CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction (| Guide explains how to compl | ete this form. | 1 Filer ID (Ethics Commi 00029493 | | 2 Total pages filed: 38 | |
|-------------------------|-----------------------------|---|---|-------------------|--|--------|
| 3 CANDIDATE / | MS / MRS / MR | FIRST | • | MI | OFFICE USE ONL | _Y |
| OFFICEHOLDER NAME | The Honorable | Charles L. | | | Date Received | |
| TV/ UVIC | | | | | ELECTRONICALLY FILE | -D |
| | | | | | | ט |
| | NICKNAME | LAST | | SUFFIX | 01/07/2025 | |
| | | Geren | | | | |
| 4 CANDIDATE / | ADDRESS / PO BOX; APT | / SUITE#; CIT | Y; | ZIP CODE | Date Hand-delivered or Date Postmar | rked |
| OFFICEHOLDER MAILING | P.O. Box 1440 | | | | | |
| ADDRESS | | | | | Receipt # Amount | |
| Change of Address | Fort Worth, TX 76101 | | | | | |
| Grange or real coo | For worth, 1x 70101 | | | | Date Processed | |
| | | | | | | |
| | | | | | Date Imaged | |
| 5 04454104 | 140 (14D0 (14D | FIDOT | | | | |
| 5 CAMPAIGN TREASURER | MS / MRS / MR | FIRST | | MI | | |
| NAME | Ms. | Kit | | | | |
| | | | | | | |
| | NICKNAME | LAST | | SUFFIX | | |
| | | Moncrief | | | | |
| | | | | | | |
| 6 CAMPAIGN | STREET ADDRESS (NO PO | BOX PLEASE); | AP' | T / SUITE #; CITY | ; STATE; ZII | P CODE |
| TREASURER ADDRESS | 16 Valley Ridge Rd. | | | | | |
| | | | | | | |
| (Residence or Business) | Fort Worth, TX 76107 | | | | | |
| | | | | | | |
| | | | | | | |
| 7 CAMPAIGN | AREA CODE PHON | NE NUMBER E | EXTENSION | | | |
| TREASURER PHONE | (817) 732-4450 | | | | | |
| | | | | | | |
| 8 REPORT | | | | _ | <u></u> | |
| TYPE | X January 15 | 30th day before | election | Runoff | 15th day after campaign treas appointment (officeholder only | |
| | July 15 | 8th day before 6 | election \square | Exceeded modified | Final Report (Attach C/OH-FR | |
| | L sur, is | our day before t | | reporting limit | - Indirection (villagin Groff Fre | ., |
| 9 PERIOD | Month Day Year | | | Month Day | Year | |
| COVERED | 10/27/2024 | TH | IROUGH | 12/31/202 | | |
| | 10/21/2024 | • | | 12/01/20/ | -7 | |
| 10 ELECTION | ELECTION DATE | <u> </u> | | ELECTION TYPE | | |
| LIO ELECTION | Month Day Year | | rimary | Runoff | Other | |
| | | | - | | | |
| | | ∐ ^G | eneral | Special | | |
| | | | | | | |
| 11 OFFICE | OFFICE HELD (if any) | | | 12 OFFICE SOUGH | | |
| | State Representative Dist | rict 99 | | State Represen | tative District 99 | |
| | | | | | | |
| | 1 | | | 1 | | |
| | | | | | | |
| | | ദവ T | O PAGE 2 | | | |
| | | GO 1 | 5 . AGE 2 | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 38

| 13 C / OH NAME | 14 Filer ID (| Ethics Commission Filers) | | | | | | | |
|--|--|--|---|------------------------|--|--|--|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | olitical contributions accepted or political ex These expenditures may have been made w officeholders are required to report this info | rithout the candidate's or office | holder's knowledge or | | | | | |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | | | | | | |
| | GENERAL | | | | | | | | |
| | | COMMITTEE ADDRESS | | | | | | | |
| | SPECIFIC | | | | | | | | |
| | | COMMITTEE CAMPAIGN TREASURER NA | AME | | | | | | |
| | | COMMITTEE CAMPAIGN TREASURER AI | DDRESS | | | | | | |
| 16 CONTRIBUTION TOTALS | | ZED POLITICAL CONTRIBUTIONS (OTHE ES OF LOANS, OR CONTRIBUTIONS MAD | | \$ 0.00 | | | | | |
| | LOANS) | \$ 295,050.00 | | | | | | | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEM | | \$ 0.00 | | | | | | |
| | 4. TOTAL POLITIC | AL EXPENDITURES | | \$ 64,866.07 | | | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF RIOD | THE LAST DAY OF THE | \$ 1,195,452.22 | | | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIP OF THE REPOR | AL AMOUNT OF ALL OUTSTANDING LOA TING PERIOD | NS AS OF THE LAST DAY | \$ 0.00 | | | | | |
| 17 AFFIDAVIT | | | penalty of perjury, that the acc udes all information required to Code. | | | | | | |
| | | The | Honorable Charles L. Gere | en | | | | | |
| | | Signa | ture of Candidate or Officehol | der | | | | | |
| AFFIX NO | TARY STAMP / SEAL ABO | DVE | | | | | | | |
| Sworn to and subs | cribed before me, by the s | aid | , this the | day | | | | | |
| of | , 20, to ce | rtify which, witness my hand and seal of offi | ce. | | | | | | |
| Signature of offi | Signature of officer administering Printed name of officer administering Title of officer administering oath | | | | | | | | |

SUBTOTALS - C/OH

FORM COH **COVER SHEET PG 3**

| | | | | 3 of 38 | | | | |
|----------------------------------|--|-----------------------------|-------------|-----------------|--|--|--|--|
| 18 FILER NAM Geren, Ch | ME narles L. (The Honorable) | 19 Filer ID 00029493 | (Ethics Com | mission Filers) | | | | |
| | O SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | | | | | |
| 1. X | \$ | 295,050.00 | | | | | | |
| 2. X | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 0.00 | | | | |
| 3. X | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | 0.00 | | | | |
| 4. | SCHEDULE E: LOANS | | \$ | | | | | |
| 5. X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | 3 | \$ | 64,866.07 | | | | |
| 6. X | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | 0.00 | | | | |
| 7. X | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | DNS | \$ | 0.00 | | | | |
| 8. X | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 0.00 | | | | |
| 9. X | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ | 0.00 | | | | |
| 10. | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF | OF C/OH | \$ | | | | | |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | DNS | \$ | | | | | |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER | RETURNED | \$ | | | | | |
| | | | • | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|----------------------------|--|--|---|---|------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 1/21 Rpt: 4/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/11/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Abbott Laboratories Employee PAC 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$500.00 |
| _ | Deignaignal annu | Abbott Park, IL 60064-6028 | O Familia var (Coo la atrustia an | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_Ahlberg, Trevor Contributor address; City; State; Zip Code Irving, TX 75038 |) | | Amount of Contribution (\$) | \$2,500.00 |
| | | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Chief Execut | tive | Cottonwood Financial | | | |
| | Date 12/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Alabama-Coushatta Tribe-General Checking Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | Livingston, TX 77351 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | , | , , | | , | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_Arnold, Kurt Contributor address; City; State; Zip Code Houston, TX 77007 |) | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Arnold & Itkin |) | | |
| | Date 12/12/2024 | Full name of contributor out-of-state PAC (ID#:_Bell, Alex Contributor address; City; State; Zip Code Dallas, TX 75202 | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Ziegler Gardner Bell, PL | | | |
| | | | | | | |

| | MONEI | ARY POLITICAL C | ONTRIBUTIO | NS | SCHEDUL | E A1 |
|---|--------------------------------|--|--|---|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 2/21 Rpt: 5/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | | 3 Filer ID (Ethics Commission 00029493 | n Filers) |
| 4 | Date 12/13/2024 | Full name of contributor Boenker, Alvin & Gloria Contributor address; City; Sta | out-of-state PAC (ID#: atte; Zip Code | | 7 Amount of Contribution (\$) | \$2,500.00 |
