

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00036483	2 Total pages filed: 65	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Phillip S.	MI	OFFICE USE ONLY
	NICKNAME Phil	LAST King	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 1913 Weatherford, TX 76086			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Jimmy R.	MI	
	NICKNAME	LAST Day	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 925 Santa Fe Drive, Ste. 101 Weatherford, TX 76086			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(817)	550-6300		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 10/27/2024	THROUGH	Month Day Year 12/31/2024	
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE	
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) State Senator District 10		12 OFFICE SOUGHT (if known)	
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME King, Phillip S. (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00036483

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input checked="" type="checkbox"/> GENERAL	Texas Alliance for Life PAC
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	8000 Centre Park Drive Suite 380
	Austin, TX 78754
	COMMITTEE CAMPAIGN TREASURER NAME
	Shaw, James
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	4505 Corazon Cv
	Round Rock, TX 78681

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 255,900.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 3,689.85
	4. TOTAL POLITICAL EXPENDITURES	\$ 111,927.93
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 833,597.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Phillip S. King

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH
ADDENDUM

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C / OH NAME	King, Phillip S. (The Honorable)	Filer ID	(Ethics Commission Filers)
		00036483	

17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Patriot Mobile Action PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		401 N Carroll Ave Suite 425 Southlake, TX 76092
	COMMITTEE CAMPAIGN TREASURER NAME	Martin, Steven
	COMMITTEE CAMPAIGN TREASURER ADDRESS	401 N Carroll Ave Suite 425 Southlake, TX 76092

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME King, Phillip S. (The Honorable)		19 Filer ID (Ethics Commission Filers) 00036483
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 255,600.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 300.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 111,723.65
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 204.28
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 9,843.92

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/28 Rpt: 5/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00084475) 3M PAC <hr/> 6 Contributor address; City; State; Zip Code St. Paul, MN 55144	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACT For Texas Classroom Teachers Association <hr/> Contributor address; City; State; Zip Code Austin, TX 78767	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00040279) Abbott Laboratories Employee PAC <hr/> Contributor address; City; State; Zip Code Abbott Park, IL 60064	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlberg, Trevor <hr/> Contributor address; City; State; Zip Code Irving, TX 75038	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Cottonwood Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/28 Rpt: 6/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Boone Humphries Robinson, LLP <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00089136</u>) Altria Group, Inc. PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00040535</u>) American Express PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00066472</u>) American Property Casualty Insurance Assn. PAC <hr/> Contributor address; City; State; Zip Code Chicago, IL 60631	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ancira Strategic Partners, LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/28 Rpt: 7/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aransas-Corpus Christi Pilots PAC 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78403	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Builders and Contractors 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 Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00450916 _____) Asurion PAC Contributor address; City; State; Zip Code Nasvhille, TN 37203	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atmos Energy Corporation PAC Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Police Association PAC Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/28 Rpt: 8/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BNSF RAILPAC	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76161		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BP North America Employee PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Montgomery	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Dallas, TX 75254		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Ashford, Inc.
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boenker IV, Alvin	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Weatherford, TX 76085		
Principal occupation / Job title (See Instructions) insurance		Employer (See Instructions) self
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler Snow LLP	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Ridgeland, MS 39158		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/28 Rpt: 9/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Tommy <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76087	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Tommy <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calpine Corporation PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$3,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Centene Corporation PAC <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63105	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charter Schools Now PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/28 Rpt: 10/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyandro, John	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00248716</u>) Comcast Corp. and NBC Universal PAC	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Philadelphia, PA 19103	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connelly, Rebecca	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delisi Communications PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00363879</u>) ENPAC Texas	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/28 Rpt: 11/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/10/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00219642) Enterprise Holdings, Inc./Enterprise Mobility PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code St. Louis, MO 63105	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erben & Yarbrough	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eye-PAC of the Texas Ophthalmological Assn.	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley & Lardner, LLP Texas Campaign Fund	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Curtis	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Media Choice

