_		(=u : 0	=, .
1	, -	2	FILER NAME						3	Filer ID	(Ethics Comm	ission Filers)
l	Sch: 33/82 Rpt:	l	Hughes, D.	Bryan (The Hor	norable)					00051630		
4	Date	5	Payee name					•				
l	09/03/2024	l	Constant C									
Ļ		_			Ctata: 7:	in Code						
ľ	Amount (\$)	'	Payee addre		State; Zi	p Code						
l	\$167.36	l	1601 Trape	elo Rd., Ste. 329								
l		l										
l		l	Waltham, N	MA 02451-7357								
8	PURPOSE	(a)	Category (c	ee Categories listed at t	ha tan af this ashadula	, (b) D	escription				
ľ	OF	``		ee Calegories listed at t head/Rental Exp			, _L	_ '	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE	l	Office Over	nead/itental Exp	perise		F	d		officeholder livin		
		l					Ē	mail service				
		l										
9	Complete ONLY if direct	Ц,	Candidate/Off	iceholder name	Office	e sough	t			Office h	n l l	
ľ	expenditure to benefit C/OI		Carialaatc/On	iccholaci name	Onici	c sough				Office in	Ciu	
L		_										
	Date	l	Payee name									
	10/02/2024		Constant C	ontact								
	Amount (\$)		Payee addre	ss; City;	State; Zi	p Code						
	\$165.48	l	1601 Trape	lo Rd., Ste. 329								
		l	•									
		l	Maltham N	4A 024E1 72E7								
L		L	vvaiiiiaiii, iv	1A 02451-7357								
	PURPOSE OF	(a)	Category (S	ee Categories listed at t	he top of this schedule	e) (b) D	escription				
l	EXPENDITURE	l	Office Over	head/Rental Exp	pense		Ļ	╛			nplete Schedule T.	
		l					닏			officeholder livin	g expense	
								mail service				
ᆫ												
l	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	Office	e sough	t			Office h	eld	
	experialture to benefit C/Oi											
	Date		Payee name									
	11/04/2024	l	Constant C	ontact								
┝	Amount (\$)	┢	Payee addre	ss; City;	State: Zi	n Code						
l	\$165.48	l	-	elo Rd., Ste. 329	•	p couc						
l	φ105.40	l	1001 Hape	10 Ru., Ste. 329								
		l										
l		l	Waltham, N	1A 02451-7357								
	PURPOSE	(a)	Category (S	ee Categories listed at t	he top of this schedule	(b) D	escription	-			
l	OF EXPENDITURE	l		head/Rental Ex				Check if travel o	outsi	de of Texas. Cor	nplete Schedule T.	
l	EXPENDITURE	l								officeholder livin	g expense	
		l					Е	mail service				
1												
	Complete ONLY if direct		Candidate/Off	iceholder name	Office	e sough	t			Office h	eld	
	expenditure to benefit C/OI	Н										
\vdash												
l												
ı												

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 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: 34/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/02/2024	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$165.48	1601 Trapelo Rd., Ste. 329
		Waltham, MA 02451-7357
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 Email service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/04/2024	DeWoody, Reece
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	17578 CR 366
		Winona, TX 75792
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Date	Payee name
	11/13/2024	Don's TV & Appliances
	Amount (\$)	Payee address; City; State; Zip Code
	\$477.29	6714 S. Broadway
	¥=0	
		Tyler, TX 75703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Repair of equipment.
	0 1: 0	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense 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 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: 35/82 Rpt: Hughes, D. Bryan (The Honorable) 00051630 4 Date Payee name 10/07/2024 Enchiladas Y Mas Restaurant 6 Amount (\$) Payee address; Citv: State; Zip Code \$95.27 1911 W. Anderson Ln. Austin, TX 78757 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 Meeting to discuss officeholder matters Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/11/2024 Exxon Highland - Austin Amount (\$) Payee address; City; State; Zip Code \$67.20 4511 Airport Blvd. Austin, TX 78751 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Gasoline for leased vehicle Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/13/2024 Exxon Joe Bob's #4 Amount (\$) Payee address: City; State; Zip Code \$47.84 Hwy 19 & FM 71 Sulphur Springs, TX 75482 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Gasoline for leased vehicle 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 Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)
	Sch: 36/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630	
4	Date	5 Payee name	
	09/03/2024	Exxon Mart 15, Gun Barrel City	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$59.53	103 W. Main St.	
		Gun Barrel City, TX 75156	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Transportation Equipment And Related	
		Expense Check if Austin, TX, officeholder living expense Gasoline for leased vehicle	
		Gasoline for leased verticle	
L			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	experientare to some exer-		
	Date	Payee name	
	07/22/2024	FedEx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$36.42	PO Box 660481	
		Dallas, TX 75266-0481	
	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 Postage	
		r Ostaye	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	09/14/2024	FedEx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.02	PO Box 660481	
		Dallas, TX 75266-0481	
	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	
		Postage	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experialitate to bettern over	''	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	<u> </u>				
	Sch: 37/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630				
4	Date	5 Payee name				
	11/22/2024	FedEx				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$396.52	PO Box 660481				
		Dallas, TX 75266-0481				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense				
	LAFENDITORE	Check if Austin, TX, officeholder living expense				
		Postage				
_						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	12/05/2024	FedEx				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$45.33	PO Box 660481				
		Dallas, TX 75266-0481				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		Postage				
	Complete ONLY if direct	Condidate/Officeholder name Office county Office hold				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date	Payee name				
	09/26/2024	Fetii				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$53.68	3701 Brazos				
		Austin, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense				
		Taxi				
	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 Com

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

	Candidate/Officeholder/Politica		OTHER (enter a category not listed above)			
	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 38/82 Rpt:	Hughes, D. Bryan (The Honorable)	00051630			
4	Date	5 Payee name				
	07/16/2024	Flowers Davis PLLC				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
ľ	\$200.00	1021 ESE Loop 323, Suite 200				
	Ψ200.00	1021 E01 200p 020, Ounto 200				
		T. Joy TV 75701				
		Tyler, TX 75701				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Office Overfiedd// terital Experise	outside of Texas. Complete Schedule T. , TX, officeholder living expense			
		,	eola district office			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI		Cindo noid			
\vdash	Date	Payee name				
	08/02/2024	Flowers Davis PLLC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$400.00	1021 ESE Loop 323, Suite 200				
		Tyler, TX 75701				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Office Overficad/Nertial Experise	outside of Texas. Complete Schedule T. , TX, officeholder living expense			
			eola district office			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI					
-	Date	Davido nama				
	12/26/2024	Payee name Fresh Fuel Gas Station #801				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$46.47	6991 Old Jacksonville Hwy				
		Tyler, TX 75703				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Transportation Equipment / the Related	outside of Texas. Complete Schedule T. , TX, officeholder living expense			
		Prince P	leased vehicle			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

ent Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 39/82 Rpt:	Hughes, D. Bryan (The Honorable)		00051630
4	Date	5 Payee name		•
	08/08/2024	Gibson, Emma		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$300.00	530 St. Marys Rd.		
		Rosanky, TX 78953		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Contract labor
_			<u>ا</u>	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
	Date	Payee name		
	08/08/2024	Gibson, Emma		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$100.00	530 St. Marys Rd.		
		Rosanky, TX 78953		
	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.
	LAI LINDITORE			Check if Austin, TX, officeholder living expense
				Salary
	Complete ONLY if direct	Candidate/Officeholder name Office so	Light	Office held
	expenditure to benefit C/O		ugni	Office field
_	5.		_	
	Date	Payee name		
	09/30/2024	Gibson, Emma		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$200.00	530 St. Marys Rd.		
		Rosanky, TX 78953		
	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 Salary for Aug & Sept
				Salary for May & Sopt
	Complete ONLY if direct	Candidate/Officeholder name Office so	Light	Office held
	expenditure to benefit C/O		agrit	Onice neiu

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/Officenoider/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 40/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4 Date	5 Payee name
12/31/2024	Gibson, Emma
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 530 St. Marys Rd.
	Rosanky, TX 78953
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Salary for Oct, Nov & Dec
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/08/2024	Gollob Morgan Peddy
Amount (\$) \$550.00	Payee address; City; State; Zip Code 1001 ESE Loop 323, Suite 200
	Tyler, TX 75701
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 Tax document preparation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/03/2024	Gollob Morgan Peddy
Amount (\$) \$550.00	Payee address; City; State; Zip Code 1001 ESE Loop 323, Suite 200
	Tyler, TX 75701
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 Tax document preparation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total manage Coloradula 54	
1	Total pages Schedule F1:	
L	Sch: 41/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	07/05/2024	Google Adwords Support
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$122.80	1600 Amphitheatre Pkwy.
	Ψ122.00	1000 Amphiliteatie i kwy.
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Email service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	- 1
H	Date	Payee name
		Payee name
	08/05/2024	Google Adwords Support
	Amount (\$)	Payee address; City; State; Zip Code
	\$122.80	1600 Amphitheatre Pkwy.
		Mountain View, CA 94043
	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
		Email service
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	· ·
	Date	Payee name
	09/05/2024	Google Adwords Support
	Amount (\$)	Payee address; City; State; Zip Code
	\$122.80	1600 Amphitheatre Pkwy.
		Mountain View, CA 04042
		Mountain View, CA 94043
	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
		Email service
	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 Comm

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

Total pages Schedule F1: Sch: 42/82 Rpt: Hughes, D. Bryan (The Honorable) 4 Date 10/07/2024 6 Amount (\$) 7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy.	5)					
4 Date 5 Payee name Google Adwords Support 6 Amount (\$) 7 Payee address; City; State; Zip Code						
10/07/2024 Google Adwords Support 6 Amount (\$) 7 Payee address; City; State; Zip Code						
6 Amount (\$) 7 Payee address; City; State; Zip Code						
\$122.80 1600 Amphitheatre Pkwy.						
Mountain View, CA 94043						
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 Email service						
Email Service						
O Complete ONLY if the et al. One district Office held						
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date Payee name						
11/05/2024 Google Adwords Support						
Amount (\$) Payee address; City; State; Zip Code						
\$122.80 1600 Amphitheatre Pkwy.						
Mountain View, CA 94043						
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (c) Category (See Categories listed at the top of this schedule) (b) Description						
Office Overhead/Rental Expense EXPENDITURE Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Email service						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH						
Date Pavee name	_					
12/05/2024 Google Adwords Support						
Amount (\$) Payee address; City; State; Zip Code						
\$122.80 1600 Amphitheatre Pkwy.						
Mountain View, CA 94043	_					
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, 1X, officenoider living expense						
Email service						
Operation ONLY if allow the Constitute (Office helders are as a Ciff						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
5.p5.18.8.0 to 55.16.1 G/G/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

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: 43/82 Rpt:	Hughes, D. Bryan (The Honorable)				
-					
4 Date	5 Payee name				
10/02/2024	Griswold, Candice				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$3,599.00	20 Pine St., Apt. 1012				
	New York, NY 10005				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)				
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense				
	Rent for Austin apartment				
	Tronk for Alabam aparament				
O Complete ONLY if alice -4	Candidate/Officeholder name Office acusts				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
11/04/2024	Griswold, Candice				
Amount (\$)	Payee address; City; State; Zip Code				
\$3,599.00	20 Pine St., Apt. 1012				
	New York, NY 10005				
	_				
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. X Check if Austin, TX, officeholder living expense				
	x Check if Austin, TX, officeholder living expense Rent for Austin apartment				
	None for Additi apartment				
Complete ONLY if direct	Candidate/Office held				
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
•					
Date	Payee name				
12/02/2024	Griswold, Candice				
Amount (\$)	Payee address; City; State; Zip Code				
\$3,599.00	20 Pine St., Apt. 1012				
	New York, NY 10005				
DUDDOCE					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Rent for Austin apartment				
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 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	omple	ete this form.		
1	Total pages Schedule F1:	FILER NAME Hughes, D. Bryan (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051630		
	Sch: 44/82 Rpt:	, , ,		00051050		
4	Date	5 Payee name				
	07/02/2024	Griswold, Candice				
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode			
	\$3,899.00	20 Pine St., Apt. 1012				
		New York, NY 10005				
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		
				Austin apartment rent		
				The state of the s		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held		
	experiulture to beliefit C/Oi	1				
	Date	Payee name				
	08/02/2024	Griswold, Candice				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$3,899.00	20 Pine St., Apt. 1012				
		New York, NY 10005				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.		
	LXI LINDITORL			Check if Austin, TX, officeholder living expense		
				Austin apartment rent		
			<u> </u>			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held		
	Date	Payee name				
	09/03/2024	Griswold, Candice				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$3,899.00	20 Pine St., Apt. 1012				
		New York, NY 10005				
	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		
				Austin apartment rent		
				A Lacture Special Control Control		
-	Complete ONLY if direct	Candidate/Officeholder name Office sou	lapt	Office held		
	expenditure to benefit C/OI		agrit	Office field		

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/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: 45/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	10/24/2024	H-E-B Online
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$177.40	646 S. Flores St.
		San Antonio, TX 78204
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 officeholder matters
		mooting to disease emechanisms matter
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Date	Payee name
	08/21/2024	Payee name Hochheim Prairie Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,196.00	500 US Hwy 77A S.
		Yoakum, TX 77995-1399
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Automobile insurance
		/ laternosite insurance
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	Davies same
	Date 09/09/2024	Payee name Hochheim Prairie Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$111.21	500 US Hwy 77A S.
		Yoakum, TX 77995-1399
	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 Tyler district office insurance
		Tyler district office fristratice
	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 -