| Ļ | | Weatherfod, TX 76085 | | | | |
| 8 | Principal occu Insurance Aç | pation / Job title (See Instructions) gent | | Employer (See Instructions Al Boenker Insurance A | | |
| | Date 12/13/2024 | Full name of contributor Bradley Bryan dba Bryan & Contributor address; City; Sta Austin, TX 78701 | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ;) | |
| | Date 11/05/2024 | Full name of contributor [Brumley, Jon & Rebecca Contributor address; City; Sta | out-of-state PAC (ID#:ate; Zip Code | | Amount of Contribution (\$) \$ | \$50,000.00 |
| | Principal occur | Fort Worth, TX 76107 upation / Job title (See Instructions) | | Employer (See Instructions | | |
| | Oil & Gas | pation / 300 title (See instructions) | | Enduro Enduro | , | |
| | Date 12/13/2024 | Full name of contributor [Byrne, J Tim Contributor address; City; Sta Dallas, TX 75205 | |) | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu President/Di | ipation / Job title (See Instructions) irector | | Employer (See Instructions Byrne Family Foundatio | | |
| | Date 12/13/2024 | Full name of contributor Carriage House Partners L Contributor address; City; Sta Austin , TX 78767 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | :) | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | | SCHEDULE A1 | | |
|---|---------------------------|---|------------------------------|-------------|---|------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 3/21 Rpt: 6/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/05/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$1,000.00 |
| | | Irving, TX 75039 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 12/11/2024 | Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | Houston, TX 77210-4567 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | i iliopai occa | patient, cos title (coo monastione) | Employer (ede mendener | , | | |
| | Date 11/07/2024 | Full name of contributor out-of-state PAC (ID#:_ Chevron Employees PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$2,000.00 |
| | | Austin, TX 78701 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Comcast Corporation & NBCUniversal PAC Contributor address; City; State; Zip Code Philadelphia, PA 19103 |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Commit to Students PAC Contributor address; City; State; Zip Code Dallas, TX 75247 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | | | LE A1 |
|---|---------------------------|--|--|------------------------------------|---------|---|--------------|
| | The Instru | ction Guide explains hov | v to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 4/21 Rpt: 7/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/13/2024 | 5 Full name of contributor Commit to Students PAC6 Contributor address; City; S | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$200.00 |
| _ | 5 | Dallas, TX 75247 | <u>, </u> | | <u></u> | | |
| 8 | Principal occu | pation / Job title (See Instruction | 5) | 9 Employer (See Instructions | S) | | |
| | Date 12/12/2024 | Full name of contributor Commit to Students PAC Contributor address; City; S | |) | | Amount of Contribution (\$) | \$200.00 |
| | | Dallas, TX 75247 | | | | | |
| | Principal occu | pation / Job title (See Instruction: | 5) | Employer (See Instructions | s) | | |
| | Date 12/11/2024 | Full name of contributor Constellation Brands, Inc Contributor address; City; S | |) | | Amount of Contribution (\$) | \$500.00 |
| | | Rochester, NY 14614 | | | | | |
| | Principal occu | pation / Job title (See Instruction | 5) | Employer (See Instructions | s) | | |
| | Date 11/26/2024 | Full name of contributor Culley, Robert & Karen Contributor address; City; S Austin, TX 78759-5151 | |) | • | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | pation / Job title (See Instruction | 5) | Employer (See Instructions | 5) | | |
| | Date 12/02/2024 | Full name of contributor Davis, Ray Contributor address; City; S Dallas, TX 75225 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu Retired | pation / Job title (See Instruction | 5) | Employer (See Instructions Retired | 5) | | |
| | | | , | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | | SCHEDULE A1 | | |
|---|---------------------------|--|-------------------------------|--|---|------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 5/21 Rpt: 8/38 | |
| 2 | FILER NAME Geren, Char | es L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/11/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$1,000.00 |
| _ | Deignigal | Austin, TX 78701 | O Francisco (Con Instructions | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#: ENPAC Texas Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | Austin, TX 78701 pation / Job title (See Instructions) | Employer (See Instructions | ·/_ | | |
| | r inicipal occu | pation / 300 title (See Instructions) | Employer (See instructions | , | | |
| | Date 12/11/2024 | Full name of contributor | | | Amount of Contribution (\$) | \$500.00 |
| | | St. Louis, MO 63105 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_FOMCPAC Contributor address; City; State; Zip Code Dallas, TX 75230 |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>. </u> | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Foley & Lardner LLP Texas Campaign Fund Contributor address; City; State; Zip Code Dallas, TX 75201-3340 | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | . 5) | | |
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| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | |
|---|------------------------------|--|--|----------|---|----|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | orm | ı. | 1 | Total pages Schedule A1: Sch: 6/21 Rpt: 9/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | | | 3 | Filer ID (Ethics Commission 00029493 | ion Filers) |
| 4 | Date 12/11/2024 | Full name of contributorFriends of The UniversityContributor address; City; St | | | | 7 | Amount of Contribution (\$) | \$2,500.00 |
| | | Austin, TX 78763 | | - | | | | |
| 8 | Principal occu | pation / Job title (See Instructions |) | 9 [| Employer (See Instructions | 5) | | |
| | Date 12/16/2024 | Full name of contributor Friends of UNT PAC Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code | | | | Amount of Contribution (\$) | \$2,000.00 |
| | Principal occu | Dallas, TX 75380-3272 pation / Job title (See Instructions | <u>, </u> | | Employer (See Instructions | | | |
| | Filicipal occu | pation / Job title (See Instructions | | ' | Employer (See mstructions | ') | | |
| | Date 12/11/2024 | Full name of contributor Friends of the TTU Syster Contributor address; City; St | | |) | | Amount of Contribution (\$) | \$2,500.00 |
| | | Austin, TX 78731 | | | | | | |
| | Principal occu | pation / Job title (See Instructions | (i) | E | Employer (See Instructions | 5) | | |
| | Date 12/14/2024 | Full name of contributor Gallagher Contributor address; City; St Houston, TX 77098 | | | | | Amount of Contribution (\$) | \$20,000.00 |
| | Principal occu Attoryney | pation / Job title (See Instructions |) | | Employer (See Instructions Gallagher Law Firm | i) | | |
| | Date 12/05/2024 | Full name of contributor Gallagher, Von Contributor address; City; St Anna , TX 75409 | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$4,000.00 |
| | Principal occu Consultant | pation / Job title (See Instructions |) | | Employer (See Instructions Gallagher Construction | | mpany | |
| | | | | <u> </u> | | | 1 | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|---|----------------------------------|--|------------------|--|---|--|------------|--|
