CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Comm 00080101		2 Total pages	filed: 38
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Joseph Cole			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
		Hefner				
4 CANDIDATE /	ADDRESS / PO BOX; APT	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P.O. Box 167				Receipt #	Amount
Change of Address	Mount Pleasant, TX 75456					
	Would't leasant, 17, 75-55				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mr.	Richard W.				
	NICKNAME	LAST		SUFFIX		
	Ricky	Baker				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CIT	Y; ST	ATE; ZIP CODE
TREASURER ADDRESS	2900 I-30 East					
(Residence or Business)	Mt. Pleasant, TX 75455					
7 CAMPAIGN	AREA CODE PHON	E NUMBER E	EXTENSION			
TREASURER PHONE	(903) 563-1994					
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after c	ampaign treasurer
		_			appointment (of	ficeholder only)
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (At	tach C/OH-FR)
9 PERIOD	Month Day Year			Month Day		
COVERED	10/27/2024	TH	IROUGH	12/31/20)24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pi	rimary	Runoff	Other	
		G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	IT (if known)	
	State Representative Distri	ict 5				
	1			I		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Hefner, Joseph Cole	(The Honorable)	14 Filer ID 00080101	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political These expenditures may have been ma officeholders are required to report this	de without the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
⊔ °	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURE	ER NAME	
		COMMITTEE CAMPAIGN TREASURE	ER ADDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (O ES OF LOANS, OR CONTRIBUTIONS		\$ 0.00
		AL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 81,760.25
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 9,256.68
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	\$ 206,088.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	LOANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT			nder penalty of perjury, that the acc I includes all information required t tion Code.	
		Т	he Honorable Joseph Cole He	fner
			Signature of Candidate or Officehol	
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
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 o	of office.	
Signature of office	cer administering	Printed name of officer administer	ing Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 of 38
_	ER NAN	ME oseph Cole (The Honorable)	19 Filer ID 00080101	(Eth	ics Commission Filers)
20 SC	CHEDULI	E SUBTOTALS SCHEDULE	0000222		SUBTOTAL AMOUNT
1.	XIVIE OF	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	81,410.25
1.	<u> </u>	SCHEDULE AL. MICINETANT FOLHICAE CONTRIBOTIONS		├	01,410.20
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	350.00
3.		\$			
4.		SCHEDULE E: LOANS	\$	_	
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				9,256.68
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🗆	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🗆	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	906.64

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/15 Rpt: 4/38	
2	FILER NAME Hefner, Jose	ph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$5,000.00
_	Dringing Loggy	Huntsville, TX 77320	O Employer (Coo Instructions			
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#:_Ahlberg, Trevor Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Irving, TX 75038 pation / Job title (See Instructions)	Employer (See Instructions)		
	Banking		Self	,		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Associated Builders & Contractors of Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78767				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/22/2024	Full name of contributor out-of-state PAC (ID#: Austin Firefighters Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Avera Governmental Affairs LLC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/15 Rpt: 5/38	
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Bentley Public Affairs 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Blackridge Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Brentwood Public Affairs 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 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Bresnan, Steven & Amy Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_CATPAC Contributor address; City; State; Zip Code Irving, TX 75039			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CO	NIRIBUTIC)NS		SCHEDUI	E A1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/15 Rpt: 6/38	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		eph Cole (The Honorable)				00080101	
4	Date 10/28/2024	5 Full name of contributor X Chevron Employees PAC	out-of-state PAC (ID#: C	<u>C00035006</u>)	7	Amount of Contribution (\$)	\$1,000.00
		6 Contributor address; City; State;	Zip Code				
		San Ramon, CA 94583					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#: C	C00348938)		Amount of Contribution (\$)	
	11/15/2024	Chubb Group Holdings Inc. F)		7 41104111 61 6011411544611 (4)	\$500.00
		Contributor address; City; State;					************
		Continuator address, Only, State,	Zip code				
		Philadelphia, PA 19106					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/05/2024	Colyandro, John	_			()	\$500.00