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/28 Rpt: 12/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Donald <hr/> 6 Contributor address; City; State; Zip Code Azle, TX 76098	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of the University PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78763	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GPM PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78265	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Jon <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Apex
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00199257) GenenPAC <hr/> Contributor address; City; State; Zip Code So. San Francisco, CA 94080	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/28 Rpt: 13/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germania Farm Mutual PAC <hr/> 6 Contributor address; City; State; Zip Code Brenham, TX 77834	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaub, Charlene <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Ken <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden Spread PAC <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79105	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg Taurig, PA PAC <hr/> Contributor address; City; State; Zip Code Albany, NY 12207	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/28 Rpt: 14/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulf States Toyota, Inc. State PAC	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Houston, TX 77077		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HCA Texas Good Government Fund	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75240		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HMWK, LLC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HS Law PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HillCo PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/28 Rpt: 15/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland and Knight Texas PAC <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Police Retired Officers Assn. PAC Fund <hr/> Contributor address; City; State; Zip Code Houston, TX 77219	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBAT PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IEC of Texas PAC Fund <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INDEPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/28 Rpt: 16/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Incline PAC	7 Amount of Contribution (\$) \$2,000.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Walker, LLP PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Junior and Community College PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kickapoo Traditional Tribe of Texas	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Eric	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Weatherford, TX 76087		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/28 Rpt: 17/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Austin, TX 78760		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke Lord LLP	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Kaden	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00225342</u>) McGuire Woods Federal PAC Fund	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Richmond, VA 23219		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McRae, Cody	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77042		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/28 Rpt: 18/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montford, John	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78257		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/28/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00283135</u>) NABIP Texas PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Cranford, NJ 07016		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAIFA Texas IFAPAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NFIB Texas PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Washington, DC 20004		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michael	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Kingwood, TX 77345		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/28 Rpt: 19/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/14/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00431932) Ovintiv USA Inc. PAC	7 Amount of Contribution (\$) \$2,000.00
6 Contributor address; City; State; Zip Code Denver, CO 80202		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of Winstead PC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of the Indepent Insurance Agents of Texas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78768		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00025395) PNM Responsible Citizens Group	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Albuquerque, NM 87158		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penn Entertainment, Inc. Texas PAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Wyomissing, PA 19610		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/28 Rpt: 20/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perot, Jr, Ross <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) Hillwood Development
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PharmPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poinsett PLLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Populus Financial Group, Inc. Texas PAC <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riceland Consulting, LLC <hr/> Contributor address; City; State; Zip Code Eagle Lake, TX 77434	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/28 Rpt: 21/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robison, Douglass	7 Amount of Contribution (\$) \$2,000.00
6 Contributor address; City; State; Zip Code Abilene, TX 79605		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rock Holdings Inc. State PAC	Amount of Contribution (\$) \$1,250.00
Contributor address; City; State; Zip Code Lansing, MI 48933		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rural Friends of Electric Cooperatives	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Texas PAC	Amount of Contribution (\$) \$7,500.00
Contributor address; City; State; Zip Code Dallas, TX 75240		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rydman, John	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Houston, TX 77007		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Spec's