| | The Instruc | ction Guide explains how to com | nplete this form | n. | 1 | Total pages Schedule A1: Sch: 7/21 Rpt: 10/38 | | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00029493 | n Filers) | |
| 4 | Date 12/19/2024 | · | | | 7 | Amount of Contribution (\$) | \$1,000.00 | |
| _ | | Washington , WA 20001 | 1_ | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions |) | | | |
| | Date 11/05/2024 | Full name of contributor out-of-Gunn, Annalisa Contributor address; City; State; Zip C | -state PAC (ID#: |) | | Amount of Contribution (\$) | \$2,000.00 | |
| | Principal occu | Layton, UT 84041 pation / Job title (See Instructions) | 1 | Employer (See Instructions | | | | |
| | Management | | | Elite Level Management | | _C | | |
| | Date 11/15/2024 | Full name of contributor out-of- HCA Texas Good Government Ful Contributor address; City; State; Zip C | |) | | Amount of Contribution (\$) | \$1,000.00 | |
| | | Dallas, TX 75240 | | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | | |
| | Date 12/11/2024 | HMWK LLC | -state PAC (ID#: |) | | Amount of Contribution (\$) | \$250.00 | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | | |
| | Date 12/10/2024 | Heller, J David | -state PAC (ID#: |) | | Amount of Contribution (\$) | \$500.00 | |
| | Principal occu President & | pation / Job title (See Instructions) CEO | | Employer (See Instructions The NRP Group |) | | | |
| | | | I | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | |
|---|----------------------------|---|---|-------------|--|------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 8/21 Rpt: 11/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 11/07/2024 | Full name of contributor out-of-state PAC (ID#:_ Herndon, David & Dealey Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$500.00 |
| _ | | Austin, TX 78703 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 12/16/2024 | Full name of contributor out-of-state PAC (ID#:_ INDEPAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | Austin, TX 78750 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#: Incline P&C Group PAC |) | | Amount of Contribution (\$) | \$5,000.00 |
| | | Austin, TX 78701 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Itkin, Jason Contributor address; City; State; Zip Code Houston, TX 77007 | | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Arnold & Itkin LLP |) | | |
| | Date 11/14/2024 | Full name of contributor out-of-state PAC (ID#:_Kolean, Charles Contributor address; City; State; Zip Code Dallas, TX 75201 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu CEO | pation / Job title (See Instructions) | Employer (See Instructions Strategic Political Manag | | nent | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|---------------------------|--|---------------------------------------|---|--|------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 9/21 Rpt: 12/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_Laredo Fire-PAC Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$500.00 |
| | | Laredo, TX 78041-5752 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 12/19/2024 | Full name of contributor out-of-state PAC (ID#:_ Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$1,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Longbow Consulting Partners LLC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | Austin, TX 78701 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | T inicipal occu | pation 7 300 title (See Instructions) | Employer (See manucuons | , | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Manufacturers PAC of Texas Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Matthews, Charles Contributor address; City; State; Zip Code Dallas, TX 75205 | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDUI | E A1 |
|---|---------------------------|---|-------------------------|-----|---------------------------------|----------------|---|------------|
| | The Instruc | ction Guide explains hov | v to complete this fo | orr | n. | 1 | Total pages Schedule A1: Sch: 10/21 Rpt: 13/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/13/2024 | 5 Full name of contributor McCabe, Elizabeth6 Contributor address; City; S | out-of-state PAC (ID#:_ | |) | 7 | Amount of Contribution (\$) | \$2,500.00 |
| • | Dringing Loon | Dallas, TX 75229 | a) | _ | Employer (Con Instructions | <u></u> | | |
| 8 | Attorney | pation / Job title (See Instruction: | 5) | 9 | Employer (See Instructions Self | 5) | | |
| | Date 11/07/2024 | Full name of contributor McCluer, Dr. Charles & C Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$500.00 |
| | Dringing! goog | Fort Worth, TX 76107 | 2) | | Employer (See Instructions | <u></u> | | |
| | Dentist Dentist | pation / Job title (See Instructions | 5) | | Employer (See Instructions Self | ·) | | |
| | Date 11/15/2024 | Full name of contributor McGuire Revocable Trus Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$5,000.00 |
| | | Dallas, TX 75205 | | | | | | |
| | Principal occu | pation / Job title (See Instructions | 5) | | Employer (See Instructions | s) | | |
| | Date 11/14/2024 | Full name of contributor McWilliams, Dean Contributor address; City; S Austin, TX 78731 | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instruction: | 5) | | Employer (See Instructions | <u>l</u> s) | | |
| | Date 12/11/2024 | Full name of contributor Moak Casey PAC Contributor address; City; S Austin, TX 78746-5776 | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions | 5) | | Employer (See Instructions | 5) | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|----------------------------|---|------------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 11/21 Rpt: 14/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/13/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$500.00 |
| | | Jewett, TX 75846 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 12/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Oneok Employees PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | Tulsa, OK 74102 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Patricia A Shipton Governmental Affairs Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/17/2024 | Full name of contributor out-of-state PAC (ID#:_Patton, Robert Contributor address; City; State; Zip Code Fort Worth, TX 76107 |) | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Self |) | | |
| | Date 11/07/2024 | Full name of contributor out-of-state PAC (ID#:_ Penn Entertainment Inc Texas PAC Contributor address; City; State; Zip Code Wyomissing, PA 19610 |) | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | LE A1 |
|---|---------------------------|---|---------------------------------|---|---|--------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 12/21 Rpt: 15/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/17/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$1,000.00 |
| _ | Dringing! goog | Purchase , NY 10577 | Employer (Coo Instructions | | | |
| 8 | Рппсіраї осси | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Perot Jr, Ross Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$5,000.00 |
| | Dringing aggr | Dallas, TX 75219 | Employer (See Instructions | | | |
| | Real Estate | pation / Job title (See Instructions) | Employer (See Instructions Self |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#: Pfizer PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$1,000.00 |