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	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: 46/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	10/09/2024	Hochheim Prairie Insurance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$111.21	500 US Hwy 77A S.
		Yoakum, TX 77995-1399
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 Insurance for Tyler district office
		insurance for Tyler district office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/12/2024	Hochheim Prairie Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$111.21	500 US Hwy 77A S.
		Yoakum, TX 77995-1399
	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
		Insurance for Tyler district office
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г	Date	Payee name
	12/09/2024	Hochheim Prairie Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$111.21	500 US Hwy 77A S.
		Yoakum, TX 77995-1399
	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
		Insurance for Tyler district office
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
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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 Con-

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	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:	
	Sch: 47/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	11/05/2024	Holly Lake Hawkins Republican Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1406 Valleywood Trail
		Holly Lake Ranch, TX 75765
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Event sponsorship
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit Groi	
	Date	Payee name
	09/14/2024	Hopkins County GOP
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1124 CR 1107
		Sulphur Springs, TX 75482
	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
		Event sponsorship
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	09/03/2024	Hughes, Bryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	P.O. Box 450
		Mineola, TX 75773
	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
		Reimbursement for sponsorship for Texas Young Republicans
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	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: 48/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	10/28/2024	Jiffy Lube #4155
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.65	8001 S. Broadway Ave.
		Tyler, TX 75703
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Automotive service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	09/18/2024	Jimmy John's #491
	Amount (\$)	Payee address; City; State; Zip Code
	\$57.70	515 Congress, Ste. 1200
		Austin, TX 78701
	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 Meeting to discuss officeholder matters
		Weeting to disease emberrolaer matters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/05/2024	Juan In A Million
	Amount (\$)	Payee address; City; State; Zip Code
	\$198.43	2300 E. Cesar Chavez St.
		Austin, TX 78702
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder matters
	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 Con-

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 49/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	11/06/2024	Juan In A Million
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$185.20	2300 E. Cesar Chavez St.
		Austin, TX 78702
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimburse Cody Terry for meeting to discuss
		officeholder matters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/27/2024	Lyft
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.71	548 Market St.
		San Francisco, CA 94104
	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
		Taxi service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/10/2024	Lyft
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.62	548 Market St.
	Ψ10.02	546 Mainet St.
		San Francisco, CA 94104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Taxi service
	Complete ONLY if direct	Candidate/Officeholder name Office sought
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

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		Legal Services The Instruction Guide ex	Salaries/\	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	<u> </u>				3	Filer ID	(Ethics Commission	Filers)
	Sch: 50/82 Rpt:		Bryan (The Honorab	le)				00051630		•
4	Date	5 Payee name								
	07/26/2024	McGuffin, I	sabel							
6	Amount (\$) \$100.00	7 Payee addre		State; Zip Co	ode					
	Ψ100.00	227 Wony 1	aric							
		Mineola, T	< 75773							
8	PURPOSE OF		ee Categories listed at the top o	of this schedule)	(b)	Description		df.T O	oloto Cob odulo T	
	EXPENDITURE	Salaries/W	ages/Contract Labor					de of Texas. Comp officeholder living		
						Salary	,,	omoonoider iiviilg	скропос	
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ight			Office he	eld	
	Date	Payee name								
	08/26/2024	McGuffin, I	sabel							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$100.00	227 Molly L	ane							
		Mineola, T	K 75773							
	PURPOSE OF		ee Categories listed at the top o	of this schedule)	(b)	Description				
	EXPENDITURE	Salaries/W	ages/Contract Labor			=		de of Texas. Comp officeholder living		
						Salary	, 17,	onicendider living	схрепзе	
						, ,				
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ıght			Office he	eld	
		1								
	Date	Payee name								
	09/26/2024	McGuffin, I	sabel 							
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$100.00	227 Molly L	.ane							
		Mineola, T	< 75773							
	PURPOSE	(a) Category (s	ee Categories listed at the top o	of this cohodulo)	(b)	Description				
	OF		ages/Contract Labor	iriis scriedule)	()		outsi	de of Texas. Com	olete Schedule T.	
	EXPENDITURE					Check if Austin	, TX,	officeholder living	expense	
						Salary				
					Ļ					
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ıght			Office he	eld	
	· 									

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: 51/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	10/28/2024	McGuffin, Isabel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	227 Molly Lane
		Mineola, TX 75773
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Salary
		Salary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	David and the second
	11/26/2024	Payee name
L		McGuffin, Isabel
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	227 Molly Lane
		Mineola, TX 75773
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TV officeholder living average.
		Check if Austin, TX, officeholder living expense Salary
		Calary
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/26/2024	McGuffin, Isabel
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	227 Molly Lane
	¥200.00	
		Mineola, TX 75773
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Salary
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to benefit C/OI	<u> </u>
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total names Oct 11 51	
1	Total pages Schedule F1: Sch: 52/82 Rpt:	2 FILER NAME Hughes, D. Bryan (The Honorable) 3 Filer ID (Ethics Commission Filers) 00051630
Ļ	·	
4	Date	5 Payee name
	07/09/2024	Microsoft (Dallas)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.25	91 Main St., 8th Floor
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/09/2024	Microsoft (Dallas)
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.25	91 Main St., 8th Floor
		Dallas, TX 75202
\vdash	DUDDOCE	I
	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
		Software
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	09/09/2024	Microsoft (Dallas)
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.25	91 Main St., 8th Floor
		Dallas, TX 75202
	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
		Software
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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	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: 53/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	10/09/2024	Microsoft (Dallas)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.25	91 Main St., 8th Floor
		Dallas, TX 75202
8	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
		Software
		Silvas
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/12/2024	Microsoft (Dallas)
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.25	91 Main St., 8th Floor
		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
		Software
		Silvas
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
⊨	Data	
	Date	Payee name Microsoft (Pollos)
	12/09/2024	Microsoft (Dallas)
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.25	91 Main St., 8th Floor
		Dallas, TX 75202
	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 Software
		Juliware
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Gift/Awards/Memorials Ex Legal Services	Salaries	/Wage	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
Ļ		I	The Instruction Guid	e expiairis now to c	ompl	ete tilis iOIIII.	1.		/=::: a =:: :
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)
	Sch: 54/82 Rpt:	Hughes,	D. Bryan (The Hono	rable)				00051630	
4	Date	5 Payee na	me						
	07/17/2024	Mineola	Flower Shop						
6	Amount (\$)	7 Payee ad	dress; City;	State; Zip C	ode				
	\$110.00		Broad St.	•					
		Mineola	TX 75773						
8	PURPOSE				(h)	Descripti			
ð	OF	1	(See Categories listed at the		(a)	Description Check if travel	outei	de of Tevas Com	plete Schedule T.
	EXPENDITURE	GIπ/Awa	rds/Memorials Exper	ise				officeholder living	•
						Funeral flower			
9	Complete ONLY if direct	L Candidate/	Officeholder name	Office so	<u>I</u> uaht			Office he	eld
	expenditure to benefit C/OI			253 50				200 11	
\vdash	Date	Davies :	mo						
	Date 07/31/2024	Payee na							
			Flower Shop						
	Amount (\$)	Payee ad		State; Zip C	ode				
	\$431.95	114 W. I	Broad St.						
		Mineola,	TX 75773						
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE		rds/Memorials Exper			Check if travel			plete Schedule T.
	LAFLINDITORE		·			ш		officeholder living	g expense
						Funeral flower	ers		
	Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office so	ught			Office h	eld
	Date	Payee na	me						
	08/26/2024	Mineola	Flower Shop						
	Amount (\$)	Payee ad	dress; City;	State; Zip C	ode				
	\$128.00	114 W. I	Broad St.						
		Mineola.	TX 75773						
	PURPOSE			ton of this act - dul-	(h)	Description			
	OF		(See Categories listed at the ards/Memorials Exper		(5)	•	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE	J Silv	adoniviernonaio Exper	150				officeholder living	•
						Funeral flower	ers		
	Complete ONLY if direct		Officeholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	H							
_									

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		Legal Services The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed above	e)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission	n Filers)
L	Sch: 55/82 Rpt:	Hughes, D	. Bryan (The Honor	able)				00051630		
4	Date	5 Payee name	е							
	10/23/2024	Mineola Fl	ower Shop							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode					
	\$408.00	114 W. Bro	oad St.							
		Mineola, T	X 75773							
8	PURPOSE OF		See Categories listed at the to		(b)	Description				
	EXPENDITURE	Gift/Award	s/Memorials Expens	se		므		ide of Texas. Com , officeholder living	plete Schedule T. expense	
						Funeral flower			,	
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ught			Office he	eld	
	Date	Payee name								
	12/05/2024	Mineola Fl	ower Shop							
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$609.00	114 W. Bro	oad St.							
		Mineola, T	X 75773		•					
	PURPOSE OF		See Categories listed at the to		(b)	Description				
	EXPENDITURE	Gift/Award	s/Memorials Expens	se		=		ide of Texas. Com , officeholder living	plete Schedule T. a expense	
						Funeral flower		,	, . ,	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ught			Office he	eld	
H	Date	Payee name								
	07/10/2024	Minol USA								
	Amount (\$)	Payee addr		State; Zip C	ode					
	\$191.51	l	lison Rd., #100	State, Zip C	ouc					
	Ψ131.01	102007100	13011 Ftd., 1/100							
		Addison, T	X 75001							
	PURPOSE OF		See Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Fees						ide of Texas. Com , officeholder livinç	plete Schedule T.	
						Austin apartm			у схропос	
						- Al • · ·		-9		
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OI									
\vdash										
ᆫ										- 1 10

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		l above)
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethics Comm	ission Filers)
_	Sch: 56/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630	
4	Date	5 Payee name	
	08/13/2024	Minol USA	
6	Amount (\$) \$189.82	7 Payee address; City; State; Zip Code 15280 Addison Rd., #100 Addison, TX 75001	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	X Check if Austin, TX, officeholder living expense Austin apartment utility	
_	Onesalata ONII V if alianat	Office and the Coffice had been assessed to the Coffice and the Coffice had been assessed to the Co	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH OH	
	Date	Payee name	
	09/10/2024	Minol USA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$173.50	15280 Addison Rd., #100	
		Addison, TX 75001	
	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.	
		X Check if Austin, TX, officeholder living expense	
		Utility for Austin apartment	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	10/11/2024	Minol USA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$195.63	15280 Addison Rd., #100	
		Addison, TX 75001	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Austin apartment utility	
	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 -

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: 57/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	11/13/2024	Minol USA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$175.76	15280 Addison Rd., #100
		Addison, TX 75001
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expenseAustin apartment utility
		Addit apartment duity
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/O	
-	Date	Dougo nama
	12/10/2024	Payee name Minol USA
	Amount (\$)	Payee address; City; State; Zip Code
	\$122.92	15280 Addison Rd., #100
		Addison, TX 75001
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		Austin apartment utility
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date 09/23/2024	Payee name
		Murdoch, Matthew
	Amount (\$)	Payee address; City; State; Zip Code
	\$440.00	2901 Olympia Dr.
		Temple, TX 76502
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Contract labor
		Contract labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.	OTTEN (enter a category not listed above)
1 Total pages Schedule F		Filer ID (Ethics Commission Filers)
Sch: 58/82 Rpt:	Hughes, D. Bryan (The Honorable)	00051630
4 Date	5 Payee name	
09/09/2024	Nothing Bundt Cakes	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$67.2	21 10225 Research Blvd. #330	
	Austin, TX 78759	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	_ `	de of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX,	officeholder living expense
	Meeting to discu	ss officeholder matters
9 Complete <u>ONLY</u> if direct expenditure to benefit C.		Office held
experialitare to beliefit C	5/011	
Date	Payee name	
08/24/2024	Office Depot Tyler	
Amount (\$)	Payee address; City; State; Zip Code	
\$129.8	89 4329 Old Bullard Rd	
	Tyler, TX 75703	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	de of Texas. Complete Schedule T.
EXI ENDITORE	_	officeholder living expense
	Reimburse Reed	ce DeWoody for office equipment
Complete ONLY if direct	ct Candidate/Officeholder name Office sought	Office held
expenditure to benefit C		Office field
Date	Payee name	
07/24/2024	Optimum	
Amount (\$)	Payee address; City; State; Zip Code	
\$475.8	84 PO Box 70340	
	Philadelphia, PA 19176-0340	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overfiedd/Nertial Experise	de of Texas. Complete Schedule T.
		officeholder living expense for Mineola District Office
	internet service	TOT WILLOUG DISUIGE OTHER
Complete ONLY if direct	ct Candidate/Officeholder name Office sought	Office held
expenditure to benefit C	•	Office field