	Contributor address; City; State; Zip Code						
			•				
		Austin, TX 78731					
		pation / Job title (See Instructions)		Employer (See Instructions	()		
	Public Affairs	5		Colyandro Public Affairs	;		
	Date	Full name of contributor	out-of-state PAC (ID#:	000248716		Amount of Contribution (\$)	
	12/11/2024	Comcast & NBCUniversal PA	AC .				\$1,000.00
		Contributor address; City; State;	Zip Code				
		Philadelphia, PA 19103			L		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/11/2024	EYE-PAC of the Texas Ophtl	nalmological Assoc	iation			\$500.00
		Contributor address; City; State;	Zip Code				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/15 Rpt: 7/38	
2	FILER NAME Hefner, Jose	ph Cole (The Honorable)			3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	5 Full name of contributorEnterprise Holdings, Inc. F6 Contributor address; City; St		tee	7	Amount of Contribution (\$)	\$500.00
		St. Louis, MO 63105					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 10/30/2024	Full name of contributor ExxonMobil PAC Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Irving, TX 75039 pation / Job title (See Instructions) I	Employer (See Instructions	;) 		
	i ilicipai occu	pation / 300 title (See manuctions	,	Employer (See Instructions	"		
	Date 12/11/2024	Full name of contributor Fieldstead and Company Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,000.00
		Irvine, CA 92623					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor Foley & Lardner LLP Texa Contributor address; City; St Dallas, TX 75201			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/03/2024	Full name of contributor Friends of The University Contributor address; City; St. Austin, TX 78763			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/15 Rpt: 8/38	
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	n Filers)
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ HCA Texas Good Government Fund 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_	Deine in all a servi	Dallas, TX 75240	O Frankrije (Constructions)			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#:_HMWK LLC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/04/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Chicago, TX 60601 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Hogg, Willis Contributor address; City; State; Zip Code Big Sandy, TX 75755			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID#:_ Hogg, Willis Contributor address; City; State; Zip Code Big Sandy, TX 75755)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / 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: 6/15 Rpt: 9/38	
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	 Full name of contributor out-of-state PAC (ID#:_ Holland and Knight Texas PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_		Dallas, TX 75201				
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#: Houston Police Retired Officers Association PAC Contributor address; City; State; Zip Code Houston, TX 77219			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Incline PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	r incipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Independent Bankers Association of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Adam Contributor address; City; State; Zip Code Austin, TX 78731)		Amount of Contribution (\$)	\$260.25
	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: 7/15 Rpt: 10/38		
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)	
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Kickapoo Traditional Tribe of Texas 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00	
_	Duinning Langu	Eagle Pass, TX 78852	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#:_ Locke Lord LLP Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Longbow Consulting Partners LLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Matz, Laura Contributor address; City; State; Zip Code Austin, TX 78703			Amount of Contribution (\$)	\$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#:_ Moak Casey PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL C	CONTRIBUTION	NS		SCHEDUI	_E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/15 Rpt: 11/38	
2	FILER NAME Hefner, Jose	ph Cole (The Honorable)			3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	 Full name of contributor NCHA's Texas Events PAG Contributor address; City; Sta)	7	Amount of Contribution (\$)	\$2,500.00
		Fort Worth, TX 76107	1.		<u></u>		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor Oncor TX State PAC Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Dallas, TX 75202 pation / Job title (See Instructions)		Employer (See Instructions	<u>'</u>		
	Fillicipal occu	pation / 300 title (See instructions)		Employer (See instructions	>)		
	Date 12/11/2024	Full name of contributor Padfoot PAC Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77024 pation / Job title (See Instructions)		Employer (See Instructions	z)		
	r moipar occa	panerry cos une (coe mondono)		Employer (Gee meadeach)	-,		
	Date 12/11/2024	Full name of contributor Penn Entertainment Inc. T Contributor address; City; Sta Wyomissing, PA 19610		00423814)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor PharmPac Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I.				