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/28 Rpt: 22/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabine Pilot PAC <hr/> 6 Contributor address; City; State; Zip Code Port Arthur, TX 77640	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Professional Firefighters Assn. PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheffler, Cynthia <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sledge Law Group, PLLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Debra <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/28 Rpt: 23/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Gary <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76086	7 Amount of Contribution (\$) \$750.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern Glazer's PAC of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southwestern Committee on Political Education <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79101	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00361758</u>) T-Mobile PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALAPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/28 Rpt: 24/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALHI Life Insurance PAC	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code Austin, TX 78767		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TBA Bank PAC - State	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TBA Bank PAC - State	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSAPAC	Amount of Contribution (\$) \$3,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXTA TruckPAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/28 Rpt: 25/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenaska Employees Texas PAC	7 Amount of Contribution (\$) \$2,000.00
6 Contributor address; City; State; Zip Code Omaha, NE 68154		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tex-Pipe PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC	Amount of Contribution (\$) \$15,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Reasonable Solutions PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78741		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Aggregates & Concrete Assn. PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/28 Rpt: 26/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas BOMA PAC	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Leander, TX 78646		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Bail PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Bitcoin PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Building Branch AGC PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Consumer Credit Coalition PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code New Braunfels, TX 78131		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/28 Rpt: 27/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Consumer Lenders PAC	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Greenville, SC 29615		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Cornerstone Credit Union League PAC	Amount of Contribution (\$) \$3,000.00
Contributor address; City; State; Zip Code Dallas, TX 75265		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Food & Fuel Association PAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Impact	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78726		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Leads PAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Austin, TX 78767		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/28 Rpt: 28/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Mortgage Bankers Association PAC	7 Amount of Contribution (\$) \$3,500.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Restaurant Association PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78767		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Sands PAC	Amount of Contribution (\$) \$4,500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas State Farm Agents PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Lakeway, TX 78734		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Statewide Telephone Coop, Inc. PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/28 Rpt: 29/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Towing & Storage Association PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Spring, TX 77386	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas and Southwestern Cattle Raisers Association	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76185	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00085316</u>) The Cigna Group Employee PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Philadelphia, PA 19192	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00284885</u>) The Home Depot PAC	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Washington, DC 20004	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/28 Rpt: 30/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Storage Place <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Texas State University System PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The US Oncology Network PAC <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracy, Charles <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00064766) UPS PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/28 Rpt: 31/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) USAA Employee PAC <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78288	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valero PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78269	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veterinarian PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vilma Luna, LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00116020) Vulcan Materials Company PAC <hr/> Contributor address; City; State; Zip Code Birmingham, AL 35238	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/28 Rpt: 32/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/12/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00093054) WALPAC for Responsible Government PAC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Bentonville, AR 72716		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Russell	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Mary Ann	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Weatherford, TX 76087		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Kirk	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Dallas, TX 75229		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Wilson Associates