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 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: 59/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	09/16/2024	Optimum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$475.13	PO Box 70340
		Philadelphia, PA 19176-0340
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
		Internet service for Mineola district office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/02/2024	Origin Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.00	1825 N. Pacific St.
		Mneola, TX 75773
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank transaction fee
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/10/2024	Phoebe's Diner - Downtown
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$121.93	408 W. 11th St.
		Austin, TX 78701
Г	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 officeholder matters
		Wieeting to discuss officeriolder matters
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 60/82 Rpt:	2 FILER NAME Hughes, D. Bryan (The Honorable) 3 Filer ID (Ethics Commission Filers) 00051630
4	Date 07/17/2024	5 Payee name Primal Fundraising
6	Amount (\$) \$20,982.50	7 Payee address; City; State; Zip Code 5706 E. Mockingbird Lane
		Dallas, TX 75206
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 07/05/2024	Payee name Primal Fundraising
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 5706 E. Mockingbird Lane
		Dallas, TX 75206
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date 08/05/2024	Payee name Primal Fundraising
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 5706 E. Mockingbird Lane
		Dallas, TX 75206
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/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 co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 61/82 Rpt:	Hughes, D. Bryan (The Honorable)		00051630
4	Date	5 Payee name		-
	09/03/2024	Primal Fundraising		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$5,000.00	5706 E. Mockingbird Lane		
		Dallas, TX 75206		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Solicitation/Fundraising Expense	`´	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Fundraising expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
	Date	Payee name		
	09/24/2024	Primal Fundraising		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$5,000.00	5706 E. Mockingbird Lane		
		Dallas, TX 75206		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Fundraising expense
	Complete ONLY if direct	Candidate/Officeholder name Office sou	l Iaht	Office held
	expenditure to benefit C/OI		igiit	Office field
	Data			
	Date	Payee name Primal Fundraising		
	10/25/2024	•		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$5,000.00	5706 E. Mockingbird Lane		
		Dallas, TX 75206		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Fundraising expense
				- 0 - p
	Complete ONLY if direct	Candidate/Officeholder name Office sou	L laht	Office held
	expenditure to benefit C/OI		g	222
_				

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 Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 62/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/03/2024	Primal Fundraising
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	5706 E. Mockingbird Lane
		Dallas, TX 75206
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Fundraising expense
_	0 1 0 0 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/24/2024	Public Data
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.76	7750 N. MacArthur Blvd.
		Irving, TX 75063
	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 Research
		Research
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/22/2024	Ready Refresh by Nestle
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.30	PO Box 856680
	420.00	TO BOX GOODGO
		Louisville, KY 40285-6680
	PURPOSE	In.
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Water for Capitol office
	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
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 c	ompl	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 63/82 Rpt:		Hughes, D. Bryan (The Honorable)		00051630
4	Date	5	Payee name		•
	07/18/2024		Ready Refresh by Nestle		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$109.81	l	PO Box 856680		
		l			
		l	Louisville, KY 40285-6680		
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.
	EXI ENDITORE	l			Check if Austin, TX, officeholder living expense
		l			Water for Capitol office
_	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	uabt	Office held
9	expenditure to benefit C/O		Candidate/Officeholder name Office so	ugni	Office field
_		_			
	Date 07/19/2024	l	Payee name		
	07/18/2024	┞	Ready Refresh by Nestle		
	Amount (\$)	l	Payee address; City; State; Zip C	ode	
	\$112.81	l	PO Box 856680		
		l			
		L	Louisville, KY 40285-6680		
	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
		l			Water for Capitol office
					·
_	Complete ONLY if direct	_	Candidate/Officeholder name Office so	ught	t Office held
	expenditure to benefit C/O	Н			
	Date	Т	Payee name		
	08/05/2024	l	Ready Refresh by Nestle		
	Amount (\$)	H	Payee address; City; State; Zip C	ode	
	\$68.12	l	PO Box 856680		
	,,,,,	l			
		l	Louisville, KY 40285-6680		
	PURPOSE	10		(h)	A Description
	OF	(a	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(0)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Podu/Beverage Expense		Check if Austin, TX, officeholder living expense
					Water for Capitol office
				\perp	
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/Ol	н			

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

Reimbursement
Rental Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	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: 64/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	09/05/2024	Ready Refresh by Nestle
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.65	PO Box 856680
		Louisville, KY 40285-6680
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Water for Capitol office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	4
	Date	Payee name
	09/16/2024	Ready Refresh by Nestle
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.30	PO Box 856680
		Louisville, KY 40285-6680
	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
		Water for Capitol office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	09/05/2024	Ready Refresh by Nestle
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.65	PO Box 856680
		Louisville, KY 40285-6680
	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 Water for Capitol office
		water for eapitor office
	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 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: 65/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	10/03/2024	Ready Refresh by Nestle
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$74.77	PO Box 856680
		Louisville, KY 40285-6680
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
		Water for Capitol office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/28/2024	Ready Refresh by Nestle
	Amount (\$)	Payee address; City; State; Zip Code
	\$95.26	PO Box 856680
		Louisville, KY 40285-6680
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Water for Capitol office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/25/2024	Ready Refresh by Nestle
	Amount (\$)	Payee address; City; State; Zip Code
	\$95.26	PO Box 856680
	,	
		Louisville, KY 40285-6680
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Water for Capitol office
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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 Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
-	Sch: 66/82 Rpt:	Hughes, D. Bryan (The Honorable)	
Ļ	· · · · · · · · · · · · · · · · · · ·		_
4	Date	5 Payee name	
	07/22/2024	Rotary Club of Mineola	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$90.00	PO Box 505	
		Minople TV 75772 0505	
		Mineola, TX 75773-0505	_
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	
		Dues for 2nd Q 2024	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	experiencie to beliefft C/Of		
	Date	Payee name	
	09/05/2024	Shack Esq., Edward M.	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$2,475.00	4410 Bellvue Ave.	
	, .,		
		Austin TV 707E6	
		Austin, TX 78756	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Legal services	
<u> </u>	Operation ONE VIII II	Our distance (Office de alcale and a secondary of the sec	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	07/30/2024	Shell Oil Station - Mineola	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$72.95	115 N. Pacific	ı
		Mineola, TX 75773	
	DUDDOCE	I	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Gasoline for leased vehicle	
		Suspinio for loaded verificio	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/OI	y	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
_	Sch: 67/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	08/08/2024	Shell Oil Station - Round Rock
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$91.29	2000 N. 135
		Round Rock, TX 78681
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Gasoline for leased vehicle
		Substitute for follower volitile
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
_	Date	Davisa nama
	07/30/2024	Payee name Smith County Republican Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 6381
		T TV TTT44 0004
		Tyler, TX 75711-6381
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-i
_	Date	Payee name
	11/05/2024	Smith County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3923 S. Broadway Ave.
	φοσοίοσ	oozo o. Broadnay / wo.
		Tyler, TX 75701
	PURPOSE	To a second seco
	OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Event sponsorship
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 68/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/02/2024	Spaw Senate Account
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	PO Box 12068
		Austin, TX 78711-2068
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Forgotten angels program
		To gotton an goto program
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/08/2024	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$112.14	400 Washington Blvd.
	·	
		Stamford, CT 06902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Internet service for Austin apartment
		internet service for Adolin apartment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	08/07/2024	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$112.14	400 Washington Blvd.
	Ψ112.14	400 Washington Diva.
		Stamford, CT 06902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAFEINDITORE	X Check if Austin, TX, officeholder living expense
		Internet service for Austin apartment
	0 1 0 0 1 1 1 1 1	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Guide expl		Vages	/Contract Labor		OTHER (enter a	category not listed abor	ve)
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission	n Filers)
	Sch: 69/82 Rpt:		Bryan (The Honorable)				00051630		
4	Date	5 Payee name								
	09/09/2024	Spectrum								
6	Amount (\$)	7 Payee addre	ess; City; S	State; Zip Co	ode					
	\$112.14	400 Washii	ngton Blvd.							
		Stamford, (CT 06902							
8	PURPOSE OF	(a) Category (S	ee Categories listed at the top of the	nis schedule)	(b)	Description				
	EXPENDITURE	Fees				_		de of Texas. Comp officeholder living		
						X Check if Austin, Internet servi				
							•			
9	Complete ONLY if direct		iceholder name	Office sou	l ıght			Office he	eld	
	expenditure to benefit C/O	7								
	Date	Payee name								
	10/07/2024	Spectrum								
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	ode					
	\$112.24	400 Washii	ngton Blvd.							
		Stamford, (CT 06902							
	PURPOSE OF	(a) Category (S	ee Categories listed at the top of the	nis schedule)	(b)	Description				
	EXPENDITURE	Fees						de of Texas. Comp		
						X Check if Austin, Internet servio		officeholder living		
						internet servi	CC	ioi / tustiii ap	artment	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	<u>l</u> ıght			Office he	eld	
	expenditure to benefit C/O	H								
	Date	Payee name								
	11/07/2024	Spectrum								
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	ode					
	\$112.14	400 Washii	ngton Blvd.							
		Stamford, (CT 06902							
	PURPOSE	(a) Category (S	ee Categories listed at the top of the	nis schedule)	(b)	Description				
	OF EXPENDITURE	Fees						de of Texas. Com		
						X Check if Austin, Internet servio		officeholder living		
						michiel Selvii	CE	ιοι πασιιιι αμ	ai iiiiciit	
\vdash	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	laht			Office he	ald.	
	expenditure to benefit C/O		icendiusi name	Onice Suc	igill			Office He	iu	
_										

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

	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: 70/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/09/2024	Spectrum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$133.04	400 Washington Blvd.
		Stamford, CT 06902
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense Internet service for Austin apartment
		internet service for Austin apartment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/07/2024	Squarespace Inc.
H	Amount (\$)	Payee address; City; State; Zip Code
	\$294.22	459 Broadway, 5th Floor
		New York City, NY 10013
	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 Web hosting
		Web hosting
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	07/02/2024	TDCJ
H	Amount (\$)	Payee address; City; State; Zip Code
	\$259.00	PO Box 4013
	Ψ200.00	1 0 20% 4010
		Huntsville, TX 77342-4013
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Charity donation items
L		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
I		

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	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: 71/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	07/30/2024	TDCJ
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,006.73	PO Box 4013
		Huntsville, TX 77342-4013
8	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 Staff gifts
		Stan girts
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Date	Payee name
	07/29/2024	TDCJ
L		
	Amount (\$)	
	\$532.59	PO Box 4013
		Huntsville, TX 77342-4013
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charity donation items
		Charly defiation tents
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	09/18/2024	TDCJ
H	Amount (\$)	Payee address; City; State; Zip Code
	\$2,208.30	PO Box 4013
	Ψ2,200.30	1 0 80% 4013
		Huntovilla, TV 77242 4012
	DUDD005	Huntsville, TX 77342-4013
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Charity donation items
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
I	expenditure to benefit C/O	1
Г		
I		
ı		

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 File	r ID (Ethics Commission Filers)
	Sch: 72/82 Rpt:	Hughes, D. Bryan (The Honorable)	051630
4	Date	5 Payee name	
	09/18/2024	TDCJ	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$330.17	PO Box 4013	
		Huntsville, TX 77342-4013	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense	Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, office	
		Charity donation iter	ns
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	·		
	Date	Payee name	
	09/26/2024	TDCJ	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$330.16	PO Box 4013	
		Huntsville, TX 77342-4013	
	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 Check if Austin, TX, office	Texas. Complete Schedule T.
		Charity donation itel	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
H	Date	Payee name	
	08/08/2024	Terry, Cody	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$400.00	10909 Sea Hero Lane	
		Austin, TX 78748	
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, office	
		Salary for third quar	ter
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	The state of the s	••	

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER Contract of Charles (Applied Contract)

	Candidate/Officeholder/Politica Credit Card Payment	l 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: 73/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	09/30/2024	Terry, Cody
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	10909 Sea Hero Lane
		Austin, TX 78748
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Salary for Aug & Sept
		Swary 1817 raig a Sopt
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorations to benefit C/O	'
	Date	Payee name
	12/31/2024	Terry, Cody
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	10909 Sea Hero Lane
		Austin, TX 78748
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Salary for Oct, Nov & Dec
		Salary for Soi, Nov & Bee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨		_
	Date	Payee name
	08/07/2024	Texas Chili Parlor
	Amount (\$)	Payee address; City; State; Zip Code
	\$134.73	1409 Lavaca
		Austin, TX 78707
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder matters
_		
1	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Superiord to borient 0/01	•
1		
1		

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	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: 74/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	08/02/2024	Texas Chili Parlor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$77.14	1409 Lavaca
		Austin, TX 78707
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 officeholder matters
		Wiccing to discuss officeriolider matters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/23/2024	Texas Chili Parlor
	Amount (\$)	Payee address; City; State; Zip Code
	\$139.91	1409 Lavaca
		Austin, TX 78707
	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 officeholder matters
		Wiccing to discuss officeriolider matters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	09/20/2024	Texas Chili Parlor
	Amount (\$)	Payee address; City; State; Zip Code
	\$173.97	1409 Lavaca
	Ψ110.91	1403 Lavaca
		Austin, TX 78707
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder matters
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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

	Credit Card Payment	The Instruction Guide explains how to complete thi	s form.
1	Total pages Schedule F1: Sch: 75/82 Rpt:	2 FILER NAME Hughes, D. Bryan (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051630
4	Date 10/23/2024	5 Payee name Texas Chili Parlor	
6	Amount (\$) \$81.74	7 Payee address; City; State; Zip Code 1409 Lavaca	
8	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense eting to discuss officeholder matters
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
	Date 11/14/2024	Payee name Texas Chili Parlor	
	Amount (\$) \$123.38	Payee address; City; State; Zip Code 1409 Lavaca	
	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense eting to discuss officeholder matters
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
	Date 12/09/2024	Payee name Texas Chili Parlor	
	Amount (\$) \$134.33	Payee address; City; State; Zip Code 1409 Lavaca	
		Austin, TX 78707	
	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense eting to discuss officeholder matters
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
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	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: 76/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	12/09/2024	Texas Chili Parlor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$134.33	1409 Lavaca
		Austin, TX 78707
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder matters
		mooting to disease emechation matters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	12/23/2024	Texas Chili Parlor
	Amount (\$)	Payee address; City; State; Zip Code
	\$108.44	1409 Lavaca
		Austin, TX 78707
	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 officeholder matters
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	08/27/2024	Texas Federation of Republican Women PAC
_		·
	Amount (\$) \$250.00	
	Φ250.00	515 Capital of Texas Hwy., Suite 138
		Austin, TX 78746
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Event sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	