| | | New York, NY 10017 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 11/26/2024 | Full name of contributor out-of-state PAC (ID#:_PharmPac Contributor address; City; State; Zip Code Austin, TX 78757 |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 11/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Political Action Committee of Winstead PC Contributor address; City; State; Zip Code Dallas, TX 75201 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE A1 | |
|---|-----------------------------|--|--|----|---|---|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 13/21 Rpt: 16/38 | _ |
| 2 | FILER NAME Geren, Char | rles L. (The Honorable) | | 3 | Filer ID (Ethics Commission Filers) 00029493 | |
| 4 | Date 12/17/2024 | Full name of contributor out-of-state PAC (ID#:_Populus Financial Group, Inc. Texas PAC Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$1,000.0 | 0 |
| _ | | Irving, TX 75062 | | | | |
| 8 | Principal occu | ipation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 12/12/2024 | Full name of contributor out-of-state PAC (ID#:_Powell, Gideon Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$20,000.0 | 0 |
| | Principal occu | Dallas, TX 75251 upation / Job title (See Instructions) | Employer (See Instructions | :) | | |
| | CEO | , | Cholla Petroleum | , | | |
| | Date 12/20/2024 | Full name of contributor out-of-state PAC (ID#:_ Purvis, Patricia Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$100.0 | 0 |
| | | Fort Worth, TX 76116 | | | | |
| | Principal occu Homemaker | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 11/19/2024 | Full name of contributor out-of-state PAC (ID#:_ Rector, Andrew Contributor address; City; State; Zip Code Fort Worth, TX 76102 |) | | Amount of Contribution (\$) \$10,000.0 | 0 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Beckham,Rector & Earg | | LLP | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Red Rock Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701 |) | | Amount of Contribution (\$) \$5,000.0 | 0 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | ION | IS | | SCHEDU | LE A1 |
|---|---------------------------|--|--------|---------------------------------|--------|---|--------------|
| | The Instruc | ction Guide explains how to complete this | for | m. | 1 | Total pages Schedule A1: Sch: 14/21 Rpt: 17/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/11/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$1,000.00 |
| _ | | Murphy, TX 75094 | | | _ | | |
| 8 | Principal occu Self | pation / Job title (See Instructions) | 9 | Employer (See Instructions Self | 5) | | |
| | Date 11/15/2024 | Full name of contributor out-of-state PAC (ID Rydman, John & Lindy Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$3,000.00 |
| | Principal occu | Houston, TX 77007 pation / Job title (See Instructions) | \top | Employer (See Instructions | s) | | |
| | President | , | | Spec's | , | | |
| | Date 11/05/2024 | Full name of contributor | #: |) | | Amount of Contribution (\$) | \$250.00 |
| | | Fort Worth, TX 76110 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID Southern Glazer's Pac of Texas Contributor address; City; State; Zip Code Austin , TX 78701 | | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 11/18/2024 | Full name of contributor out-of-state PAC (ID Southwest Airlines Co. Freedom Fund Contributor address; City; State; Zip Code Dallas, TX 75235-1611 | #: |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | LE A1 |
|---|---------------------------|--|---------------------------------|---|---|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 15/21 Rpt: 18/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Stan Schlueter Consulting Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$1,500.00 |
| _ | Deinainal agai | Austin, TX 78768 | O Francis var (Cas Instructions | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 12/19/2024 | Full name of contributor out-of-state PAC (ID#:_ TBA Bank PAC-State Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | Austin , TX 78701 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/16/2024 | Full name of contributor out-of-state PAC (ID#:_ TNLA PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | Austin, TX 78745-6698 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#: TREPAC/Texas Association of Realtors Contributor address; City; State; Zip Code Austin , TX 78768-2246 | | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Tassin, Sidney Contributor address; City; State; Zip Code Dallas, TX 75220 | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | E A1 |
|---|---------------------------|--|-------------------------------|---|---|------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 16/21 Rpt: 19/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 11/15/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Texans for Reasonable Solutions PAC 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$1,000.00 |
| _ | Daine in all a serv | Austin, TX 78741 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Aggregates & Concrete Association PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Association for Interior Design PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$700.00 |
| | Principal occu | Houston, TX 77269-0867 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | , | | | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Automotive Recyclers Association Contributor address; City; State; Zip Code Midland, TX 79706-4474 |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Bail PAC Contributor address; City; State; Zip Code Austin, TX 78731 |) | | Amount of Contribution (\$) | \$750.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | LE A1 |
|---|---------------------------|---|------------------------------|---|---|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 17/21 Rpt: 20/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/27/2024 | Full name of contributor | Stores Assoc. | 7 | Amount of Contribution (\$) | \$3,500.00 |
| _ | | Austin, TX 78701 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 12/17/2024 | Full name of contributor out-of-state PAC (ID#: Texas Bitcoin PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | Austin, TX 78701 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Construction Association PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | Austin, TX 78701-2494 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 11/07/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC Contributor address; City; State; Zip Code Austin , TX 78711 | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 11/07/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Dental Association PAC Contributor address; City; State; Zip Code Austin , TX 78704 | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | LE A1 |
|---|---------------------------|--|------------------------------|---|---|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 18/21 Rpt: 21/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commission 00029493 | on Filers) |
| 4 | Date 12/16/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Texas Impact, a CRH PAC 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$1,000.00 |
| | | Austin, TX 78726 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#: Texas McDonald's Operators Association PAC, Contributor address; City; State; Zip Code Athens, TX 75751 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$500.00 |