	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: 9/15 Rpt: 12/38	
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4		5 Full name of contributor out-of-state PAC (ID#:_ Political Action Committee for Engineers 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_	Dein sin al a ser	Austin, TX 78768				
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#:_ Political Action Committee of the Independent In Contributor address; City; State; Zip Code Austin, TX 78768) Isurance Agents of Texas		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#:_ RECA-Good Government PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Dringinal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Rural Friends of Electric Cooperatives Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Ryan Texas PAC Contributor address; City; State; Zip Code Dallas, TX 75240)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 10/15 Rpt: 13/38	
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Smith County Republican Women 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_		Tyler, TX 75711				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/25/2024 TREPAC Texas Association of Realtors Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
Austin, TX 78768 Principal occupation / Job title (See Instructions) Employer (See Instruction						
	Date 12/13/2024				Amount of Contribution (\$)	\$1,150.00
	Dringing! goog	Austin, TX 78741	Employer (Con Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Alliance for Life PAC Contributor address; City; State; Zip Code Austin, TX 78754			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association Staffing PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION)NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 11/15 Rpt: 14/38		
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	Full name of contributor	7	Amount of Contribution (\$)	\$700.00	
_	Driveries	Houston, TX 77269	Io. 5			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Texas Association of Crane Owners PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu	Austin, TX 78716 upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Banking Association BankPAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Cornerstone Credit Union League PAC Contributor address; City; State; Zip Code Dallas, TX 75265			Amount of Contribution (\$)	\$2,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 12/15 Rpt: 15/38	
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024			7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78704				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	12/11/2024 Texas McDonald's Operators Association PAC, Inc. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
Athens, TX 75751 Principal occupation / Job title (See Instructions) Employer (See Instruction						
	Date 12/11/2024				Amount of Contribution (\$)	\$250.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Texas Mortgage Bankers Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78744			Amount of Contribution (\$)	\$3,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/29/2024 Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705				Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		·				

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	E A1
	The Instru	ction Guide explains hov	1	Total pages Schedule A1: Sch: 13/15 Rpt: 16/38			
2	FILER NAME Hefner, Jose	ph Cole (The Honorable)			3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/11/2024	 5 Full name of contributor Texas Podiatric Medical A 6 Contributor address; City; S 			7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions	s) 	9 Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Texas Poultry PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00		
	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions	9	Employer (See Instructions	:) 		
	i ilicipai occu	pation / Job title (See Instructions	·/	Employer (See instructions	,		
	Date 12/11/2024				Amount of Contribution (\$)	\$500.00	
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	;) 	Employer (See Instructions	5)		
	Date Full name of contributor X out-of-state PAC (ID#: C00096842) 12/11/2024 The American Electric Power Company - Texas - Committee for Contributor address; City; State; Zip Code Washington, DC 20004			Amount of Contribution (\$)	\$1,500.00		
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 12/11/2024 Full name of contributor out-of-state PAC (ID#:) The Chickasaw Nation Contributor address; City; State; Zip Code Ada, OK 74820			Amount of Contribution (\$)	\$2,500.00		
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 14/15 Rpt: 17/38		
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3	Filer ID (Ethics Commission 00080101	on Filers)
4	Date 12/02/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$)	\$1,000.00
_	Delicalis al access	Austin, TX 78701				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	12/11/2024 TxANA PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instruction						
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Valero Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	San Antonio, TX 78269 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: Vistra Employees Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_ Whitmire, Whitney Contributor address; City; State; Zip Code Houston, TX 77018			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ection Guide explains how to complete this	form.	1 Total pages Sc Sch: 15/15 Rp	
2	FILER NAME Hefner, Jose	eph Cole (The Honorable)		3 Filer ID (Ethic	es Commission Filers)