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

1 Total pages Schedule F1: 2 FILER NAME Hughes, D. Bryan (The Honorable) 3 Filer ID (Ethics Commission F 00051630 1 Date 10/03/2024 5 Payee name File Schedule F1: 2 FILER NAME		Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
Sch: 77/82 Rpt: Hughes, D. Bryan (The Honorable) 00051630 4 Date 10/03/2024 5 Payse name Texas Senate 6 Amount (\$) 7 Payse address; City; State; Zip Code PO Box 12068 Austin, TX 78711-2068 8 PURPOSE OF EXPENDITURE (a) Categorie listed at the top of this schedule) (b) Description City Check It raw Journal of the top of this schedule) (c) Check It raw Journal of the top of this schedule) (d) Description Charity donation items 9 Complete ONLY, if direct expenditure to benefit C/OH Texas Senate Amount (\$) Payse address; City; State; Zip Code Texas Senate Amount (\$) Payse address; City; State; Zip Code Search Austin, TX 78711-2068 PURPOSE OF CITY (Complete Schedule Transporter listed at the top of this schedule) (b) Description City of the top of this schedule) (c) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) City of the top of this schedule) (d) City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of the schedule Transa Workforce Commission City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of this schedule) (d) Description City of the top of the top of this schedule) (d) Description City of the top of the top of this schedule) (d) Description City of the top of the top of this schedule) (d) Description City of the top of the	1	Total nages Schedule E1.	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	\dashv
Texas Senate Purpose	Ĺ			
Texas Senate	4	Date	5 Payee name	
S48.34 PO Box 12068 Austin, TX 78711-2068 8 PURPOSE OF EXPENDITURE (a) Category (See Cortegories Sitert at the top of this schedule) (b) Description			Texas Senate	
Citeck if Austin, TX, officeholder living expense Charity donation items	6	` '	PO Box 12068	
Check if Austin, TX, officeholder living expense	8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	\neg
Check if Austin, TX, officeholder living expense Charity donation items				
Date 11/19/2024		EXPENDITURE	Check if Austin, TX, officeholder living expense	
Texas Senate Amount (\$)	9			
Amount (\$) \$222.50 Payee address; City; State; Zip Code PO Box 12068 Austin, TX 78711-2068 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Gift/Awards/Memorials Expense Complete QNLY if direct expenditure to benefit C/OH Date O8/02/2024 Amount (\$) Payee name Texas Workforce Commission Amount (\$) Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete QNLY if direct Candidate/Officeholder name Office sought (b) Description Check if travel outside of Texas. Complete Schedule T. Complet		Date	Payee name	
\$222.50 PO Box 12068 Austin, TX 78711-2068 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O8/02/2024 Amount (\$) Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office sought Office held Divided the complete only if direct on the complete only in the co		11/19/2024	Texas Senate	
Austin, TX 78711-2068 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense Complete ONLY if direct expenditure to benefit C/OH Date 08/02/2024 Amount (\$) Payee name Texas Workforce Commission Amount (\$) Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if austin, TX, officeholder living expense Flags (b) Description Office held (c) Description Office held (b) Description Office folder it is travel outside of Texas. Complete Schedule T. Check if austin, TX, officeholder living expense Payroll taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flags Complete ONLY if direct expenditure to benefit C/OH Date Payee name Texas Workforce Commission Amount (\$) Payee address; City; State; Zip Code \$2.50 101 E. 15th Street Austin, TX 78778 (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. 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 Payroll taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$222.50	PO Box 12068	
Complete ONLY if direct expenditure to benefit C/OH		PUPPOST		
EXPENDITURE GITI/AWards/Memorials Expense Flags Office held Office held Office held Payee name Texas Workforce Commission Amount (\$) Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Gheck if Austin, TX, officeholder Iving expense Payroll taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held			l ————————————————————————————————————	
Date 08/02/2024 Payee name Texas Workforce Commission Amount (\$) Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Check if Austin, TX, officeholder living expense	
Texas Workforce Commission Amount (\$) Payee address; City; State; Zip Code \$2.50 101 E. 15th Street Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought Code Check if Austin, TX, officeholder living expense Payroll taxes Office held			y	
Amount (\$) Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Ode Ode Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll taxes Office held		Date	Payee name	
\$2.50 101 E. 15th Street Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought Office held		08/02/2024	Texas Workforce Commission	
Austin, TX 78778 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Austin, TX 78778 (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll taxes Office sought Office held		Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$2.50	101 E. 15th Street	
Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Austin, TX 78778	
EXPENDITURE Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Payroll taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Salaries/Wages/Cornilact Eabor	

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide	Salaries/\	Wages	s/Contract Labor		OTHER (enter a	category not listed above	e)
1	Total pages Schedule F1:	2 FILER NAM	<u> </u>				3	Filer ID	(Ethics Commission	r Filers)
_	Sch: 78/82 Rpt:		- Bryan (The Honora	able)				00051630	(1 11 11 11 11 11 11 11 11 11 11 11 11	,
4	Date	5 Payee name								
	10/17/2024	Texas Wor	kforce Commission							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$4.06	101 E. 15th	Street							
		Austin, TX	78778							
8	PURPOSE OF		ee Categories listed at the to		(b)	Description				
	EXPENDITURE	Salaries/W	ages/Contract Labo	r		_		de of Texas. Comp officeholder living		
						Payroll taxes		officeriolder living	expense	
9	Complete ONLY if direct		iceholder name	Office sou	l ught			Office he	eld	
	expenditure to benefit C/O	†								
	Date	Payee name								
	07/26/2024	Thompson	Burwell							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$100.00	2604 Zach	Scott St.							
		Austin, TX	78723							
	PURPOSE OF	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description				
	EXPENDITURE	Salaries/W	ages/Contract Labo	r		=		de of Texas. Comp officeholder living		
						Salary	, 1,	officeriolder living	expense	
						Galary				
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	<u>l</u> Jaht			Office he	eld	
	expenditure to benefit C/O									
-	Date	Payee name								
	08/26/2024	Thompson,								
				State; Zip Co	ado					
	Amount (\$) \$100.00	Payee addre 2604 Zach	•	State, Zip Ct	Jue					
	\$100.00	2004 Zacii	Scott St.							
		Austin, TX	78723							
-	PURPOSE		ee Categories listed at the to	n of this cohedule)	(b)	Description				
	OF		ages/Contract Labo		(~)		outsi	de of Texas. Comp	plete Schedule T.	
	EXPENDITURE	Gaiai 100/11	agoo, comitact Lase	•		Check if Austin	, TX,	officeholder living	expense	
						Salary				
	Complete ONLY if direct		iceholder name	Office sou	ught			Office he	eld	
L	expenditure to benefit C/O	-								

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 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: 79/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630
4	Date	5 Payee name
	09/26/2024	Thompson, Burwell
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	2604 Zach Scott St.
		Austin, TX 78723
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Salary
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	Thompson, Burwell
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	2604 Zach Scott St.
	Ψ100.00	2004 Zach Scott St.
		Austin, TX 78723
	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
		Salary
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to benefit eyer	
	Date	Payee name
	11/26/2024	Thompson, Burwell
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	2604 Zach Scott St.
		Austin, TX 78723
	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Salary
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 80/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630						
4	Date	5 Payee name						
	12/26/2024	Thompson, Burwell						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$100.00	2604 Zach Scott St.						
		Austin, TX 78723						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Salary						
		Suidiy						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9	expenditure to benefit C/OI							
_								
	Date	Payee name						
	07/22/2024	Tyler Area Chamber of Commerce						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$175.00 315 N. Broadway Ave.							
		Tyler, TX 75702-5712						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.						
	EXI ENDITORE	Check if Austin, TX, officeholder living expense						
		Dues						
_	Computate ONLY if diseast	Condidate/Office holder name Office according						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	11/13/2024	Tyler Museum of Art						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00	1300 S. Mahon Ave.						
		Tyler, TX 75701						
	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						
		Contribution						
	Complete ONLY if direct	Candidate/Officeholder name Office country Office hold						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