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 33/65	
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/12/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC	8 Amount of contribution (\$) \$300.00	9 In-kind contribution description campaign fundraiser
	7 Contributor address; City; State; Zip Code Austin, TX 78701	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 1/29 Rpt: 34/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 11/11/2024	5	Payee name AT&T		
6	Amount (\$) \$641.99	7	Payee address; City; State; Zip Code 1011 W 5th St Austin, TX 78703		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign phone for the officeholder		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/11/2024		Payee name Amazon.com		
	Amount (\$) \$16.23		Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder office supplies		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/17/2024		Payee name Amazon.com		
	Amount (\$) \$42.63		Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder office supplies		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 2/29 Rpt: 35/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 11/08/2024	5	Payee name Amazon.com		
6	Amount (\$) \$122.32	7	Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder office supplies		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/29/2024		Payee name Amazon.com		
	Amount (\$) \$25.97		Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder office supplies		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/09/2024		Payee name Amazon.com		
	Amount (\$) \$30.28		Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder office supplies		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 3/29 Rpt: 36/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 11/06/2024	5	Payee name Amenify		
6	Amount (\$) \$286.00	7	Payee address; City; State; Zip Code 735 Montgomery St, Suite 330 San Francisco, CA 94111		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense cleaning service at Austin apartment		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/14/2024		Payee name Amenify		
	Amount (\$) \$13.55		Payee address; City; State; Zip Code 735 Montgomery St, Suite 330 San Francisco, CA 94111		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense cleaning service at Austin apartment		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/19/2024		Payee name American Airlines		
	Amount (\$) \$348.00		Payee address; City; State; Zip Code 4333 Amon Carter Blvd Fort Worth, TX 76155		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder airline travel fee		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 4/29 Rpt: 37/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4	Date 11/19/2024	5 Payee name American Airlines	
6	Amount (\$) \$416.06	7 Payee address; City; State; Zip Code 4333 Amon Carter Blvd Fort Worth, TX 76155	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder airline travel fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held
4	Date 10/27/2024	5 Payee name Anedot	
6	Amount (\$) \$264.61	7 Payee address; City; State; Zip Code 1340 Poydras St, Suite 1770 New Orleans, LA 70112	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees for period 10/27-12/14/24
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held
4	Date 12/10/2024	5 Payee name Apple Store	
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 2901 S. Capital of Texas Hwy Austin, TX 78746	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Senate Christmas party door prize
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/29 Rpt: 38/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
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4 Date 12/26/2024	5 Payee name Apple.com
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6 Amount (\$) \$139.64	7 Payee address; City; State; Zip Code One Apple Park Way Cupertino, CA 95014
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign computer equipment for the officeholder
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/30/2024	Payee name Apple.com
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Amount (\$) \$139.64	Payee address; City; State; Zip Code One Apple Park Way Cupertino, CA 95014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign computer equipment for the officeholder
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name Apple.com
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Amount (\$) \$377.79	Payee address; City; State; Zip Code One Apple Park Way Cupertino, CA 95014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign computer equipment for the officeholder
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | 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: 6/29 Rpt: 39/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 12/17/2024	5	Payee name Apple.com		
6	Amount (\$) \$2,380.42	7	Payee address; City; State; Zip Code One Apple Park Way Cupertino, CA 95014		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign computer equipment for the officeholder		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/16/2024		Payee name Apple.com		
	Amount (\$) \$9.19		Payee address; City; State; Zip Code One Apple Park Way Cupertino, CA 95014		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign computer application		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/12/2024		Payee name Bateman, Molly		
	Amount (\$) \$500.00		Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 7/29 Rpt: 40/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 12/25/2024	5	Payee name Bateman, Molly		
6	Amount (\$) \$1,000.00	7	Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/27/2024		Payee name Bateman, Molly		
	Amount (\$) \$250.00		Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/22/2024		Payee name Bateman, Molly		
	Amount (\$) \$250.00		Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 8/29 Rpt: 41/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483	
4	Date 12/30/2024	5	Payee name Bateman, Molly			
6	Amount (\$) \$250.00	7	Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 12/25/2024		Payee name Bowers, Suzanne			
	Amount (\$) \$500.00		Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/25/2024		Payee name Brannon, Kevin			
	Amount (\$) \$4,000.00		Payee address; City; State; Zip Code 1911 Lorraine Avenue Allen, TX 75002			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign consulting			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/29 Rpt: 42/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/12/2024	5 Payee name Capitol Extension Gift Shop	
6 Amount (\$) \$2,598.00	7 Payee address; City; State; Zip Code 1400 Congress Ave, E1.006 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Capitol ornaments for constituents
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2024	Payee name City of Austin	
Amount (\$) \$193.98	Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense utilities at Austin apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2024	Payee name City of Austin	
Amount (\$) \$76.27	Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense utilities at Austin apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/29 Rpt: 43/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
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4 Date 12/01/2024	5 Payee name Compass Climate Storage
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6 Amount (\$) \$120.00	7 Payee address; City; State; Zip Code 3750 E IH 20 Hudson Oaks, TX 76087
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign storage rental
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2024	Payee name Compass Climate Storage