4	Date 12/11/2024	 Full name of contributor	:)	7 Amount of Con	tribution (\$) \$1,000.00
		Austin, TX 78701	_		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	ns)	
	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 Con	tribution (\$) \$1,000.00
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions	ns)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 19/38 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hefner, Joseph Cole (The Honorable) 00080101 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 11/21/2024 Second Floor Strategies \$350.00 | Fundraiser Email 7 Contributor address; City; State; Zip Code Distribution Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	Credit Card Fayinent	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/17 Rpt: 20/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	10/30/2024	American Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,355.90	1 Skyview Drive
		Fort Worth, TX 76155
8	PURPOSE	
Ü	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description X Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Airfare
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/21/2024	Anconna Italian Restaurant
	Amount (\$)	Payee address; City; State; Zip Code
	\$87.05	1067A TX-37
	Ψ01.00	
		Quitmon TV 75702
		Quitman, TX 75783
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to Discuss Officeholder Matters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/09/2024	Arturo's Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.32	314 W. 17th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to Discuss Officeholder Matters
		wieeung to Discuss Officeriolider Matters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	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: 2/17 Rpt: 21/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	11/14/2024	Boxcar Ship N Print
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.28	421 E Broad St
		Ste 4
		Mineola, TX 75773
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Mailing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Postage
		1 Ostage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/10/2024	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.99	3212 E Cesar Chavez St
	,	
		Austin, TX 78702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Graphic Design Subscription
		Craphic Besign Cassonption
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	11/12/2024	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.99	3212 E Cesar Chavez St
	,	
		Austin, TX 78702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Graphic Design Subscription
		Graphic Design Subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/17 Rpt: 22/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	12/06/2024	Chick-fil-A
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.21	503 W Martin Luther King Blvd
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to Discuss Officeholder Matters
		mooting to biodado emocridadi mattere
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Date	Payee name
	11/07/2024	Chick-fil-A
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.61	603 S Plano Rd
		Richardson, TX 75081
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Meeting to Discuss Officeholder Matters
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
_		
	Date	Payee name
	11/14/2024	Chick-fil-A
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.65	1 Aviation Circle
		Washington, DC 22202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to Discuss Officeholder Matters
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	fficeholder/Politica ment		Legal Services The Instruction Gu		Wages	/Contract Labor		OTHER (enter a	strict category not listed	above)
				ide explains now to et	Jilipi	te tins form.	-			
1 Total pages S	Schedule F1:	2 FILER NA	AME				3	Filer ID	(Ethics Comm	ission Filers)
Sch: 4/17 R	Rpt: 23/38	Hefner,	Joseph Cole (The H	lonorable)				00080101		
4 Date		5 Payee na	me				_			
11/19/2024			ans for Liberty							
				0: 1 7' 0						
6 Amount (\$)		7 Payee ad		State; Zip Co	oae					
	\$1,000.00	PO Box	604							
		Diana, T	X 75640							
8 PURPOSE		(a) Category	(See Categories listed at th		(b)	Description				
OF	-		tions/Donations Ma		(~)	_	outsi	de of Texas. Com	plete Schedule T.	
EXPENDITU	JRE		te/Officeholder/Poli			=		officeholder living		
						Sponsorship				
9 Complete ON	I V if direct	Candidate/	Officeholder name	Office sou	ıaht			Office he	ald	
expenditure to			Officeriolder flame	Office 300	agrit			Office In	Ciu	
		<u> </u>								
Date		Payee na	me							
12/02/2024		Google I	nc.							
Amount (\$)		Payee ad	dress; City;	State; Zip C	ode					
	\$30.70	1600 An	nphitheatre Pkwy							
		Mountai	2 Vious CA 04042							
		Mountai	n View, CA 94043							
PURPOSE OF	E	(a) Category	(See Categories listed at the	e top of this schedule)	(b)	Description				
EXPENDITU	JRE	Fees				=			plete Schedule T.	
						Email Accour		officeholder living	g expense	
						Email Accoun	ונ ר	ee		
					<u> </u>					
Complete <u>ON</u> expenditure to			Officeholder name	Office sou	ught			Office h	eld	
схреницие ц	benefit C/O	1								
Date		Payee na	me							
11/04/2024		Google	nc.							
Amount (\$)		Payee ad		State; Zip Co	ode					
γ unount (Φ)	\$30.70	1	nphitheatre Pkwy	State, Zip C	ouc					
	Ψ30.70	1000 AII	iprilitieatie Fkwy							
		Mountai	n View, CA 94043							
PURPOSE	E	(a) Category	(See Categories listed at th	e top of this schedule)	(b)	Description				
OF	IDE	Fees				Check if travel	outsi	de of Texas. Com	plete Schedule T.	