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 (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	<u> </u>						
	Sch: 81/82 Rpt:	Hughes, D. Bryan (The Honorable) 00051630						
4	Date	5 Payee name						
	08/08/2024	Tyler Parking Meters						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$2.00	City of Tyler						
		PO Box 2039						
		Tyler, TX 75710						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Parking expense						
_								
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	10/03/2024	Uber						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$103.09	1455 Market St., 4th Floor						
		San Francisco, CA 94103						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.						
	EXI ENDITORE	Check if Austin, TX, officeholder living expense						
		Reimburse Emma Gibson for three Uber rides for staff						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Data							
	Date	Payee name						
	12/05/2024	United States Postal Service Mineola						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$60.00	630 E. Broad St.						
		Mineola, TX 75773						
	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						
		Post office box rental						
		. Socialist Socialist						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	committee	The Ir		Salaries/ le explains how to co	-	ete this form.		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	FILER	NAME					3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 82/82 Rpt:	Hughe	es, D. Bryaı	n (The Hono	rable)				00051630		
4	Date	Payee	name								
	09/30/2024	United	d States Tre	easury, Ogde	en						
6	Amount (\$) \$4,270.00	Payee Ogder	address;	City;	State; Zip Co	ode					
	Ψ4,270.00	Oguei	11								
		Ogder	n, UT 8410	2-0039							
8	PURPOSE	a) Catego	ory (See Cate	ories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees	,		· ·		ш		de of Texas. Com		
	LXI LINDITORL						_	n, TX,	officeholder living	expense	
							Income Tax				
9	Complete ONLY if direct expenditure to benefit C/Ol	Candida	ate/Officeholo	ler name	Office sou	ught			Office he	eld	
F	Date	Payee	name								
	07/30/2024	•	d States Tre	easury							
	Amount (\$)		address;	City;	State; Zip C	ahe					
	\$172.95		al Revenue		State, Zip Ci	ouc					
	Ψ172.93			Service							
			ox 932100								
		Louis	ville, KY 40	293-2100							
	PURPOSE	a) Catego	ory (See Cate	ories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Salari	es/Wages/0	Contract Lab	or		\Box			plete Schedule T.	
							_		officeholder living	expense	
							Payroll taxes	6			
	Complete ONLY if direct expenditure to benefit C/O	Candida	ate/Officeholo	der name	Office sou	ught			Office he	eld	
	experialitate to benefit 6/01										
l											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 1/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4	CREDIT CARD ISSUER		ncial institution Cards	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$10.67	(b) Date of Charge 07/12/2024	(c) Date(s 08/14/20) Credit Card Issue 124	er Paid		
7	PAYEE	(a) Payee name Adobe Inc.		(b) Payee San Jose San Jose		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ption			
	Non-Political				, officeholder living exp	ense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	TAIMENI	\$22.17	07/22/2024	(c) Daic(s	orean cara issue	i i did		
	PAYEE	(a) Payee name DomainZoo.com		(b) Payee	36763	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	AZ 85740 ption name registration	n		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$5.40	(b) Date of Charge 07/15/2024	(c) Date(s 08/14/20) Credit Card Issue)24	er Paid		
	PAYEE	(a) Payee name HP Instant Ink		(b) Payee address; Earley West 300 Thames Valley Park E Reading RG6 1PT United			State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Ink subs	•			
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
		<u> </u>	<u> </u>					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)			
Sch: 2/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$129.01	07/26/2024	08/14/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip	Code			
	AT&T Mobility		211 S. Akard					
			Dallas, TX 75202					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Office Overhead/Rent		Cell Phone					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Officeholder			e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 07/23/2024	(c) Date(s) Credit Card Issue 08/14/2024	er Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip	Code			
	Embassy Suites Fo	ort Worth	600 Commerce St.					
			Fort Worth, TX 76102					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging 1 nite					
X Political								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
PAYMENT	(a) Amount Charged \$21.31	(b) Date of Charge 07/09/2024	(c) Date(s) Credit Card Issue 08/14/2024	r Paid				
PAYEE	(a) Payee name	ı	(b) Payee address;	City, State, Zip	Code			
	Onstar Services		PO Box 1027					
			Warren, MI 48090-1027					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	Cell phone service					
X Political	Jince Overneau/Rein	ші шлренэе						
Non-Political	(c) Check if travel outside	Check if Austin, TX	, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
1								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	is form.					
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)		
Sch: 3/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid				
	\$14.47	07/03/2024	08/14/202	4					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	OOMA, Inc.		525 Almanor Ave., Suite 200						
				, CA 94085					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti						
X Political	Office Overhead/Rental Expense Telephone service								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct Candidate/Officeholder name Offi			e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid				
	\$29.53	07/22/2024	08/14/202	4					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Rick's On The Squa	are	104 W. En	win St.					
				75702-7227					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	· ·	(b) Description Meeting to discuss officeholder matters						
X Political	Food/Beverage Expe	nse							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$91.76	(b) Date of Charge 07/23/2024	(c) Date(s) (08/14/202	Credit Card Issue 4	r Paid				
PAYEE	(a) Payee name	ı	(b) Payee a	ddress;	City,	State,	Zip Code		
			114 W. Bro	oad St.					
	Mineola Flower Sho	op							
			Mineola, T	X 75773					
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE 	(See Categories listed at the top Gift/Awards/Memorial	•	Funeral flowers						
X Political									
Non-Political	Ion-Political (c) Check if travel outside of Texas. Complete Schedule T.				T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH	<u> </u>								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this fo	orm.	_		
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 4/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF L EXPENDITU CHARGED 1 CARD		\$		
6 PAYMENT	(a) Amount Charged \$21.92	(b) Date of Charge 07/02/2024	(c) Date(s) Cred 08/14/2024	dit Card Issuer	Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address 1455 Market S	St., 4th Floor	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	(See Categories listed at the top of this schedule) Fees					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	C	heck if Austin, TX, o	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Offi			e sought		Office held		
PAYMENT	(a) Amount Charged \$20.97	(b) Date of Charge 07/03/2024	(c) Date(s) Cred 08/14/2024	dit Card Issuer	Paid		
PAYEE	Uber		(b) Payee address 1455 Market S	St., 4th Floor	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Taxi	,			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		heck if Austin, TX, o	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged \$10.67	(b) Date of Charge 08/12/2024	(c) Date(s) Cred 09/05/2024	lit Card Issuer	Paid		
PAYEE	(a) Payee name Adobe Inc.		(b) Payee addre San Jose CA San Jose, CA		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni	tal Expense	(b) Description Software				
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Offic	e sought	heck if Austin, TX, (officeholder living exp	ense	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)						
Sch: 5/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$							
6 PAYMENT	(a) Amount Charged \$294.59	(b) Date of Charge 08/20/2024	(c) Date(s) Credit Card Issuer 09/05/2024	dit Card Issuer Paid							
7 PAYEE	(a) Payee name The Adolphus Hote	l	(b) Payee address; 1321 Commerce St.	City, Stat	e, Zip Code						
			Dallas, TX 75202								
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$129.01	(b) Date of Charge 08/26/2024	(c) Date(s) Credit Card Issuer 09/05/2024	Paid							
PAYEE	AT&T Mobility		(b) Payee address; 211 S. Akard Dallas, TX 75202	City, Stat	e, Zip Code						
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cell phone								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$30.36	(b) Date of Charge 07/11/2024	(c) Date(s) Credit Card Issuer 08/14/2024	· Paid							
PAYEE	(a) Payee name OOMA, Inc.		(b) Payee address; 525 Almanor Ave., Suite 2 Sunnyvale, CA 94085	City, Stat 200	e, Zip Code						
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Telephone service								
Non-Political	(c) Check if travel outside		officeholder living expense								
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this	s form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 6/32 Rpt:	Hughes, D. Bryan ((The Honorable)			00051630			
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	UNITEMIZED TURES TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged \$20.00	(b) Date of Charge 07/23/2024	(c) Date(s) C 08/14/2024	redit Card Issuer	Paid			
7 PAYEE	(a) Payee name		(b) Payee ad 777 Main Fort Worth,		City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Parking exp	n				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Off			e sought		Office held			
PAYMENT	(a) Amount Charged \$15.97	(b) Date of Charge 07/03/2024	08/14/2024		Paid			
PAYEE	YEE (a) Payee name Uber			dress; et St., 4th Floor sco, CA 94103	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Offic	e sought		Office held			
PAYMENT	(a) Amount Charged \$21.31	(b) Date of Charge 08/09/2024	(c) Date(s) C 09/05/2024	redit Card Issuer	Paid			
PAYEE	(a) Payee name Onstar Services		(b) Payee ad PO Box 102 Warren, MI		City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Cell phone service				
Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Offic	e sought		Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officenoider/Politica	-	ruction Guide explains how		THER (enter a categor	y not listed al	oove)	
1 Total pages Schedule F4:	2 FILER NAME	<u> </u>		3 Filer ID (Ethio	s Commiss	sion Filers)	
Sch: 7/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630		,	
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$151.34	(b) Date of Charge 08/17/2024	(c) Date(s) Credit Card Issue 09/05/2024	r Paid			
7 PAYEE	(a) Payee name Hilton Hotel Grapev	vine	(b) Payee address; 1800 Hwy. 26E Grapevine, TX 76051	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$28.83	(b) Date of Charge 08/11/2024	(c) Date(s) Credit Card Issuer 09/05/2024	r Paid			
PAYEE	(a) Payee name Jalapeno Tree		(b) Payee address; 416 E. Broad St. Mineola, TX 75773	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meeting to discuss officeholder matters				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$98.44	(b) Date of Charge 09/22/2024	(c) Date(s) Credit Card Issuer 10/15/2024	r Paid			
PAYEE	(a) Payee name Best Buy 246 Tyler		(b) Payee address; 5514 S. Broadway Ave. Tyler, TX 75703-4347	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Office equipment				
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l		The Inst	ruction Guide explains how	to complete thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 8/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$85.42	(b) Date of Charge 09/11/2024	(c) Date(s) C 10/15/2024	Credit Card Issuer 4	Paid		
7	PAYEE	(a) Payee name Best Western Inn C	Canton		ade Days Blvd.	City,	State,	Zip Code
L		() 2		Canton, T				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging	on			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	name Office	e sought		Office held			
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$102.79	(b) Date of Charge 08/06/2024	(c) Date(s) C 09/05/2024	Credit Card Issuer 4	· Paid		
Г	PAYEE (a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code	
	Homegoods #0579		5400 Brodi	ie Ln.				
L				Austin, TX				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Office furni				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		7 Chack if Austin TV	officeholder living exp	onco	
⊢	Complete ONLY if direct	Candidate/Officeholder		e sought	Check ii Austili, 1A,	Office held	ense	
€	expenditure to benefit C/OH	Garanaaco, Giniseriolasi	That is a second of the second	o cougni		Onice neid		
	PAYMENT	(a) Amount Charged \$148.58	(b) Date of Charge 08/24/2024	(c) Date(s) C 09/05/2024	Credit Card Issuer 4	Paid		
	PAYEE	(a) Payee name Hyatt Hotel Conroe		(b) Payee address; City, State, Zip Code 1001 Grand Central Parkway Conroe, TX 77304				Zip Code
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District		of this schedule)	(b) Description Lodging	on			
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	hics Commiss	sion Filers)		
Sch: 9/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$				
6 PAYMENT	(a) Amount Charged \$10.00	(b) Date of Charge 08/20/2024	(c) Date(s) Credit Card Is 09/05/2024	suer Paid				
7 PAYEE	(a) Payee name Laz Parking on Ros	ss	(b) Payee address; 1200 Ross Ave.	City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	Dallas, TX 75202 (b) Description Parking expense						
Non-Political	(c) Committee of the complete			, TX, officeholder living ex	xpense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held				
PAYMENT	(a) Amount Charged \$14.47	(b) Date of Charge 08/02/2024	(c) Date(s) Credit Card Is 09/05/2024	suer Paid				
PAYEE	PAYEE (a) Payee name OOMA, Inc.		(b) Payee address; 525 Almanor Ave., Sui	City, te 200	State,	Zip Code		
			Sunnyvale, CA 94085					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Telephone service					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held				
PAYMENT	(a) Amount Charged \$68.57	(b) Date of Charge 08/08/2024	(c) Date(s) Credit Card Is 09/05/2024	suer Paid				
PAYEE	Rick's On The Square		(b) Payee address; 104 W. Erwin St. Tyler, TX 75702-7227	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meeting to discuss officeholder matters					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Polling Expense Travel in Printing Expense Travel Out Salaries/Wages/Contract Labor OTHER (

	The Inst	ruction Guide explains how	to complete	this form.	(*	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 10/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$125.48	(b) Date of Charge 08/03/2024	(c) Date(s) 09/05/20	Credit Card Issuei 24	r Paid		
7 PAYEE	(a) Payee name Longview Flower S	hop		ethvin St.	City,	State,	Zip Code
A PURPOSE OF	(a) Category		(b) Descrip	r, TX 75601			
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Gift/Awards/Memorial		Funeral flowers				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name Office sought						
PAYMENT	(a) Amount Charged	(h) Data of Charge	(a) Data(a)	Cradit Card Issue	r Doid		
PAYMENT	(a) Amount Charged \$30.36	(b) Date of Charge 08/11/2024	09/05/20	Credit Card Issuer 24	i Palu		
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	OOMA, Inc. 525 Almanor Ave., Su		anor Ave., Suite 2	200			
			Sunnyva	le, CA 94085			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	otion ne service			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought		Office held		
PAYMENT	(a) Amount Charged \$10.67	(b) Date of Charge 09/12/2024	(c) Date(s) 10/15/20	Credit Card Issuer 24	r Paid		
PAYEE	(a) Payee name Adobe Inc.		(b) Payee San Jose San Jose		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (b)		(b) Descrip Software				
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX				officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 11/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$128.83	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issue 10/15/2024	er Paid			
7 PAYEE	(a) Payee name AT&T Mobility		(b) Payee address; 211 S. Akard	City,	State,	Zip Code	
	() 5 :		Dallas, TX 75202				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cell phone				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held			
PAYMENT	(a) Amount Charged \$79.51	(b) Date of Charge 09/28/2024	(c) Date(s) Credit Card Issue 10/15/2024	er Paid			
PAYEE	(a) Payee name Optimum		(b) Payee address; City, State, Zip Co PO Box 70340 Philadelphia, PA 19176-0340				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Internet service				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$14.94	(b) Date of Charge 09/22/2024	(c) Date(s) Credit Card Issue 10/15/2024	er Paid			
PAYEE	(a) Payee name Capitol Grill		(b) Payee address; 1400 Congress Ave. Austin, TX 78701		State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	·	(b) Description Meeting to discuss officel	nolder matters			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************		,
1 To	otal pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
S	ch: 12/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
	REDIT CARD SSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 P	AYMENT	(a) Amount Charged \$149.89	(b) Date of Charge 09/20/2024	(c) Date(s 10/15/20) Credit Card Issuel 124	r Paid		
7 P	AYEE	(a) Payee name Texas Chili Parlor		(b) Payee 1409 Lav Austin, T	/aca	City,	State,	Zip Code
8 P	URPOSE OF	(a) Category		(b) Description				
E .	XPENDITURE X Political	(See Categories listed at the top Food/Beverage Exper		Meeting to discuss officeholder matters				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct candidate/Officeholder name office sought expenditure to benefit C/OH					Office held			
P	AYMENT	(a) Amount Charged \$11.51	(b) Date of Charge 09/04/2024	(c) Date(s 10/15/20) Credit Card Issuel 124	r Paid		
P	AYEE	(a) Payee name Capitol Grill			ngress Ave.	City,	State,	Zip Code
E .	URPOSE OF XPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Exper		Austin, TX 78701 (b) Description Meeting to discuss officeholder matters				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
1	omplete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
P	AYMENT	(a) Amount Charged \$16.18	(b) Date of Charge 09/04/2024	(c) Date(s 10/15/20) Credit Card Issue 124	r Paid		
P	AYEE	(a) Payee name Capitol Grill	,		address; ngress Ave. TX 78701	City,	State,	Zip Code
E .	URPOSE OF XPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meeting to discuss officeholder matters				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
	omplete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	The Insti	ruction Guide explains how	•	THER (effer a category not listed to	above)		
1 Total pages Schedule F4:		·	<u> </u>	3 Filer ID (Ethics Commis	sion Filers)		
Sch: 13/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630	,		
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$62.79	(b) Date of Charge 09/12/2024	(c) Date(s) Credit Card Issuer 10/15/2024	r Paid			
7 PAYEE	(a) Payee name Crescent Court		(b) Payee address; 400 Crescent Court Dallas, TX 75201	City, State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meeting to discuss officeh	oolder matters			
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	e sought	Office held					
PAYMENT	(a) Amount Charged \$30.36	(b) Date of Charge 09/11/2024	(c) Date(s) Credit Card Issuer 10/15/2024	r Paid			
PAYEE	(a) Payee name OOMA, Inc.		(b) Payee address; City, State, Zip Code 525 Almanor Ave., Suite 200 Sunnyvale, CA 94085				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Telephone service				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$16.45	(b) Date of Charge 09/20/2024	(c) Date(s) Credit Card Issuer 10/15/2024	r Paid			
PAYEE	(a) Payee name Texas Chili Parlor		(b) Payee address; 1409 Lavaca Austin, TX 78707	City, State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meeting to discuss officeholder matters				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 14/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$129.04	(b) Date of Charge 10/26/2024	(c) Date(s)) Credit Card Issuer 124	r Paid		
7	PAYEE	(a) Payee name AT&T Mobility		(b) Payee 211 S. A	kard	City,	State,	Zip Code
8	PURPOSE OF	(a) Category		Dallas, T (b) Descri				
ľ	EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Cell phone				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct							
Ľ	expenditure to benefit C/OH	() 4 () 4	[(1) D () (0)	1() 5 ((5		
	PAYMENT	(a) Amount Charged \$12.91	(b) Date of Charge 10/10/2024	(c) Date(s)) Credit Card Issuer 124	r Paid		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Uber		1455 Market St., 4th Floo		r		
L					ncisco, CA 94103			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	ense	
-	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	Onedk ii 7 dastiii, 17x,	Office held	CHISC	
	PAYMENT	(a) Amount Charged \$20.50	(b) Date of Charge 10/16/2024	(c) Date(s)) Credit Card Issuer 124	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee address; 1455 Market St., 4th Floor San Francisco, CA 94103			State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	Category (b) Description Categories listed at the top of this schedule) Taxi					
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX				officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
H		1						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Sch: 15/32 Rpt:	2 FILER NAME						
			3 Filer ID (Ethics Commission File				sion Filers)
	Hughes, D. Bryan (The Honorable)			00051630		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$14.56	(b) Date of Charge 11/03/2024	(c) Date(s) 12/04/202	Credit Card Issuer 24	Paid		
7 PAYEE	(a) Payee name OOMA, Inc.			address; nor Ave., Suite 2 e, CA 94085	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descript	tion			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	[Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$115.45	(b) Date of Charge 09/16/2024	(c) Date(s) 10/15/202	Credit Card Issuer 24	Paid		
PAYEE	Doubletree Hotel		(b) Payee a 8250 Nort	th Central Expres	City, ssway	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descript				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. [Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$5.40	(b) Date of Charge 09/15/2024	(c) Date(s) 10/15/202	Credit Card Issuer 24	Paid		
PAYEE	(a) Payee name HP Instant Ink		(b) Payee address; Earley West 300 Thames Valley Park D Reading RG6 1PT United			State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descript Ink subsc				
Non-Political	1	of Texas. Complete Schedule T.	[Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l		The Inst	ruction Guide explains how	to complete this	s form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
l	Sch: 16/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	UNITEMIZED TURES O TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$10.67	(b) Date of Charge 10/12/2024	(c) Date(s) C 11/04/2024	redit Card Issuer	Paid		
7	PAYEE	(a) Payee name Adobe Inc.		(b) Payee ad San Jose C	CA .	City,	State,	Zip Code
Ļ		(a) Oatawari		San Jose, (b) Description				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Software				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
€	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$240.35	(b) Date of Charge 10/28/2024	(c) Date(s) Credit Card Issuer Paid 11/04/2024				
Г	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
				2201 N. Stemmons Freeway				
L		() -		Dallas, TX 75207				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging	on			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin, TX.	officeholder living exp	ense	
H	Complete ONLY if direct	Candidate/Officeholder	·	e sought	1	Office held		
6	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$53.25	(b) Date of Charge 10/02/2024	(c) Date(s) C 11/04/2024	redit Card Issuer	Paid		
	PAYEE	(a) Payee name La Plazita Mexican	Restaurant	(b) Payee address; 11980 Hwy. 64 W. Tyler, TX 75704		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meeting to discuss officeholder matters				
L	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX, officeholder living expense			
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking 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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 17/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$14.47	(b) Date of Charge 10/03/2024	(c) Date(s) Credit Card Issuel 11/04/2024	r Paid			
7 PAYEE	(a) Payee name OOMA, Inc.		(b) Payee address; 525 Almanor Ave., Suite 2 Sunnyvale, CA 94085	City, 200	State,	Zip Code	
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Telephone service				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$30.36	(b) Date of Charge 10/11/2024	(c) Date(s) Credit Card Issuel 11/04/2024	r Paid			
PAYEE (a) Payee name (b) Payee address;			(b) Payee address;	City,	State,	Zip Code	
	OOMA, Inc.		525 Almanor Ave., Suite 2	200			
			Sunnyvale, CA 94085				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Telephone service				
Non-Political	(a) Charle if the soul and side	of Towns Committee Colombials T	Observative TV	-## - - - - - - - -			
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Office held	ense		
Complete ONLY if direct expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$171.90	(b) Date of Charge 10/26/2024	(c) Date(s) Credit Card Issuel 11/04/2024	r Paid			
PAYEE	(a) Payee name Optimum		(b) Payee address; 1423 Red Ventures Dr. Fort Mill, SC 29707	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Internet service				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	_	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 18/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$21.31	09/09/2024	10/15/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Onstar Services		PO Box 1027					
			Warren, MI 48090-1027					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Office Overhead/Ren	,	Cell phone service					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 10/15/2024	er Paid				
	\$107.00	09/21/2024	10/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Hampton Inn Corsi	cana	623 Bryant's Way					
			Corsicana, TX 75109					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Lodging					
X Political	Traver out or District							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$14.47	09/03/2024	10/15/2024					
PAYEE	(a) Payee name	l	(b) Payee address;	City, State, Zip Code				
			525 Almanor Ave., Suite	200				
	OOMA, Inc.							
			Sunnyvale, CA 94085					
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description					
EXPENDITURE	Office Overhead/Ren	,	Telephone Service					
X Political								
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