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Amount (\$) \$120.00	Payee address; City; State; Zip Code 3750 E IH 20 Hudson Oaks, TX 76087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign storage rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name David Manning Campaign
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Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 4527 Chalk Hills Ct Fort Worth, TX 76126
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation to campaign
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 11/29 Rpt: 44/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 11/04/2024	5	Payee name Department of the Treasury		
6	Amount (\$) \$2,059.00	7	Payee address; City; State; Zip Code Ogden, UT 84201		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense tax payment on campaign funds		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/19/2024		Payee name EL AL Israel Airlines Ltd.		
	Amount (\$) \$865.00		Payee address; City; State; Zip Code P.O. Box 41 Ben Gurion Airport 7015001 Israel		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder airline travel fee		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/12/2024		Payee name Flanagin , Judy		
	Amount (\$) \$500.00		Payee address; City; State; Zip Code P.O. Box 906 Weatherford, TX 76086		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 12/29 Rpt: 45/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 12/27/2024	5	Payee name Flanagin , Judy		
6	Amount (\$) \$1,000.00	7	Payee address; City; State; Zip Code P.O. Box 906 Weatherford, TX 76086		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/25/2024		Payee name Flanagin, Judy		
	Amount (\$) \$1,500.00		Payee address; City; State; Zip Code P.O. Box 906 Weatherford, TX 76086		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/28/2024		Payee name Ford Motor Credit		
	Amount (\$) \$922.32		Payee address; City; State; Zip Code P.O. Box 650575 Dallas, TX 76265		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign vehicle lease payment		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/29 Rpt: 46/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
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4 Date 11/26/2024	5 Payee name Ford Motor Credit
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6 Amount (\$) \$922.32	7 Payee address; City; State; Zip Code P.O. Box 650575 Dallas, TX 76265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign vehicle lease payment
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/26/2024	Payee name Ford Motor Credit
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Amount (\$) \$922.32	Payee address; City; State; Zip Code P.O. Box 650575 Dallas, TX 76265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign vehicle lease payment
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name Gables at the Terrace
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Amount (\$) \$2,519.70	Payee address; City; State; Zip Code 2301 S. Mopac Expressway Austin, TX 78746
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense rent and utilities at Austin apartment
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 14/29 Rpt: 47/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 12/02/2024	5	Payee name Gables at the Terrace		
6	Amount (\$) \$2,524.30	7	Payee address; City; State; Zip Code 2301 S. Mopac Expressway Austin, TX 78746		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense rent and utilities at Austin apartment		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/07/2024		Payee name Grand Hyatt		
	Amount (\$) \$1,659.75		Payee address; City; State; Zip Code 1000 H Street NW Washington, DC 20001		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder staff lodging for ALEC conference		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/29/2024		Payee name Graphics Management		
	Amount (\$) \$15,395.80		Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign advertising		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 15/29 Rpt: 48/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 10/30/2024	5	Payee name Graphics Management		
6	Amount (\$) \$14,808.34	7	Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign advertising		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/28/2024		Payee name Graphics Management		
	Amount (\$) \$5,401.73		Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign advertising		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/01/2024		Payee name Graphics Management		
	Amount (\$) \$11,919.00		Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign advertising		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 16/29 Rpt: 49/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 12/16/2024	5	Payee name Gutierrez, Lachelle		
6	Amount (\$) \$1,000.00	7	Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/22/2024		Payee name Hotel Californian		
	Amount (\$) \$1,332.66		Payee address; City; State; Zip Code 36 State St. Santa Barbara, CA 93101		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder staff lodging for ALEC Academy		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/16/2024		Payee name Huerta, Madison		
	Amount (\$) \$1,000.00		Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/29 Rpt: 50/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 10/28/2024	5 Payee name Install Connect	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 505 W. State Street Garland, TX 75040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign sign installation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name King, Phil	
Amount (\$) \$204.28	Payee address; City; State; Zip Code 2110 Fort Worth Hwy Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement of Schedule G expense for mobile phone
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2024	Payee name Legislative Solutions	
Amount (\$) \$350.00	Payee address; City; State; Zip Code PO Box 5643 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/29 Rpt: 51/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/07/2024	5 Payee name Local Furniture Outlet	
6 Amount (\$) \$2,553.40	7 Payee address; City; State; Zip Code 2301 W. Anderson Lane, Suite 102-7 Austin, TX 78757	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense furniture for Capitol office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Mesquite Pit	
Amount (\$) \$45.04	Payee address; City; State; Zip Code 1201 Fort Worth Hwy Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder meeting with constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2024	Payee name Mesquite Pit	
Amount (\$) \$38.91	Payee address; City; State; Zip Code 1201 Fort Worth Hwy Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder meeting with constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/29 Rpt: 52/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/27/2024	5 Payee name Mesquite Pit	
6 Amount (\$) \$116.22	7 Payee address; City; State; Zip Code 1201 Fort Worth Hwy Weatherford, TX 76086	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder meeting with constituents
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Mesquite Pit	
Amount (\$) \$46.38	Payee address; City; State; Zip Code 1201 Fort Worth Hwy Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder meeting with constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name Mineral Wells Area Chamber of Commerce	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 107 North Oak Ave Mineral Wells, TX 76067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder membership dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/29 Rpt: 53/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
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4 Date 11/18/2024	5 Payee name More Hands