EXPENDITU	JKE							officeholder living	g expense	
						Email Accour	nt F	ee		
Complete ON			Officeholder name	Office sou	ught			Office he	eld	
expenditure to	benefit C/O	Н								

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica 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: 5/17 Rpt: 24/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	12/10/2024	HEB
6	Amount (\$) \$19.22	7 Payee address; City; State; Zip Code 6001 W. Parmer Ln. Austin, TX 78727
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Capitol Office Food & Beverage
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/18/2024	HEB
	Amount (\$) \$37.62	Payee address; City; State; Zip Code 6001 W. Parmer Ln. Austin, TX 78727
	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 Capitol Office Food & Beverage
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	Hampton Inn
	Amount (\$) \$209.01	Payee address; City; State; Zip Code 1701 Lavaca St
		Austin, TX 78701
	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 Lodging
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense 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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wa	ges/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to con	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/17 Rpt: 25/38	Hefner, Joseph Cole (The Honorable)	00080101
4 Date	5 Payee name	•
11/12/2024	Hilton Garden Inn	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	•
6 Amount (\$)	1	е
\$406.66	500 N Interstate 35	
	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EVENDITUE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Lodging
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	H	
Date	Payee name	
11/14/2024	Hilton	
	**	
Amount (\$)	Payee address; City; State; Zip Coc	е
\$454.52	525 New Jersey Ave NW	
	Washington, DC 20001	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travor out or Biodiot	Check if Austin, TX, officeholder living expense
		Lodging
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	Н	
Data	Гъ	
Date	Payee name	
11/05/2024	Laura's Cheesecake	
Amount (\$)	Payee address; City; State; Zip Coc	e
\$28.77	109 N. Madison	
	Mount Pleasant, TX 75455	
PURPOSE		b) Description
OF OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Podd/Beverage Expense	Check if Austin, TX, officeholder living expense
		Meeting to Discuss Officeholder Matters
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht 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 Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	,
	Sch: 7/17 Rpt: 26/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	11/25/2024	Lyft
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.94	185 Berry St
		Suite 400
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Rideshare
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	11/22/2024	Lyft
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.94	185 Berry St
		Suite 400
		San Francisco, CA 94107
	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 Rideshare
		Nuestiale
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/14/2024	Lyft
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.99	185 Berry St
	Ψ20.99	Suite 400
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Rideshare
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense E Accounting/Banking Consulting Expense E 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 The Instruction Guide ex	Salaries/V	Vages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)	П
	Sch: 8/17 Rpt: 27/38		eph Cole (The Honor	rable)				00080101		
4	Date	5 Payee name								
	11/13/2024	Lyft								
6	Amount (\$)	7 Payee addres	ss; City;	State; Zip Co	ode					
	\$17.78	185 Berry S	t							
		Suite 400								
		San Francis	co, CA 94107							
8	PURPOSE	(a) Category (Se	e Categories listed at the top o	of this schedule)	(b)	Description				
	OF EXPENDITURE	Travel Out o	of District			=		de of Texas. Com		
						Rideshare	, TX,	officeholder living	expense	
						Riuesiiaie				
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ıaht			Office he	eld	
	expenditure to benefit C/OI		sendider name		igiit			Office fic	nu .	
	Date	Payee name								
	11/12/2024	Lyft								
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
	\$32.13	185 Berry S	t							
		Suite 400								
		San Francis	co, CA 94107							
	PURPOSE	(a) Category (Se	e Categories listed at the top o	of this schedule)	(b)	Description				
	OF EXPENDITURE	Travel Out o	of District			_		de of Texas. Com		
						Rideshare	, TX,	officeholder living	expense	
						Riuesiiaie				
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	l ıght			Office he	eld	_
	expenditure to benefit C/OI									
	Date	Payee name								
	12/02/2024	Mailchimp								
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
	\$140.71	675 Ponce	de Leon Ave NE							
		Suite 5000								
		Atlanta, GA	30308							
	PURPOSE	(a) Category (Se	e Categories listed at the top of	of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees						de of Texas. Com		
						—		officeholder living	expense	
						Email List Fe	C			
	Complete ONLY if direct	Candidate/Offic	ceholder name	Office sou	l Ight			Office he	eld	_
	expenditure to benefit C/O			211100 000	.g			211100 110	·· ·	
										_
1										

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/17 Rpt: 28/38 Hefner, Joseph Cole (The Honorable) 00080101 4 Date Payee name Mailchimp 11/04/2024 6 Amount (\$) Payee address; State; Zip Code \$140.71 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Email List Fee** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/21/2024 Mount Pleasant/Titus County Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$100.00 1604 North Jefferson Mount Pleasant, TX 75455 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/06/2024 Office Max Amount (\$) Payee address: City; State; Zip Code \$10.78 907 W. 5th Ste #101 Austin, TX 78703 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 10/17 Rpt: 29/38	Hefner, Joseph Cole (The Honorable)		00080101
4	Date	5 Payee name		
	12/16/2024	P Terry's		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$10.28	3303 N Lamar Blvd.		