| | | Austin, TX 78701 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 11/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Mortgage Bankers Contributor address; City; State; Zip Code Austin, TX 78701 |) | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Podiatric Medical Association Contributor address; City; State; Zip Code Austin , TX 78701 |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|---------------------------|---|-------------------------------|---|---|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 19/21 Rpt: 22/38 | |
| 2 | FILER NAME Geren, Char | les L. (The Honorable) | | 3 | Filer ID (Ethics Commissi 00029493 | on Filers) |
| 4 | Date 11/15/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Texas Restaurant Association PAC 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$1,500.00 |
| _ | | Austin, TX 78767 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 11/15/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Sport PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | Austin, TX 78763-5943 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | i illicipai occa | pation 7 oob title (oce monuculons) | Employer (See mandellons | , | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Fire Fighters Action C Contributor address; City; State; Zip Code | Committee | | Amount of Contribution (\$) | \$1,200.00 |
| | | Austin, TX 78701 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Towing & Storage Association PAC Contributor address; City; State; Zip Code Spring, TX 77386 |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | LE A1 |
|---|-----------------|---|------------------------------|-----------|---|--------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 20/21 Rpt: 23/38 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | on Filers) |
| | Geren, Char | les L. (The Honorable) | | | 00029493 | |
| 4 | Date 11/05/2024 | Full name of contributor ☐ out-of-state PAC (ID#: Texas and Southwestern Cattle Raisers Associated Contributor address; City; State; Zip Code | iation | 7 | Amount of Contribution (\$) | \$2,000.00 |
| | | Fort Worth, TX 76185-1988 | 1 | | | |
| 8 | Principal occu | ipation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date | Full name of contributor ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 11/19/2024 | TxAna PAC | | | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Austin, TX 78701 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | |
| | 12/11/2024 | USAA Employee PAC | | | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code San Antonio, TX 78288 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u>s)</u> | | |
| | | paner, 7000 and (Coo indudentia) | | -, | | |
| | Date | Full name of contributor ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 11/26/2024 | Vistra Employee PAC | |] | | \$2,500.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Irving, TX 75039 | i | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date | Full name of contributor ut-of-state PAC (ID#: | | | Amount of Contribution (\$) | |
| | 12/09/2024 | Westbrook, Ben | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Fort Worth, TX 76104 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|-----------------------------|--|---|----------------|---|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 21/21 Rpt: 24/38 | |
| 2 | FILER NAME Geren, Char | rles L. (The Honorable) | | 3 | Filer ID (Ethics Commissi 00029493 | on Filers) |
| 4 | Date 12/12/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$1,000.00 |
| | | Dallas, TX 75209 | | | | |
| 8 | Principal occu Retired | ipation / Job title (See Instructions) | 9 Employer (See Instructions Retired | 5) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Wine and Spirits Wholesalers of Texas PAC Contributor address; City; State; Zip Code |) | • | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | Austin, TX 78701 Ipation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Date 12/11/2024 | Full name of contributor out-of-state PAC (ID#: Wise, Curtis Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$1,000.00 |
| | | Flower Mound, TX 75022 | | | | |
| | Principal occu President | ipation / Job title (See Instructions) | Employer (See Instructions 8128 Camp Bowie, LLC | | | |
| | Date 11/18/2024 | Full name of contributor out-of-state PAC (ID#:_Zachry Corporation PAC Contributor address; City; State; Zip Code San Antonio, TX 78265-3240 |) | • | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>l</u> s) | - | |
| | | | | | | |

| PLE | DGED CONTRIBUTIONS | | SCHEDULE B |
|---------------|---|--------------------------|---|
| Т | he Instruction Guide explains how | v to complete this form. | 1 Total pages Schedule B: Sch: 1/1 Rpt: 25/38 |
| 2 FILER N. | AME | | 3 Filer ID (Ethics Commission Filers) |
| | Charles L. (The Honorable) | | 00029493 |
| 4 TOTAL | OF UNITEMIZED PLEDGES | | \$ 0.00 |
| 5 Date | 6 Full name of pledgor out-of | -state PAC (ID#: | 9 In-kind description pledge (\$) (If applicable) |
| | 7 Pledgor Address; City; Sta | ate; Zip Code | |
| | | | Check if travel outside of Texas. Complete Schedule |
| 10 Principal | occupation / Job title (See Instructions) | 11 Employer (See In | structions) |
| | | | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|---|--|--|
| 1 | Total pages Schedule F1: Sch: 1/13 Rpt: 26/38 | 2 FILER NAME Geren, Charles L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00029493 | |
| 4 | Date 11/01/2024 | 5 Payee name American Airlines | |
| 6 | Amount (\$) \$3,857.80 | 7 Payee address; City; State; Zip Code PO Box 582880 MD 755 Tulsa, OK 74158 | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airfare | |
| 9 | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held | |
| | Date 12/01/2024 | Payee name American Airlines | |
| | Amount (\$) \$5,446.78 | Payee address; City; State; Zip Code PO Box 582880 MD 755 Tulsa, OK 74158 | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airfare | |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held | |
| | Date 12/31/2024 | Payee name American Airlines | |
| | Amount (\$) \$1,669.38 | Payee address; City; State; Zip Code PO Box 582880 MD 755 Tulsa, OK 74158 | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airfare | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officeholder/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. | | | | | | | | | |
|---|--|--|---|--|--|--|--|--|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ | | | | | | | | |
| | Sch: 2/13 Rpt: 27/38 | Geren, Charles L. (The Honorable) 00029493 | | | | | | | | | |
| 4 | Date | Payee name | | | | | | | | | |
| | 12/31/2024 | Anedot | | | | | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | | | | | |
| | \$1,672.80 | PO Box 84314 | | | | | | | | | |
| | | | | | | | | | | | |
| | | Baton Rouge, LA 70884 | | | | | | | | | |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | | | | | |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | | | | | |
| | | Online Contribution Fees | | | | | | | | | |
| | | | | | | | | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | - | | | | | | | | |
| | expenditure to benefit C/OI | | | | | | | | | | |
| _ | Date | Payee name | = | | | | | | | | |
| | 12/01/2024 | Art 2 Catering | | | | | | | | | |
| | | | 4 | | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | | | | | |
| | \$3,932.18 | 4241 Sigma Rd., Suite A | | | | | | | | | |
| | | | | | | | | | | | |
| | | Dallas, TX 75244 | | | | | | | | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | | | | | |
| | EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | | | | | |
| | | Cater for Speaker Event | | | | | | | | | |
| | | Sals: 15: Spanie: 2:5::: | | | | | | | | | |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ | | | | | | | | |
| | expenditure to benefit C/O | | | | | | | | | | |
| _ | Date | Davies name | = | | | | | | | | |