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6 Amount (\$) \$155.88	7 Payee address; City; State; Zip Code 8000 Anderson Square #107 Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense cleaning service at Austin apartment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2024	Payee name More Hands
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Amount (\$) \$155.88	Payee address; City; State; Zip Code 8000 Anderson Square #107 Austin, TX 78757
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense cleaning service at Austin apartment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/20/2024	Payee name More Hands
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Amount (\$) \$155.88	Payee address; City; State; Zip Code 8000 Anderson Square #107 Austin, TX 78757
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense cleaning service at Austin apartment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/29 Rpt: 54/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/30/2024	5 Payee name More Hands	
6 Amount (\$) \$155.88	7 Payee address; City; State; Zip Code 8000 Anderson Square #107 Austin, TX 78757	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense cleaning service at Austin apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Pak Mail	
Amount (\$) \$955.49	Payee address; City; State; Zip Code 3112 Windsor Rd. Suite A Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Pak Mail	
Amount (\$) \$15.73	Payee address; City; State; Zip Code 3112 Windsor Rd. Suite A Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/29 Rpt: 55/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/12/2024	5 Payee name Perkins, Shanda	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code P.O. Box 743 Burleson, TX 76097	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name Perkins, Shanda	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 743 Burleson, TX 76097	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name Perkins, Shanda	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 743 Burleson, TX 76097	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 23/29 Rpt: 56/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 12/25/2024	5	Payee name Perkins, Shanda		
6	Amount (\$) \$500.00	7	Payee address; City; State; Zip Code P.O. Box 743 Burleson, TX 76097		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/24/2024		Payee name Perkins, Shanda		
	Amount (\$) \$1,500.00		Payee address; City; State; Zip Code P.O. Box 743 Burleson, TX 76097		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/18/2024		Payee name Reata Restaurant		
	Amount (\$) \$46.81		Payee address; City; State; Zip Code 500 Throckmorton Fort Worth, TX 76102		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder meeting with constituents		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 24/29 Rpt: 57/65	2	FILER NAME King, Phillip S. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00036483
4	Date 11/05/2024	5	Payee name Reata Restaurant		
6	Amount (\$) \$188.17	7	Payee address; City; State; Zip Code 500 Throckmorton Fort Worth, TX 76102		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder staff meeting		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/30/2024		Payee name Republican Party of Texas Candidate Resource Cmte		
	Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 211 E 7th St #915 Austin, TX 78701		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship support		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/13/2024		Payee name Sanders, Dylan		
	Amount (\$) \$1,000.00		Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/29 Rpt: 58/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/16/2024	5 Payee name Sanders, Dylan	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Senate Ladies Club	
Amount (\$) \$825.00	Payee address; City; State; Zip Code PO Box 12068 Capitol Station Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets for Senate Ladies Club Session Dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2024	Payee name Shields, Beth	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 1913 Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/29 Rpt: 59/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/01/2024	5 Payee name Snow Garrett Williams	
6 Amount (\$) \$485.00	7 Payee address; City; State; Zip Code 1207 Santa Fe Drive Weatherford, TX 76086	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign accounting service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/23/2024	Payee name State Farm	
Amount (\$) \$147.00	Payee address; City; State; Zip Code 1916 Martin Drive Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder renters insurance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/23/2024	Payee name State Farm	
Amount (\$) \$562.61	Payee address; City; State; Zip Code 1916 Martin Drive Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign vehicle insurance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/29 Rpt: 60/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/06/2024	5 Payee name Texas Values	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1005 Congress Ave, Suite 830 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship support
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2024	Payee name The Hereford Agency	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 908 King St, Suite 100 Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign radio ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2024	Payee name Varidesk	
Amount (\$) \$475.43	Payee address; City; State; Zip Code 450 Freeport Pkwy, Suite 2100 Coppell, TX 75019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense furniture for Capitol office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/29 Rpt: 61/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
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4 Date 11/12/2024	5 Payee name Weatherford College Basketball Booster Club
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 225 College Park Drive Weatherford, TX 76086
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship support
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name Westenhover, Ashley
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Amount (\$) \$1,250.00	Payee address; City; State; Zip Code Post Barton Creek Austin, TX 78746
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2024	Payee name Westenhover, Ashley
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Amount (\$) \$1,250.00	Payee address; City; State; Zip Code Post Barton Creek Austin, TX 78746
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	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: 29/29 Rpt: 62/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
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4 Date 12/27/2024	5 Payee name Westenhover, Ashley
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6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code Post Barton Creek Austin, TX 78746
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign staff compensation
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/28/2024	Payee name Why Israel Matters, Inc.
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Amount (\$) \$440.00	Payee address; City; State; Zip Code 901 Main Street, Suite 3700 Dallas, TX 75202
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lapel pins for legislative members
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 63/65	2 FILER NAME King, Phillip S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/15/2024	5 Payee name AT&T Mobility	
6 Amount (\$) \$125.44 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder mobile phone
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