	The Insti	ruction Guide explains how	to complete this form.	OTTIEN (enter a categor	y not listed a	5040)	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 19/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$			
6 PAYMENT	(a) Amount Charged \$137.17	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issu 10/15/2024	er Paid			
7 PAYEE	(a) Payee name Texas Chili Parlor		(b) Payee address; 1409 Lavaca	City,	State,	Zip Code	
8 PURPOSE OF	(a) Category		Austin, TX 78707 (b) Description				
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Exper	· ·	Meeting to discuss officeholder matters				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$22.08	(b) Date of Charge 09/05/2024	(c) Date(s) Credit Card Issu 10/15/2024	ıer Paid			
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Uber		1455 Market St., 4th Flo	or			
			San Francisco, CA 9410)3			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Taxi				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$18.97	(b) Date of Charge 09/16/2024	(c) Date(s) Credit Card Issu 10/15/2024	ıer Paid			
PAYEE	Uber		(b) Payee address; 1455 Market St., 4th Flo San Francisco, CA 9410		State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Taxi				
Non-Political	(c) Check if travel outside	of Texas, Complete Schedulo T	Chack if Austin T	X officeholder living over	nense		
Complete ONLY if direct expenditure to benefit C/OH	\(\frac{1}{2}\)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder livical Candidate/Officeholder name Office sought Office he					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 20/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$22.21	(b) Date of Charge 09/16/2024	(c) Date(s) Credit Card Issuel 10/15/2024	r Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1455 Market St., 4th Floor		State,	Zip Code
	() 0 :		San Francisco, CA 94103	.		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Taxi			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held			
PAYMENT	(a) Amount Charged \$16.91	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issue 10/15/2024	r Paid		
PAYEE (a) Payee name (b) Payee address			(b) Payee address;	City,	State,	Zip Code
	Uber		1455 Market St., 4th Floor			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top	of this schedule)	San Francisco, CA 94103 (b) Description Taxi			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$64.94	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issue 11/04/2024	r Paid		
PAYEE	(a) Payee name Apple Online Store		(b) Payee address; 12545 Riata Vista Cir. Austin, TX 78727-6524	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Software			
Non-Political	(c) Check if travel outside		officeholder living expens	se		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this	form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 21/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630			
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDIT	UNITEMIZED URES TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged \$6.14	(b) Date of Charge 10/18/2024	(c) Date(s) Cr 11/04/2024	edit Card Issuer	Paid			
7 PAYEE	(a) Payee name Capitol Cafe		(b) Payee add 1001 Congr Austin, TX 7	ess Ave.	City, State, Zip Cod			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meeting to discuss officeholder matters					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct candidate/Officeholder name office sought expenditure to benefit C/OH				Office held				
PAYMENT	(a) Amount Charged \$6.14	(b) Date of Charge 10/18/2024	(c) Date(s) Credit Card Issue 11/04/2024		Paid			
PAYEE	(a) Payee name Capitol Cafe	1001 Congress Ave.		ess Ave.	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Description Meeting to discuss officeholder matters					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
PAYMENT	(a) Amount Charged \$21.31	(b) Date of Charge 10/09/2024	(c) Date(s) Cr 11/04/2024	edit Card Issuer	Paid			
PAYEE	(a) Payee name Onstar Services		(b) Payee address; PO Box 1027 Warren, MI 48090-1027		City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description	n				
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
Sch: 22/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$14.23	10/29/2024					
7 PAYEE	(a) Payee name Uber			rket St., 4th Floor		State,	Zip Code
				icisco, CA 94103			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion			
X Political	Fees	or this scriedule)	Taxi				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$27.85	10/28/2024	11/04/20	24			
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Uber		1455 Ma	rket St., 4th Floor	•		
			San Francisco, CA 94103				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Taxi				
X Political	1 003						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged \$10.67	(b) Date of Charge 11/12/2024	(c) Date(s) 12/04/20	Credit Card Issuer 24	^r Paid		
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Adobe Inc.		San Jose	e CA			
	Adobe inc.			04.05440			
DUDDOCE OF	(a) Category		(b) Descrip	e, CA 95113			
PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Software				
X Political	Office Overhead/Rental Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin TV	officeholder living exp	nense	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	CHECK II AUSUII, TX,	Office held	JE113C	
expenditure to benefit C/OH		3	9		22		
	1						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officenoider/Politica	-	ruction Guide explains how	to complete th		THER (enter a categor	y not listed al	oove)
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 23/32 Rpt:	Hughes, D. Bryan (*	The Honorable)			00051630		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$984.56	(b) Date of Charge 11/08/2024	(c) Date(s) 0 12/04/2024	Credit Card Issue 4	r Paid		
7 PAYEE	(a) Payee name Apple Store #042 D	Pallas	(b) Payee at 3101 Knox Dallas, TX	St.	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T.						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$134.11	(b) Date of Charge 11/26/2024	(c) Date(s) 0 12/04/2024	Credit Card Issue 4	r Paid		
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	AT&T Mobility		211 S. Aka	ard			
			Dallas, TX	75202			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cell phone				
X Political			<u> </u>	_			
Non-Political	(1)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held		
PAYMENT	(a) Amount Charged \$21.31	(b) Date of Charge 11/09/2024	(c) Date(s) C 12/04/2024	Credit Card Issuel 4	r Paid		
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	Onstar Services		PO Box 10)27			
			Warren, M	I 48090-1027			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Cell phone				
X Political		— Р					
Non-Political	<u>··</u>			Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instr	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 24/32 Rpt:	Hughes, D. Bryan (*	The Honorable)		00051630		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$13.95	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issue 11/04/2024	r Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1455 Market St., 4th Floo San Francisco, CA 94103			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top- Fees	of this schedule)	<u>, </u>			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$13.97	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issue 11/04/2024	er Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1455 Market St., 4th Floo San Francisco, CA 94103			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Taxi			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$5.40	(b) Date of Charge 11/10/2024	(c) Date(s) Credit Card Issue 12/04/2024	er Paid		
PAYEE	(a) Payee name HP Instant Ink		(b) Payee address; Earley West 300 Thames Valley Park Reading RG6 1PT United			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Ink subscription			
Non-Political	`	of Texas. Complete Schedule T.				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commis	sion Filers)
	Sch: 25/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZEI NDITURES GED TO A CRED	\$		
6	PAYMENT	(a) Amount Charged \$238.36	(b) Date of Charge 11/12/2024	(c) Date(s 12/04/20	s) Credit Card Issu 024	ier Paid		
7	PAYEE	(a) Payee name Prime 102 Restaura	ant	(b) Payee 102 N. C	College	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descri		eholder matters		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living ex	pense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$49.58	(b) Date of Charge 11/01/2024	(c) Date(s 12/04/20	s) Credit Card Issu 024	ıer Paid		
	PAYEE	(a) Payee name Rick's On The Squa	are	(b) Payee 104 W. E		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Meeting to discuss officeholder matters				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, T	X, officeholder living ex	pense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$30.54	(b) Date of Charge 11/11/2024	(c) Date(s 12/04/20	s) Credit Card Issu 024	ıer Paid		
	PAYEE	(a) Payee name OOMA, Inc.			address; anor Ave., Suite ale, CA 94085	City, e 200	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni	tal Expense	(b) Descri Telepho	ne service			
lacksquare	Non-Political	(7)	of Texas. Complete Schedule T.	o covert	Check if Austin, T	X, officeholder living ex	pense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 26/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$159.26	(b) Date of Charge 11/02/2024	(c) Date(s) Credit Card Issuer 12/04/2024	Paid		
7 PAYEE	(a) Payee name Optimum		(b) Payee address; 1423 Red Ventures Dr.	City,	State,	Zip Code
0. DUDDOOF OF	(a) Catagony		Fort Mill, SC 29707			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Internet Service			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	ise	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held		
PAYMENT	(a) Amount Charged \$189.81	(b) Date of Charge 11/26/2024	(c) Date(s) Credit Card Issuer 12/04/2024	[*] Paid		
PAYEE	(a) Payee name Optimum		(b) Payee address; 1423 Red Ventures Dr. Fort Mill, SC 29707	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Internet service			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	ise	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$18.46	(b) Date of Charge 11/22/2024	(c) Date(s) Credit Card Issuel 12/04/2024	Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1455 Market St., 4th Floor San Francisco, CA 94103		State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Taxi			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	ise	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 27/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$55.92	(b) Date of Charge 11/08/2024	(c) Date(s) 12/04/20	Credit Card Issuel 24	r Paid		
7 PAYEE	(a) Payee name Rick's On The Squa	are	(b) Payee 104 W. E	rwin St.	City,	State,	Zip Code
0. PURPOSE OF	(a) Catagony		(b) Descrip	75702-7227			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe			to discuss officeh	nolder matters		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$208.84	(b) Date of Charge 12/26/2024	(c) Date(s)	Credit Card Issue	r Paid		
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	Office Max		5631 S. I	Broadway			
			Tyler, TX	75703			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX.	officeholder living exp	nense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought		Office held		
PAYMENT	(a) Amount Charged \$205.89	(b) Date of Charge 12/21/2024	(c) Date(s)	Credit Card Issue	r Paid		
PAYEE	(a) Payee name Office Max		(b) Payee 5361 S. I Tyler, TX	Broadway	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Printing Expense	of this schedule)	(b) Descrip Printing	otion			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics C	commiss	ion Filers)		
Sch: 28/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$13.18	(b) Date of Charge 11/01/2024	(c) Date(s) Credit Card Issuer 12/04/2024	Paid				
7 PAYEE	(a) Payee name Walmart #01044		(b) Payee address; 5050 Troup Hwy.	City,	State,	Zip Code		
	() -		Tyler, TX 75707					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office supplies					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	е			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$501.50	(b) Date of Charge 12/27/2024	(c) Date(s) Credit Card Issuer	^r Paid				
PAYEE	(a) Payee name United States Posta	al Service	(b) Payee address; City, State, Zip Coo 2100 W. Martin Uther King Jr. Blvd. Tyler, TX 75702					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Postage					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	е			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$47.89	(b) Date of Charge 11/22/2024	(c) Date(s) Credit Card Issuer 12/04/2024	[.] Paid				
PAYEE	(a) Payee name Texas Chili Parlor		(b) Payee address; 1409 Lavaca Austin, TX 78707	City, S	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Description Meeting to discuss officeholder matters					
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense	е			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	Candidate/Officeriolder/Folitica	ŭ	ruction Guide explains how	to complete		TIEN (elitel à catego	ry not listed a	bove)
1	Total pages Schedule F4:		·	•		3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 29/32 Rpt:	Hughes, D. Bryan (The Honorable)			00051630		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$18.92	(b) Date of Charge 11/22/2024	(c) Date(s 12/04/20) Credit Card Issuer)24	Paid		
7	PAYEE	(a) Payee name Uber			address; irket St., 4th Floor ncisco, CA 94103	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	· —	Candidate/Officeholder	name Office	e sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$134.11	(b) Date of Charge 12/26/2024	(c) Date(s) Credit Card Issuer	Paid		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		AT&T Mobility		211 S. A				
L		() 0 :		Dallas, T				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Cell phone service				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	I	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$274.24	(b) Date of Charge 12/26/2024	(c) Date(s) Credit Card Issuer	Paid		
	PAYEE	(a) Payee name Office Depot Tyler		(b) Payee 4329 Old Tyler, TX	d Bullard Rd	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Office su	ption			
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commis	sion Filers)				
Sch: 30/32 Rpt:	Hughes, D. Bryan (The Honorable)		00051630						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid						
	\$189.81	12/26/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Optimum		1423 Red Ventures Dr	·						
			Fort Mill, SC 29707							
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top		Internet service							
X Political	Office Overhead/Rent	tal Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	ı, TX, officeholder living ex	pense					
			e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid						
	\$73.53	12/18/2024								
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Biolds On The Court		104 W. Erwin St.							
	Rick's On The Squa	are								
			Tyler, TX 75702-7227							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting to discuss officeholder matters							
X Political	Food/Beverage Exper		Meeting to discuss oil	cenoider matters						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	ı, TX, officeholder living ex	pense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid						
	\$39.35	12/27/2024								
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code				
			2627 S. Broadway Ave	е.						
	United States Post	Office, Azalea								
			Tyler, TX 75701-9998							
PURPOSE OF	(a) Category	-# 4bib4: d->	(b) Description							
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	•	Postage							
X Political	X Political Office Overhead/Kental Expense									
Non-Political										
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica	-	ices Sa ruction Guide explains how	alaries/Wages/Cont		THER (enter a categor	y not listed al	bove)
1 Total pages Cabadula E4		Tuction Guide explains now	v to complete th		3 Filer ID (Ethic		sion Filoro)
1 Total pages Schedule F4: Sch: 31/32 Rpt:	Hughes, D. Bryan (The Henerable)			00051630	,5 CUIIIIII55	SIOII FIIEIS)
4 CREDIT CARD		ncial institution	Is TOTAL O	OF UNITEMIZED	00031030		
ISSUER			EXPEND		\$		
	See pi	revious	CHARGE CARD	ED TO A CREDIT			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$114.95	12/28/2024	(5) = 1115 (5)				
	\$114.95	12/20/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
			2627 S. Bı	roadway Ave.			
	United States Post	Office, Azalea					
			Tyler, TX	75701-9998			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cahadula)	(b) Descript	ion			
l <u>—</u>	Office Overhead/Rent	*	Postage				
X Political							
Non-Political	<u> </u>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	r Paid		
	\$306.24	12/26/2024					
	4000.21	12,20,2021					
PAYEE	(a) Payee name	I	(b) Payee a	ddress;	City,	State,	Zip Code
	United States Bost	Office Azalos	2627 S. Bı	roadway Ave.			
	United States Post	Office, Azalea					
				75701-9998			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript	ion			
l <u>—</u>	Office Overhead/Rent		Postage				
X Political	<u> </u>		<u> </u>				
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	L Cought	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Onic	ce sought		Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	r Paid		
TATMENT		08/27/2024	09/05/202		i did		
	\$42.44	08/2//2024					
PAYEE	(a) Payee name	<u> </u>	(b) Payee a	ddress;	City,	State,	Zip Code
			615 I-30 S		- 9,	,	
	SilverGrill						
			Mt. Vernor	n, TX 75457			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	•	Meeting to	discuss officeh	older matters		
X Political							
Non-Political	<u> </u>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica	-	rices S ruction Guide explains how	alaries/Wages/Contract Labor	OTHER (enter a category	y not listed at	Jove)
4. Total pages Calcadula E4.		Tuction Guide explains not	v to complete this form.	a Filer ID (Ethic	a Commiss	ion Filoro)
1 Total pages Schedule F4:		-		3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 32/32 Rpt:	Hughes, D. Bryan (-	T	00051630		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZE EXPENDITURES	ED \$		
ISSUER	see pi	revious	CHARGED TO A CRE			
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is:	suer Paid		
	\$35.00	12/09/2024				
7 PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code
	` '		PO Box 8175			
	Smith County Repu	ıblican Women				
			Tyler, TX 75711-8175			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Membership			
X Political	Fees					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chook if Austin	ı, TX, officeholder living exp	0000	
9 Complete ONLY if direct	Candidate/Officeholder		ce sought	Office held	ense	
expenditure to benefit C/OH	Candidate/Officeriolder	name Om	cc sought	Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is:	suar Daid		
FAIMENT	1		(c) Date(s) Credit Card is.	suei Faiu		
	\$163.46	12/30/2024				
DAVEE	/ > =		10.5			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
PAYEE		1	(b) Payee address; 151 Union St.	City,	State,	Zip Code
PAYEE	(a) Payee name Mark&Graham.com	1	151 Union St.		State,	Zip Code
	Mark&Graham.com	1	151 Union St. San Francisco, CA 94.		State,	Zip Code
PURPOSE OF	Mark&Graham.com		151 Union St. San Francisco, CA 942 (b) Description		State,	Zip Code
PURPOSE OF EXPENDITURE	Mark&Graham.com	of this schedule)	151 Union St. San Francisco, CA 94.		State,	Zip Code
PURPOSE OF EXPENDITURE X Political	Mark&Graham.com (a) Category (See Categories listed at the top	of this schedule)	151 Union St. San Francisco, CA 942 (b) Description		State,	Zip Code
PURPOSE OF EXPENDITURE	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items			Zip Code
PURPOSE OF EXPENDITURE X Political	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 94: (b) Description Fundraising items	111		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code
PURPOSE OF EXPENDITURE X Political Non-Political Complete ONLY if direct	Mark&Graham.com (a) Category (See Categories listed at the top Solicitation/Fundraisir (c) Check if travel outside	of this schedule) ng Expense of Texas. Complete Schedule T.	151 Union St. San Francisco, CA 942 (b) Description Fundraising items	111 n, TX, officeholder living exp		Zip Code