| | 12/09/2024 | Payee name Avis Rent A Car | | | | | | | | | |
| | | | | | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | | | | | |
| | \$120.37 | 6000 Airline Dr., Suite 112 | | | | | | | | | |
| | | | | | | | | | | | |
| | | Beaumont, TX 77705 | | | | | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | | | | | |
| | OF EXPENDITURE | Travel Out of District Check if travel outside of Texas. Complete Schedule T. | | | | | | | | | |
| | | Check if Austin, TX, officeholder living expense Car Rental | | | | | | | | | |
| | | - Gai Normal | | | | | | | | | |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | | | | | |
| | expenditure to benefit C/O | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|--|---|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ |
| | Sch: 3/13 Rpt: 28/38 | Geren, Charles L. (The Honorable) 00029493 | |
| 4 | Date | 5 Payee name | |
| _ | 12/20/2024 | Azle Area Chamber of Commerce | _ |
| 6 | Amount (\$) \$495.00 | 7 Payee address; City; State; Zip Code 252 W. Main Street, Suite 102 | |
| | | Azle, TX 76020 | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Annual Dues | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| | Date | Payee name | |
| | 12/01/2024 | Capitol Gift Shop | |
| | Amount (\$) \$27.06 | Payee address; City; State; Zip Code 1400 Congress Ave. | |
| | | Ausitn, TX 78768 | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| | Date | Payee name | |
| | 11/27/2024 | Clements, Ben | |
| | Amount (\$) \$1,500.00 | Payee address; City; State; Zip Code PO Box 2910 | |
| | | Austin, TX 78768 | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| | | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|-----------------------------|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 4/13 Rpt: 29/38 | Geren, Charles L. (The Honorable) | 00029493 |
| 4 | Date | 5 Payee name | |
| | 11/18/2024 | Domain Listings | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$288.00 | PO Box 19607 | |
| | | | |
| | | Las Vegas , NV 89132 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | 1 000 | el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense |
| | | | nain/website |
| | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | |
| _ | Date | Payee name | |
| | 11/27/2024 | Farabee, Russell | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$1,500.00 | 1800 Nueces St. | |
| | | | |
| | | Austin, TX 78701 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Salaries/ Wages/Contract Labor | el outside of Texas. Complete Schedule T. |
| | | Wages | tin, TX, officeholder living expense |
| | | 114955 | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/OI | 1 | |
| | Date | Payee name | |
| | 11/01/2024 | Garza, Sandy | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$500.00 | po box 1895 | |
| | | | |
| | | Fort Worth, TX 76101 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor | el outside of Texas. Complete Schedule T. |
| | EXI ENDITORE | | tin, TX, officeholder living expense |
| | | November | Admin Labor |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | • | Office field |
| | | | |
| | | | |
| l | | | |

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Candidate/Officeholder/Politica | | | Gilt/Awards/Memoria Legal Services | is Expense | Salaries/M | | e /Contract Labor | | OTHER (enter a | strict category not listed above | e) |
|---|---|-----|---|---------------------------------------|------------------------|-----------------|------------|--------------------------------|-------|---------------------|-------------------------------------|-----------|
| | Credit Card Payment | | The Instruction Guide explains how to complete this form. | | | | | | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commission | n Filers) |
| | Sch: 5/13 Rpt: 30/38 | | Geren, Char | les L. (The Ho | onorable) | | | | | 00029493 | | |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 12/01/2024 | | Garza, Sano | ly | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addres | | State | ; Zip Co | de | | | | | |
| ľ | \$500.00 | ľ | po box 1895 | | Oldio | , <u>Lip</u> 00 | uo | | | | | |
| | +555.55 | | po 20% 2000 | | | | | | | | | |
| | | | Fort Worth | TV 76101 | | | | | | | | |
| Ļ | | _ | Fort Worth, | | | | | | | | | |
| 8 | PURPOSE OF | (a) | | e Categories listed at | | iedule) | (b) | Description | | d4.T O | onless Colondale T | |
| | EXPENDITURE | | Salaries/Wa | ges/Contract I | ₋abor | | | | | officeholder living | nplete Schedule T. | |
| | | | | | | | | December Ac | | | g expense | |
| | | | | | | | | | | | | |
| 9 | Complete ONLY if direct | | Candidate/Offic | eholder name | (| Office sou | aht | | | Office h | eld | |
| | expenditure to benefit C/OI | Н | | | | | 0 | | | | | |
| _ | Date | Π | Payee name | | | | | | | | | |
| | 11/15/2024 | | Hermes of P | aris Dallas | | | | | | | | |
| | Amount (\$) | H | Payee addres | | State | ; Zip Co | de | | | | | |
| | \$3,193.39 | | • | Park Village | Sidio | , 2ip 00 | uc | | | | | |
| | ψ0,130.00 | | Zirligilialia | T and Village | | | | | | | | |
| | | | Dallas , TX 7 | 7E20E | | | | | | | | |
| | P. P. C. | | | | | | <i>a</i> > | | | | | |
| | PURPOSE OF | (a) | | e Categories listed at | | iedule) | (a) | Description Check if travel (| outei | de of Teyes Com | nplete Schedule T. | |
| | EXPENDITURE | | GITT/Awards/ | Memorials Ex | pense | | | = | | officeholder living | | |
| | | | | | | | | Staff Gifts | | | | |
| | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offic | eholder name | (| Office sou | ght | | | Office h | eld | |
| | expenditure to benefit C/OI | Н | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 12/09/2024 | | Hertz Dollar | Thrifty | | | | | | | | |
| | Amount (\$) | | Payee addres | s; City; | State | ; Zip Co | de | | | | | |
| | \$97.32 | | 850 Gallatin | Field Rd. | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Belgrade, M | T 59714 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categories listed at | the ton of this sch | iedule) | (b) | Description | | | | |
| | OF EXPENDITURE | ` ' | Travel Out o | | . 110 100 01 1110 0011 | .ouu.o, | | | outsi | de of Texas. Con | plete Schedule T. | |
| | EXPENDITURE | | | | | | | | , TX, | officeholder living | g expense | |
| | | | | | | | | Car Rental | | | | |
| | | | | | | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Offic | eholder name | (| Office sou | ght | | | Office h | eld | |
| | experience to beliefit 6/01 | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Conditate/Officebolder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Candidate/Officeholder/Politica | | | Legal Services | | ung Expe aries/Wa(| | Contract Labor | | OTHER (enter a | strict category not listed abov | re) |
|---|--|----------|-----------------|---|---------------------------|-----------------------|-----------|----------------|-------|---|------------------------------------|-----------|
| | Credit Card Payment | | | The Instruction Gu | ide explains how | to com | ple | te this form. | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commissio | n Filers) |
| | Sch: 6/13 Rpt: 31/38 | | Geren, Char | les L. (The Hon | orable) | | | | | 00029493 | | |
| 4 | Date | 5 | Payee name | | | | | | _ | | | |
| | 11/15/2024 | | Hill Country | Springs | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addres | s; City; | State; Zip | Code | e | | | | | |
| | \$7.65 | | 10019 S IH | 35 Frontage Rd. | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 7 | 8747 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (so | e Categories listed at th | o top of this schodulo) | (t | b) | Description | | | | |