		Auctin TV 70705		
Ļ	DUDDOOF	Austin, TX 78705	1- \	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 ood/Deverage Expense		Check if Austin, TX, officeholder living expense
				Meeting to Discuss Officeholder Matters
Ļ	Consolete ONII V if direct	Out lists 10 ff as hallow your	1-4	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough H	nt	Office held
⊨	Data			
	Date 11/08/2024	Payee name Phoebe's Diner		
_	Amount (\$)	Payee address; City; State; Zip Code	<u>P</u>	
	\$69.59	408 W. 11th St.		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Meeting to Discuss Officeholder Matters
				moduling to Discuss embolished matters
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O	4		
	Date	Payee name		
	12/13/2024	Purple Sage Strategies		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$1,000.00	3002 Bryker Drive		
		Austin, TX 78703		
	PURPOSE OF	1 ' ' 1	b)	Description
	EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Social Media Consulting
L				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht	Office held
L	experiulture to beliefft C/OI	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/17 Rpt: 30/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	11/12/2024	Purple Sage Strategies
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 3002 Bryker Drive
		Austin, TX 78703
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Social Media Consulting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/30/2024	Squarespace Inc.
	Amount (\$) \$35.18	Payee address; City; State; Zip Code 225 Varick Street 12th floor New York, TX 10014
	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 Website Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/29/2024	Payee name Squarespace Inc.
	Amount (\$) \$35.18	Payee address; City; State; Zip Code 225 Varick Street 12th floor New York, TX 10014
	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 Website Fee
	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

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Coi	The Instruction Guide explains how to co	Expen: Wage:	nse Travel Out of District es/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 12/17 Rpt: 31/38		Hefner, Joseph Cole (The Honorable)		00080101
4	Date	5	Payee name		
	10/28/2024		Squarespace Inc.		
6	` '	7	Payee address; City; State; Zip Co	ode	
	\$35.18		225 Varick Street		
			12th floor		
		L	New York, TX 10014		
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 Website Fee
					WCDSILG FGG
9	Complete ONLY if direct		Candidate/Officeholder name Office so	l ught	t Office held
Ĺ	expenditure to benefit C/Oh		Sales and Company of the Solid	agiii	C TIOU TOTAL
	Date		Payee name		
L	11/12/2024	L	Sundevich		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$47.37		1314 9th St NW		
			Washington, DC 20001		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description
	EXPENDITURE		Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Meeting to Discuss Officeholder Matters
					modaling to Discuss Officeriolider Matters
	Complete ONLY if direct		Candidate/Officeholder name Office sou	<u>I</u> ught	t Office held
L	expenditure to benefit C/OH	Η			
	Date		Payee name		
	10/29/2024		Sympathy Floral Store		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$160.79		230 W. Monroe St.		
			Suite 400		
			Chicago, IL 60606		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE		Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.
	_/\\\D\\\L				Check if Austin, TX, officeholder living expense
					Constituent Memorial
_	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office sou	ught	t Office held
	expenditure to benefit C/O		Office Sul	uyiit	Cinice Held
Eor	me provided by Tayas F	thic	es Commission www.athics.stata.tv.	110	Version V// 1.0.5dd2ace2

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 The Instruction Guide	Salaries/V	Vages	/Contract Labor		OTHER (enter a	category not listed ab	ove)
1	Total pages Schedule F1:	2 FILER NAMI	<u> </u>				3	Filer ID	(Ethics Commiss	on Filers)
	Sch: 13/17 Rpt: 32/38	Hefner, Jos	eph Cole (The Hone	orable)				00080101		
4	Date	5 Payee name								
	11/13/2024	Tegeler, Br	ad							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$2,000.00	135 Wes A	lamo							
		Brenham, 7	X 77833							
8	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Rent				=		de of Texas. Com		
						X Check if Austin, Rent	, IX,	officeholder living	expense	
						Kent				
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ıaht			Office he	ald.	
ľ	expenditure to benefit C/OI		denotati name	Office 300	igiit			Office fic	,iu	
-	Date	Payee name								
	12/09/2024	Texas Chili	Parlor							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$35.06	1409 Lavad	a St.							
		Austin, TX	78701							
	PURPOSE OF	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense			=		de of Texas. Comp officeholder living		
						Meeting to Di				
						Mooting to B.	-		idoi Mattoro	
	Complete ONLY if direct		iceholder name	Office sou	ıght			Office he	eld	
	expenditure to benefit C/OI									
	Date	Payee name								
	11/12/2024	The Dublin	er							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$85.36	4 F St NW								
		Washingto	n, DC 20001							
	PURPOSE OF	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense					de of Texas. Comp officeholder living		
						Meeting to Di		-	•	
						Wiccurig to Di	500	ass Cilicens	idel Matters	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ı <u> </u>			Office he	eld	
	expenditure to benefit C/O				-					
l										

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/17 Rpt: 33/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	12/16/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.98	1455 Market St.