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	ft/Awards/Memorials Expense gal Services Printing Expense Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)			
	orean out a tyment		The Instruction Guide explains I	now to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAME	≣			3 Filer	ID (Ethics Commission Filers)			
	Sch: 1/2 Rpt: 192/201	Hughes, D.	Bryan (The Honorable)			000	51630			
4	Date	5 Payee name								
	10/03/2024	Lone Star \								
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode					
	\$10.00	1802 W. Br	aker Ln.							
	Reimbursement from									
	X political contributions intended	Austin, TX	78758							
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sche	edule)	(b) Description	Check if	travel outside of Texas. Complete Schedule T.			
	OF	Fees			``	Check if	Austin, TX, officeholder living expense			
	EXPENDITURE				Parking expense	:				
9	Complete ONLY if direct	L Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit									
	C/OH									
	Date	Payee name								
	12/15/2024	Senate Lac	lies Club							
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode					
	\$2,750.00	PO Box 12	068							
	Reimbursement from									
	X political contributions intended	Austin, TX	78711							
_	PURPOSE		ee Categories listed at the top of this sche	adula)	Description	Check if	travel outside of Texas. Complete Schedule T.			
	OF	Fees	ee Categories listed at the top of this scrie	euule)		=	Austin, TX, officeholder living expense			
	EXPENDITURE	1 1 2 2 3			Event expense.	_				
_	Complete ONLY if direct	Landidate/Office	holder name		Office sought		Office held			
	expenditure to benefit	Carraractor Cinico	noider name		Cinec sought		Silies Held			
	C/OH									
	Date	Payee name								
	12/19/2024	Smith Cour	nty Republican Women							
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode					
	\$35.00	PO Box 81		·						
	Reimbursement from									
	X political contributions intended	Tyler, TX 7	5711-8175							
	PURPOSE	· ·	ee Categories listed at the top of this sche	edule)	Description	Check if	travel outside of Texas. Complete Schedule T.			
	OF	Fees	3	,		Check if	Austin, TX, officeholder living expense			
	EXPENDITURE				Ticket					
	Complete ONLY if direct	<u>I</u> Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit									
	C/OH									

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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

	Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense	Pointing Expense Printing Expense Salaries/Wages/Contract Labor ow to complete this form.	Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/2 Rpt: 193/201	Hughes, D. Bryan (The Honorable)		00051630
4	Date	Payee name		1
	12/19/2024	Smith County Republican Women		
6	Amount (\$)	Payee address; City; State;	Zip Code	
	\$600.00	PO Box 8175		
	Reimbursement from political contributions intended	Tyler, TX 75711-8175		
8	PURPOSE OF	a) Category (See Categories listed at the top of this sched	dule) (b) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense		Check if Austin, TX, officeholder living expense
			Contribution	
_	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	". I	0,5	0.00
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	andidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	08/24/2024	Texas Young Republicans		
	Amount (\$)	Payee address; City; State;	Zip Code	
	\$1,500.00	2604 Bright Rock Ln.		
	Reimbursement from			
	x political contributions intended	Conroe, TX 77304		
	PURPOSE	Category (See Categories listed at the top of this sched	dule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if Austin, TX, officeholder living expense
	EXI ENSITORE		Sponsorship	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	andidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	12/27/2024	United States Post Office, Azalea		
	Amount (\$)	Payee address; City; State;	Zip Code	
	\$3,606.05	2627 S. Broadway Ave.		
	Reimbursement from political contributions intended	Tyler, TX 75701-9998		
	PURPOSE	Category (See Categories listed at the top of this sched	dule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
			Postage	
	Complete ONLY if direct expenditure to benefit C/OH	andidate/Officeholder name	Office sought	Office held

╙							
	The Instru	ction Guide explains how to complete this form.	1		•	ages Schedule K: /8 Rpt: 194/201	
2	FILER NAME		3		Filer ID	(Ethics Commiss	sion Filers)
	Hughes, D. I	630					
4	Date	5 Name of person from whom amount is received				8 Amount (\$)	
	08/06/2024	Austin Bank				(4)	\$3,260.23
	00/00/2024						Ψ0,200.20
		6 Address of person from whom amount is received; City; State; Zip Code					
		Tyler, TX 75703					
			l a				r:1
		7 Purpose for which amount is received	Check if polit	tica	al contr	ibution returned to	filer
		Interest income					
	Date	Name of person from whom amount is received				Amount (\$)	
	11/06/2024	Austin Bank					\$3,301.32
		Address of person from whom amount is received; City; State; Zip Code		••••			
		Tyler, TX 75703					
		Purpose for which amount is received	Check if polit	tica	al contr	ibution returned to	filer
		Interest income	O'look ii poile		ai 0011ti	ibation rotamod to	
L						T	
	Date	Name of person from whom amount is received				Amount (\$)	
	12/06/2024	Austin Bank					\$1,090.08
		Address of person from whom amount is received; City; State; Zip Code					
		Tyler, TX 75703					
		Purpose for which amount is received	Check if polit	tica	al contr	ibution returned to	filer
		Interest income					
F	Date	Name of person from whom amount is received				Amount (\$)	
	07/03/2024	Citizens 1st Bank				(1)	\$552.70
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Address of person from whom amount is received; City; State; Zip Code					
		Tyler, TX 75701					
			Charle if malit	4:		ila sati a a material and the s	61
		Purpose for which amount is received Interest income	Cneck if polit	tica	ai contr	ibution returned to	nier
L		interest income					
	Date	Name of person from whom amount is received				Amount (\$)	
	10/03/2024	Citizens 1st Bank					\$1,698.44
		Address of person from whom amount is received; City; State; Zip Code					
1							
		Tyler, TX 75701					
1		Purpose for which amount is received	Check if polit	tica	al contr	ibution returned to	filer
		Interest income					
\vdash							