| | OF | ľ | | e categories listed at the lead/Rental Exp | | ` | 1 | | outsi | de of Texas. Com | plete Schedule T. | |
| | EXPENDITURE | | | · | | | | _ | | officeholder living | | |
| | | | | | | | | Office Bottled | l wa | ater for offic | e staff | |
| | | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | Candidate/Offic | eholder name | Office | sough | nt | | | Office h | eld | |
| | | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 12/09/2024 | | Hill Country | Springs | | | | | | | | |
| | Amount (\$) | | Payee address | s; City; | State; Zip | Code | е | | | | | |
| | \$28.40 | | 10019 S IH | 35 Frontage Rd. | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 7 | 8747 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categories listed at th | e top of this schedule) | (k | b) | Description | | | | |
| | OF EXPENDITURE | | Office Overh | iead/Rental Exp | ense | | | _ | | de of Texas. Com officeholder living | plete Schedule T. | |
| | | | | | | | | Bottled Water | | | | |
| | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offic | eholder name | Office | sough | nt | | | Office h | eld | |
| | expenditure to benefit C/OI | Н | | | | | | | | | | |
| _ | Date | | Payee name | | | | | | | | | |
| | 11/01/2024 | | • | Museum District | | | | | | | | |
| | Amount (\$) | \vdash | Payee addres | s; City; | State; Zip | Code | е | | | | | |
| | \$345.67 | | 5701 Main S | • | , , | | | | | | | |
| | | | | | | | | | | | | |
| | | | Houston, TX | 77005 | | | | | | | | |
| | PURPOSE | (a) | | e Categories listed at th | a tan of this cabadula) | a | b) | Description | | | | |
| | OF | `` | Travel Out of | | e top of triis scrieddie) | (| -, | | outsi | de of Texas. Com | plete Schedule T. | |
| | EXPENDITURE | | | | | | | _ | , TX, | officeholder living | g expense | |
| | | | | | | | | Lodging | | | | |
| | | | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | Candidate/Offic | eholder name | Office | sough | nt | | | Office h | eld | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 7/13 Rpt: 32/38 | Geren, Charles L. (The Honorable) 00029493 |
| 4 | Date | 5 Payee name |
| | 12/09/2024 | La Barbecue |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$214.23 | 2401 E. Cesar Chavez St. |
| | | |
| | | Austin, TX 78702 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Capitol Lunch |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 11/27/2024 | Mathis, Terri |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2,500.00 | 1630 Moonlight Dr. |
| | | |
| | | Cedar Park, TX 78613 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Wages |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | - |
| | Date | Payee name |
| | 11/01/2024 | Murphy Nasica |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$8,472.05 | 815-A Brazos St., Suite 304 |
| | | |
| | | Austin , TX 78701 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Voter Alert Mailer, Data, Postage |
| | | rotor, riore maior, Data, rootage |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to comp | olete this f | form. | | |
|---|---|---|---|------------|---------------------|----------------------------|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 8/13 Rpt: 33/38 | Geren, Charles L. (The Honorable) | | | 00029493 | |
| 4 | Date | 5 Payee name | | <u> </u> | | |
| | 11/08/2024 | Murphy Nasica | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | 9 | | | |
| | \$5,000.00 | 815-A Brazos St., Suite 304 | | | | |
| | | | | | | |
| | | Austin , TX 78701 | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b |) Descrip | ption | | |
| | OF EXPENDITURE | Consulting Expense | | | de of Texas. Com | plete Schedule T. |
| | EXPENDITORE | | | | officeholder living | gexpense |
| | | | Nover | mber Cons | uiting | |
| Ļ | 0 1: 0.11.7.7.1. | | | | 0". 1 | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sough | it | | Office he | eld |
| | | | | | | |
| | Date | Payee name | | | | |
| | 11/08/2024 | Murphy Nasica | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | 9 | | | |
| | \$15,000.00 | 815-A Brazos St., Suite 304 | | | | |
| | | | | | | |
| | | Austin, TX 78701 | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b |) Descrip | ption | | |
| | OF EXPENDITURE | Consulting Expense | | | | plete Schedule T. |
| | | | Win B | | officeholder living | g expense |
| | | | *************************************** | ondo | | |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sough | nt | | Office he | eld |
| | expenditure to benefit C/OI | • | | | | |
| _ | Date | Payee name | | | | |
| | 12/20/2024 | Murphy Nasica | | | | |
| _ | Amount (\$) | Payee address; City; State; Zip Code | | | | |
| | \$2,503.39 | 815-A Brazos St., Suite 304 | • | | | |
| | Ψ2,000.00 | ors // Brazos ot., Gaite ou | | | | |
| | | Austin , TX 78701 | | | | |
| | | | | | | |
| | PURPOSE OF | 2 (| Descrip | | de of Teyas Com | plete Schedule T. |
| | EXPENDITURE | Consulting Expense | | | officeholder living | |
| | | | Polling | g Text Mes | ssages | |
| | | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sough | nt | | Office he | eld |
| | expenditure to benefit C/OI | 1 | | | | |
| | | | | | | |
| | | | | | | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Conditate/Officebolder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 9/13 Rpt: 34/38 | Geren, Charles L. (The Honorable) 00029493 |
| 4 | Date | 5 Payee name |
| | 12/09/2024 | P. Terry Stand |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$34.59 | 515 Congress Ave. |
| | | |
| | | Austin, TX 78701 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Lunch |
| | | Lunch |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | Complete ONLY if direct expenditure to benefit C/O | |
| _ | | |
| | Date | Payee name |
| | 11/01/2024 | Qi Austin |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$424.64 | 835 W 6th St., Unit 114 |
| | | |
| | | Austin, TX 78703 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Member Dinner |
| | | Member 2 miles |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Data | |
| | Date | Payee name |
| | 12/09/2024 | Qi Austin |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$176.13 | 835 W 6th St., Unit 114 |
| | | |
| | | Austin, TX 78703 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Lunch |
| | | Luncii |
| L | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | Complete ONLY if direct expenditure to benefit C/O | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officeholder/Politica Credit Card Payment | Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 10/13 Rpt: 35/38 | Geren, Charles L. (The Honorable) 00029493 |
| 4 | Date | 5 Payee name |
| | 11/01/2024 | Railhead Smokehouse |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$74.79 | 2900 Montgomery St. |
| | | |
| | | Fort Worth, TX 76107 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense |
| | | Check if Austin, TX, officeholder living expense |
| | | Lunch |
| _ | Complete ONLY if direct | Condidate/Office holds no year |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| _ | | |
| | Date | Payee name |
| | 11/01/2024 | Rent a Frog Valet |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$714.45 | 4706 Camp Bowie Blvd. |
| | | |
| | | Fort Worth, TX 76107 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Valet for Fundraiser |
| | | Talot io i dilatato. |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| _ | Date | Payee name |
| | 12/27/2024 | Shotgun Properties, LLC |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,300.00 | 8501 Jacksboro Hwy |