		#400
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Rideshare
		Ridestiale
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/13/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.01	1455 Market St.
		#400
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Rideshare
		Ridestiale
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	12/02/2024	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$158.19	2311 S Jefferson Ave
	,	
		Mount Pleasant, TX 75455
	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 Office Supplies, Food and Beverage
		Office Supplies, Food and beverage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:									
	Sch: 15/17 Rpt: 34/38	Hefner, Joseph Cole (The Honorable) 00080101								
4	Date	5 Payee name								
	11/20/2024	Walmart								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$63.76	2311 S Jefferson Ave								
		Mount Pleasant, TX 75455								
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.								
	LAFENDITORE	Check if Austin, TX, officeholder living expense								
		Office Supplies, Food and Beverage								
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	12/18/2024	Whataburger								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$19.64	2200 N. Pacific St								
		Mineola, TX 75773								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.								
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense								
		Meeting to Discuss Officeholder Matters								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI									
	<u> </u>									
	Date	Payee name								
	11/26/2024	Whataburger								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$16.89	2200 N. Pacific St								
		Mineola, TX 75773								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
		Meeting to Discuss Officeholder Matters								
		Wiccumg to Discuss Officeriolider Matters								
	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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 16/17 Rpt: 35/38	Hefner, Joseph Cole (The Honorable) 00080101
4	Date	5 Payee name
	12/02/2024	WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.40	1776 Wilson Blvd
		Ste 530
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Solicitation/Fundraising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online Donation Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/21/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.25	1776 Wilson Blvd
		Ste 530
		Arlington, VA 22209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxos Complete Schedule T
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online Donation Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/24/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	1776 Wilson Blvd
		Ste 530
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online Donation Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment				Legal Services The Instruction (•		ages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 17/17 Rpt: 36/38	ı		eph Cole (The	Honorable)					00080101	
4	Date	5	Payee name								
	12/03/2024		WinRed								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de				
	\$19.70		1776 Wilson	n Blvd							
			Ste 530								
			Arlington, V	A 22209		<u>.</u>					
8	PURPOSE	(a)	Category (Se	ee Categories listed a	the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Solicitation/	Fundraising Ex	pense			—		de of Texas. Com	
										officeholder living	expense
								Online Donat	ion	ree	
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Offi	ceholder name	C	Office souç	ght			Office he	eld
	Date		Payee name								
	12/05/2024		WinRed								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de				
	\$19.70		1776 Wilson	n Blvd							
		l	Ste 530								
		l		A 22200							
		├	Arlington, V								
	PURPOSE OF			ee Categories listed a		edule)	(b)	Description			
	EXPENDITURE		Solicitation/Fundraising Expense					=		de of Texas. Com officeholder living	
								Online Donat			ехрепзе
								Offine Donat	1011	1 66	
	Complete ONLY if direct	<u> </u>	`andidata/Offi	ceholder name		Office soug	thr			Office he	ald
	expenditure to benefit C/O		andidate/One	centitie name		omce sout	JIII.			Office fie	au.

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 37/38 2 FILER NAME Filer ID (Ethics Commission Filers) Hefner, Joseph Cole (The Honorable) 00080101 5 Name of person from whom amount is received 8 Amount (\$) 12/03/2024 \$906.64 Washington Area State Relations Group 6 Address of person from whom amount is received; City; State; Zip Code Arlington, VA 22209 Purpose for which amount is received Check if political contribution returned to filer Partial Reimbursement for Conference Travel Expenses

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 38/38 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hefner, Joseph Cole (The Honorable) 00080101 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee American Airlines 5 Contribution / Expenditure reported on: X Schedule F1 Schedule A2 Schedule B Schedule D Schedule B(J) Schedule C2 Schedule F4 Schedule COH-UC Schedule F2 Schedule G Schedule H 6 Dates of Travel 7 Name of person(s) traveling Hefner, Cole (Rep.) 8 Departure city or name of departure location 11/11/2024 Dallas 9 Destination city or name of destination location 11/14/2024 Washington, DC 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Commercial Airplane Attend and Speak at Conference Event