	The Instruction Guide explains how to complete this form.						pages Schedule K: 2/8 Rpt: 195/201	
2	FILER NAME	2 rv	an (The Honorable)		3	Filer II	D (Ethics Commissi	on Filers)
	nugnes, D. i	эгу	an (the honorable)			0005.		
4	Date 07/30/2024	5	Name of person from whom amount is received City National Bank				8 Amount (\$)	\$1,818.93
		6	Address of person from whom amount is received; City; State; Zip Code					
			Mineola, TX 75773					
		7	Purpose for which amount is received Interest income	Check if po	litic	al con	tribution returned to fi	ler
	Date	Г	Name of person from whom amount is received				Amount (\$)	
	10/30/2024		City National Bank					\$1,860.69
		ļ	Address of person from whom amount is received; City; State; Zip Code					
			Minople TV 75772					
		L	Mineola, TX 75773					
				Check if po	litic	cal con	tribution returned to fi	ler
			Interest income					
	Date		Name of person from whom amount is received				Amount (\$)	
	11/29/2024		City National Bank					\$634.48
		ļ	Address of person from whom amount is received; City; State; Zip Code		•••••		.	
			Mineola, TX 75773					
		H	Purpose for which amount is received	Check if po	litic	al con	tribution returned to fi	ler
			Interest income	·				
	Date	\vdash	Name of person from whom amount is received				Amount (\$)	
	07/18/2024		Farmers Bank & Trust				7 πσαια (φ)	\$1,100.98
	0.7207202.	ļ	Address of person from whom amount is received; City; State; Zip Code					+=,=====
			Address of person from whom amount is received, Gity, State, 219 Code					
			Paris, TX 75460					
		Г	Purpose for which amount is received	Check if po	litic	al con	tribution returned to fi	ler
			Interest income					
	Date	Ħ	Name of person from whom amount is received				Amount (\$)	
	08/16/2024		Farmers Bank & Trust					\$1,142.57
		ļ	Address of person from whom amount is received; City; State; Zip Code				·	
			· · · · · · · · · · · · · · · · · · ·					
			Paris, TX 75460					
			Purpose for which amount is received	Check if po	litic	al con	tribution returned to fi	ler
			Interest income					

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	The Instru	cti	on Guide explains how to complete this form.		1		pages Schedule K: 3/8 Rpt: 196/201	
2	FILER NAME				3	Filer	D (Ethics Commiss	ion Filers)
	Hughes, D. Bryan (The Honorable) 00051							
4	4 Date 5 Name of person from whom amount is received						8 Amount (\$)	
ľ	09/18/2024		Farmers Bank & Trust				7 (4)	\$1,147.62
	00/10/2024		Ψ1,1-11.02					
	6 Address of person from whom amount is received; City; State; Zip Code							
			Paris, TX 75460					
		 -	Purpose for which amount is received	7 Charlette	- I:4:			:1
		ľ	Interest income	_ Check ii p	OIILI	cai coi	ntribution returned to f	lier
L			interest income					
	Date		Name of person from whom amount is received				Amount (\$)	
	10/18/2024		Farmers Bank & Trust					\$1,115.54
			Address of person from whom amount is received; City; State; Zip Code				"]	
			Paris, TX 75460					
		Г	Purpose for which amount is received	Check if p	oliti	cal cor	ntribution returned to f	iler
			Interest income					
F	Date	<u> </u>	Name of person from whom amount is received				Amount (\$)	
	11/18/2024		Farmers Bank & Trust				Amount (ψ)	\$1,157.66
	11/10/2024	ļ						Ψ1,107.00
			Address of person from whom amount is received; City; State; Zip Code	2				
			Paris, TX 75460					
		⊢	Purpose for which amount is received	7 Charle if m	- I:4:	!	stribtion not model to f	:1
			Interest income	_ Check ii p	OIILI	cai coi	ntribution returned to f	lier
L		L	interest income					
	Date		Name of person from whom amount is received				Amount (\$)	
	12/18/2024	ļ	Farmers Bank & Trust					\$1,125.28
		l	Address of person from whom amount is received; City; State; Zip Code	9			"]	
		L	Paris, TX 75460					
			Purpose for which amount is received	Check if p	oliti	cal cor	ntribution returned to f	iler
			Interest income					
F	Date	Ī	Name of person from whom amount is received				Amount (\$)	
	12/31/2024		Hughes, Bryan					\$3,132.33
		ļ	Address of person from whom amount is received; City; State; Zip Code					
			That is a second of person from whom amount is reconced, only, state, hip code					
			Tyler, TX 75707					
		\vdash	Purpose for which amount is received	Check if n	oliti	cal cor	<u> </u>	iler
			Mileage reimbursement	T CHECK II b	ontl	cui cui	ia ibudon returneu (O I	1101
\vdash			militago formulationiti					
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	The Instru	ction Guide explains how to complete this form.	1			ages Schedule K: /8 Rpt: 197/201	
2	FILER NAME		3	F	iler ID	(Ethics Commissi	on Filers)
	Hughes, D. I	0051					
<u>_</u>	Date	5 Name of person from whom amount is received	I			8 Amount (\$)	
ľ	07/31/2024	Southside Bank				σ Amount (ψ)	\$0.43
	07/31/2024						Ψ0.43
		6 Address of person from whom amount is received; City; State; Zip Code					
		Tyler, TX 75710-1079					
		7 Purpose for which amount is received	Check if politi	ica	l contr	ibution returned to fi	ler
		Interest income					
F	Date	Name of person from whom amount is received				Amount (\$)	
	08/31/2024	Southside Bank				7 unount (4)	\$0.43
	00/31/2024						Ψ0.43
		Address of person from whom amount is received; City; State; Zip Code					
		Tyler, TX 75710-1079					
		Purpose for which amount is received	Check if politi	ica	I contr	ibution returned to fi	ler
		Interest income					
	Date	Name of person from whom amount is received				Amount (\$)	
	09/11/2024	Southside Bank				, ,	\$2,971.91
		Address of person from whom amount is received; City; State; Zip Code					, ,-
		Address of person from whom amount is received, City, State, 21p Code					
		Tyler, TX 75710-1079					
			Chook if politi	ioo	Loontr	ibution returned to fi	lor
		Interest income	спеск п рош	ıca	i COIIII	ibution returned to it	iei
L		interest income					
	Date	Name of person from whom amount is received				Amount (\$)	
	09/30/2024	Southside Bank					\$0.31
		Address of person from whom amount is received; City; State; Zip Code					
		Tyler, TX 75710-1079					
		Purpose for which amount is received	Check if politi	ica	l contr	ibution returned to fi	ler
		Interest income	Chook ii poilti	·ou	. 001111	ibation rotarried to in	
⊨							
	Date	Name of person from whom amount is received				Amount (\$)	
	10/31/2024	Southside Bank					\$0.30
		Address of person from whom amount is received; City; State; Zip Code					
1							
		Tyler, TX 75710-1079					
		Purpose for which amount is received	Check if politi	ica	I contr	ibution returned to fi	ler
1		Interest income	•				
\vdash							

	The Instru	pages Schedule K: 5/8 Rpt: 198/201			
2	FILER NAME		3	Filer I	C (Ethics Commission Filers)
	Hughes, D. I	L630			
4	Date	5 Name of person from whom amount is received			8 Amount (\$)
	11/30/2024	Southside Bank			\$0.29
		6 Address of person from whom amount is received; City; State; Zip Code			•
		Address of person from whom amount is received, City, State, 21p Code			
		Tyler, TX 75710-1079			
			f politi	ool oont	ribution returned to filer
		Interest income	проши	cai com	ribution returned to filer
		interest income			1
	Date	Name of person from whom amount is received			Amount (\$)
	12/11/2024	Southside Bank			\$2,894.16
		Address of person from whom amount is received; City; State; Zip Code			1
		Tyler, TX 75710-1079			
		Purpose for which amount is received Check	f politi	cal cont	ribution returned to filer
		Interest income			
-	Date	Name of person from whom amount is received			Amount (\$)
	12/31/2024	Southside Bank			\$0.31
	12/01/2024				
		Address of person from whom amount is received; City; State; Zip Code			
		Tyler, TX 75710-1079			
		<u> </u>	f noliti	cal cont	I ribution returned to filer
		Interest income	ii poiiti	cai com	indution returned to mer
					T
	Date	Name of person from whom amount is received			Amount (\$)
	07/03/2024	Texas Bank and Trust			\$842.28
		Address of person from whom amount is received; City; State; Zip Code			
		Longview, TX 75606			
		Purpose for which amount is received	f politi	cal cont	ribution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	07/31/2024	Texas Bank and Trust			\$639.18
		Address of person from whom amount is received; City; State; Zip Code			1
		Longview, TX 75606			
		<u> </u>	f politi	cal cont	ribution returned to filer
		Interest income	20110		
-					

	The Instruction Guide explains how to complete this form.						pages Schedule K: 6/8 Rpt: 199/201	
2	FILER NAME				3	Filer I	D (Ethics Commission Fil	ers)
	Hughes, D. Bryan (The Honorable)						1630	
4	Date	5	Name of person from whom amount is received	I			8 Amount (\$)	
	09/02/2024		Texas Bank and Trust				\$6	82.65
		6	Address of person from whom amount is received; City; State; Zip Code					
		ľ	Address of person from whom amount is received, Only, State, 219 Source					
			Longview, TX 75606					
		7	Purpose for which amount is received	Check if po	litic	al con	tribution returned to filer	
			Interest income					
	Date	╁	Name of parean from whom amount is received				Amount (\$)	
	09/30/2024		Name of person from whom amount is received Texas Bank and Trust				Amount (\$)	547.80
	03/30/2024	ļ						1.00
			Address of person from whom amount is received; City; State; Zip Code					
			Longview, TX 75606					
		H		Chock if no	litic	sal con	I tribution returned to filer	
			Interest income	Check ii po	IILIC	ai cui	inbution returned to mer	
		<u> </u>					ī	
	Date		Name of person from whom amount is received				Amount (\$)	40
	10/03/2024	ļ	Texas Bank and Trust				\$ ^{\&}	358.42
Address of person from whom amount is received; City; State; Zip Code								
			Longvious TV 75606					
		⊢	Longview, TX 75606					
			Purpose for which amount is received Interest income	Check if po	litic	cal con	tribution returned to filer	
		<u> </u>	interest income					
	Date		Name of person from whom amount is received				Amount (\$)	
	10/31/2024	<u> </u>	Texas Bank and Trust				\$5	59.00
			Address of person from whom amount is received; City; State; Zip Code					
			L					
		┡	Longview, TX 75606					
				Check if po	litic	al con	tribution returned to filer	
			Interest income					
	Date		Name of person from whom amount is received				Amount (\$)	
	12/01/2024		Texas Bank and Trust				\$5	27.13
			Address of person from whom amount is received; City; State; Zip Code		••••			
			Longview, TX 75606					
			-	Check if po	litic	al con	tribution returned to filer	_
		L	Interest income					

	The Instru	ages Schedule K: /8 Rpt: 200/201			
2	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Hughes, D. I	00051	630		
4	Date	5 Name of person from whom amount is received			8 Amount (\$)
	12/31/2024	Texas Bank and Trust			\$501.77
		6 Address of person from whom amount is received; City; State; Zip Code			
		7 Address of person from whom difficult is received, Only, State, 21p Code			
		Longview, TX 75606			
		<u> </u>	c if politic	ral contr	Iribution returned to filer
		Interest income	t ii poiliit	oar ooria	ibation rotalined to mor
	Date	Name of person from whom amount is received			Amount (\$)
	07/31/2024	Texas Regional Bank			\$1,500.86
		Address of person from whom amount is received; City; State; Zip Code			
		Austin, TX 78701			
		<u> </u>	c if polition	cal contr	ribution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	08/30/2024	Texas Regional Bank			\$1,378.74
		Address of person from whom amount is received; City; State; Zip Code			
		Austin, TX 78701			
		<u> </u>	c if polition	cal contr	ribution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	09/30/2024	Texas Regional Bank			\$1,566.64
		Address of person from whom amount is received; City; State; Zip Code			
		Austin, TX 78701			
		Purpose for which amount is received	c if politic	cal contr	ribution returned to filer
		Interest income	·		
_	Date	Name of person from whom amount is received			Amount (\$)
	10/31/2024	Texas Regional Bank			\$1,667.03
	10/01/2021				Ψ <u>1</u> ,007.00
		Address of person from whom amount is received; City; State; Zip Code			
		Austin, TX 78701			
			c if politic	ral contr	l ribution returned to filer
		Interest income	i ponul	ou conti	ibation retained to iliel
		more security			

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 8/8 Rpt: 201/201 2 FILER NAME Filer ID (Ethics Commission Filers) Hughes, D. Bryan (The Honorable) 00051630 8 Amount (\$) Date 5 Name of person from whom amount is received 11/29/2024 Texas Regional Bank \$1,787.43 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701 Purpose for which amount is received Check if political contribution returned to filer Interest income Amount (\$) Name of person from whom amount is received Date 12/31/2024 Texas Regional Bank \$2,029.22 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701 Purpose for which amount is received Check if political contribution returned to filer Interest income