| | Ψ1,500.00 | 0001 Jacksboid Hwy |
| | | Fort Worth TV 7612E |
| | | Fort Worth, TX 76135 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Electronic Digital Sign Advertising |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | | Legal Services | morials Expens | S | | /ages | e /Contract Labor ete this form. | | Travel Out of DOTHER (enter | District a category not listed above) | |
|----------|--|-------------|--------------------------|------------------|-------------------|--------------|---------|-------|--|-------|---|---------------------------------------|----------|
| 1 | Total pages Schedule F1: | 12 | EII ED NAME | | | | | | | 3 | Filer ID | (Ethics Commission Filers | <u> </u> |
| - | Sch: 11/13 Rpt: 36/38 | _ | Geren, Chai | | - Honorahl | ام) | | | | ľ | 00029493 | • | , |
| Ļ | <u> </u> | ┞ | | 1103 E. (111 | Tionorabi | | | | | | 00023433 | | |
| 4 | Date | 5 | Payee name | | | | | | | | | | |
| | 12/13/2024 | | Southweste | rn Expositi | on & Lives | stock Sh | IOW | | | | | | |
| 6 | Amount (\$) | 7 | Payee address | ss; City; | | State; | Zip Co | de | | | | | |
| | \$690.00 | | PO Box 150 | 1 | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Fort Worth, | TX 76101 | | | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | o Catogorios lis | tod at the ten of | f this schod | ulo) | (b) | Description | | | | |
| | OF | l` <i>′</i> | Contribution | | | | uic) | , | _ : | outsi | ide of Texas. Co | mplete Schedule T. | |
| | EXPENDITURE | | Candidate/C | | | | tee | | — | | , officeholder livi | ng expense | |
| | | | | | | | | | Parking Cont | tribu | ution | | |
| | | | | | | | | | | | | | |
| 9 | Complete ONLY if direct | | Candidate/Offic | ceholder na | me | Off | ice sou | ght | | | Office I | neld | |
| | expenditure to benefit C/OI | Н | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | | |
| | 11/30/2024 | | TSUS Foun | dation | | | | | | | | | |
| | Amount (\$) | | Payee addres | ss; City; | | State; | Zip Co | de | | | | | |
| | \$1,000.00 | | 601 Colorac | lo Street | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Austin, TX 7 | '8701 | | | | | | | | | |
| | PURPOSE | (0) | | | | | | (h) | 5 | | | | |
| | OF | (a) | Category (Se | | | | ule) | (D) | Description Check if travel | outsi | ide of Texas. Co | mplete Schedule T. | |
| | EXPENDITURE | | Contribution Candidate/C | | | , | tee | | = | | , officeholder livi | | |
| | | | | | | | | | Contribution | | | | |
| | | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offic | ceholder na | me | Off | ice sou | ght | | | Office I | neld | |
| | expenditure to benefit C/OI | Н | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | | _ |
| | 11/01/2024 | | The Optimis | t Club of A | zle | | | | | | | | |
| | Amount (\$) | H | Payee addres | | | State; | Zin Co | de | | | | | |
| | \$1,000.00 | | 321 W. Mair | | | State, | 21p C0 | uc | | | | | |
| | Ψ1,000.00 | | JZI VV. Maii | 131. | | | | | | | | | |
| | | | A 1. TV 70. | 000 | | | | | | | | | |
| | | | Azle, TX 76 | 020 | | | | | | | | | |
| | PURPOSE OF | (a) | Category (Se | | | | ule) | (b) | Description | | | | |
| | EXPENDITURE | | Contribution | | | | | | | | ide of Texas. Co , officeholder livi | mplete Schedule T. | |
| | | | Candidate/C | Jiliceriolae | i/Political (| COMMINIC | iee | | ш | | | icycles for Christmas | |
| | | | | | | | | | event | ۰ | | ., | |
| \vdash | Complete ONLY if direct | L(| Candidate/Offic | ceholder na | me | Off | ice sou | aht | | | Office I | neld | |
| | expenditure to benefit C/OI | | za.iaidato/OIII | onioidoi ild | | Oili | .50 50u | ar | | | 0111001 | | |
| H | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. | | | | | |
|--|---|---|--|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ | | | | |
| Sch: 12/13 Rpt: 37/38 | Geren, Charles L. (The Honorable) 00029493 | | | | | |
| 4 Date | 5 Payee name | | | | | |
| 12/20/2024 | U-Stor Vickery | | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | |
| \$120.00 | 7111 W. Vickery Blvd. | | | | | |
| · | , | | | | | |
| | Benbrook , TX 76116 | | | | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | Check if Austin, TX, officeholder living expense | | | | | |
| | Monthly Fees for Campaign sign storage | | | | | |
| | | | | | | |
| 9 Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought Office held | | | | | |
| Date | Payee name | | | | | |
| 11/01/2024 | USPS | | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| \$292.00 | 251 W. Lancaster Ave. | | | | | |
| | | | | | | |
| | Fort Worth, TX 76102 | | | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| OF EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | Check if Austin, TX, officeholder living expense | | | | | |
| | Postage for Contribution Acknowledge letters | | | | | |
| | | | | | | |
| Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | | | | | |
| Date | Payee name | _ | | | | |
| 12/31/2024 | USPS | | | | | |
| | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| \$146.00 | 251 W. Lancaster Ave. | | | | | |
| | | | | | | |
| | Fort Worth, TX 76102 | | | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| OF EXPENDITURE | Solicitation/Fundraising Expense | | | | | |
| EXPENDITORE | Check if Austin, TX, officeholder living expense | | | | | |
| | Postage for contribution acknowledgement letters | | | | | |
| | | | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | |
| expenditure to benefit C/OH | | | | | | |
| | | | | | | |
| | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to com | plete | e this form. | | |
|-----------------------------|-----------------------------|--|-------|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) | | |
| | Sch: 13/13 Rpt: 38/38 | Geren, Charles L. (The Honorable) | | 00029493 | | |
| 4 | Date | 5 Payee name | | <u> </u> | | |
| | 11/30/2024 | Worthington National Bank | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Cod | е | | | |
| | \$5.00 | 200 West Main Street | | | | |
| | | | | | | |
| | | Arlington, TX 76010 | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | b) [| Description | | |
| | OF EXPENDITURE | Accounting/Banking | Ļ | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| | | | L | Monthly Bank Statement Fee | | |
| | | | | • | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office soug | ht | Office held | | |
| | expenditure to benefit C/O | 1 | | | | |
| | Date | Payee name | | | | |
| | 12/31/2024 | Worthington National Bank | | | | |
| | Amount (\$) | Payee address; City; State; Zip Cod | е | | | |
| | \$5.00 | 200 West Main Street | | | | |
| | | | | | | |
| | | Arlington, TX 76010 | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | b) [| Description | | |
| | OF EXPENDITURE | Accounting/Banking | Ę | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| | | | | Dec Monthly Bank Statement Fee | | |
| | | | | , | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office soug | ht | Office held | | |
| expenditure to benefit C/OH | | | | | | |
| | Date | Payee name | | | | |
| | 12/31/2024 | Worthington National Bank | | | | |
| | Amount (\$) | Payee address; City; State; Zip Cod | е | | | |
| | \$12.00 | 200 West Main Street | | | | |
| | | | | | | |
| | | Arlington, TX 76010 | | | | |
| | PURPOSE OF | c y (coo canagement and top or time constant) | b) [| Description | | |
| | EXPENDITURE | Accounting/Banking | Ļ | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| | | | | Contribution Wire Transfer Fee | | |
| | | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office soug | ht | Office held | | |
| | expenditure to benefit C/OH | | | | | |
| | | | | | | |
| | | | | | | |