Date 11/15/2024	Payee name AT&T Mobility	
Amount (\$) \$78.84 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense officeholder mobile phone
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/2 Rpt: 64/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 12/08/2024	5 Name of person from whom amount is received Computershare, Inc.	8 Amount (\$) \$376.57
	6 Address of person from whom amount is received; City; State; Zip Code Canton, MA 02021	
	7 Purpose for which amount is received campaign CD account interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 10/31/2024	Name of person from whom amount is received First Clearing	Amount (\$) \$406.78
	Address of person from whom amount is received; City; State; Zip Code Weatherford, TX 76086	
	Purpose for which amount is received campaign account interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/02/2024	Name of person from whom amount is received First Clearing	Amount (\$) \$380.27
	Address of person from whom amount is received; City; State; Zip Code Weatherford, TX 76086	
	Purpose for which amount is received campaign account interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/31/2024	Name of person from whom amount is received First Clearing	Amount (\$) \$0.11
	Address of person from whom amount is received; City; State; Zip Code Weatherford, TX 76086	
	Purpose for which amount is received campaign account interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 11/04/2024	Name of person from whom amount is received Indie Pubs	Amount (\$) \$335.47
	Address of person from whom amount is received; City; State; Zip Code Jackson, TN 38301	
	Purpose for which amount is received refund for book purchase reported on 30 Day Report <input type="checkbox"/> Check if political contribution returned to filer	

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/2 Rpt: 65/65
2 FILER NAME King, Phillip S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036483
4 Date 11/04/2024	5 Name of person from whom amount is received King, Phil	8 Amount (\$) \$195.48
	6 Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76086	
	7 Purpose for which amount is received reimbursement of personal mileage for October 2024 <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/08/2024	Name of person from whom amount is received King, Phil	Amount (\$) \$295.02
	Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76086	
	Purpose for which amount is received reimbursement of personal mileage for November 2024 <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/31/2024	Name of person from whom amount is received King, Phil	Amount (\$) \$4,487.82
	Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76086	
	Purpose for which amount is received reimbursement of state mileage for June - Nov 2024 <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/31/2024	Name of person from whom amount is received King, Phil	Amount (\$) \$173.40
	Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76086	
	Purpose for which amount is received reimbursement of personal mileage for December 2024 <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/27/2024	Name of person from whom amount is received Plains Capital Bank	Amount (\$) \$3,193.00
	Address of person from whom amount is received; City; State; Zip Code Lubbock, TX 79408-0271	
	Purpose for which amount is received campaign CD account interest <input type="checkbox"/> Check if political contribution returned to filer	