## 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 Comm 00086182		2 Total pages filed: 89
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Venton C.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LACT		CLIEFIV	01/15/2025
	NICKNAME	LAST Jones		SUFFIX Jr.	01/13/2020
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
MAILING	1075 Griffin Street West				Receipt # Amount
ADDRESS	Suite 212				, and an
Change of Address	Dallas, TX 75215				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER	Mr.	Scott			
NAME					
	NICKNAME	LAST		SUFFIX	
		Jones			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	1075 Griffin Street West				
	Suite 212				
(Residence or Business)	Dallas, TX 75215				
7 CAMPAIGN TREASURER		NE NUMBER E	EXTENSION		
PHONE	(337) 258-7601				
8 REPORT					
TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasurer
				_	appointment (officeholder only)
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year	<b>T</b> 11	IDOLICII	Month Day	Year
OOVERED	07/01/2024	IH	IROUGH	12/31/202	24
10 ELECTION	ELECTION DATE	<del></del>		ELECTION TYPE	
10 ELECTION	ELECTION DATE  Month Day Year		rimary	Runoff	Other
	Monar Bay roa		-	브	
			eneral	Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	Γ (if known)
	State Representative Dist	rict 100			
		GO T	O PAGE 2		

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 89

13 C / OH NAME	Jones Jr., Venton C.	(The Honorable)	<b>14</b> Filer ID (	(Ethics Commi	ssion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without It officeholders are required to report this informatio	the candidate's or office	eholder's know	ledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS (OTHER THA			
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$	0.00
	\$	86,372.53			
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	46,924.27
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	58,954.10
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		The Honor	able Venton C. Jones	s Jr.	
		Signature o	f Candidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
of	, 20, to co	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering	y oath

### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

			CC	OVER S	3 of 89
	ER NAM	ME Venton C. (The Honorable)	<b>19</b> Filer ID 00086182	(Ethics C	ommission Filers)
		E SUBTOTALS SCHEDULE		SUB	TOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	70,906.00
2.	X	\$	15,466.53		
3.		\$			
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	46,924.27
6.		\$			
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/28 Rpt: 4/89	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		enton C. (The Honorable)	_		L	00086182	
4	Date 09/07/2024	<ul><li>5 Full name of contributor Andrews, Denard</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:_ ate; Zip Code	)	7	Amount of Contribution (\$)	\$75.00
8	Principal occu	Plano, TX 75074 pation / Job title (See Instructions	a I	Employer (See Instructions			
	Marketing M		,	Texas Instruments	-,		
	Date 08/13/2024	Full name of contributor Associated General Contr Contributor address; City; St		)	•	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78768					
	Principal occu	pation / Job title (See Instructions	) 	Employer (See Instructions	s)		
	Date 07/23/2024	Full name of contributor Aten, Stan Contributor address; City; St	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$25.00
		Dallas, TX 75224					
	Principal occu	pation / Job title (See Instructionsed	)	Employer (See Instructions Not Employed	5)		
	Date 11/02/2024	Full name of contributor Baker, Cornelius  Contributor address; City; St  Washington, DC 20009	out-of-state PAC (ID#:_ ate; Zip Code	)		Amount of Contribution (\$)	\$100.00
	Principal occu Asst Resear	pation / Job title (See Instructions ch Professor	)	Employer (See Instructions Emory University	5)		
	Date 10/13/2024	Full name of contributor Bing, Eric Contributor address; City; St Houston, TX 77056	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$500.00
		pation / Job title (See Instructions of Health Care Professions	)	Employer (See Instructions Chief Executive Officer	5)		
	The College	o. Hodan Gare F 10163310113		Cinci Excoduve Onicel			

	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 2/28 Rpt: 5/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	n Filers)
4	Date 11/22/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$250.00
_	<u> </u>	Decatur, GA 30032	- la	5 1 (0 1 1 1			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 07/31/2024	Full name of contributor out-of-state Pa Black, Albert  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$500.00
		Dallas, TX 75208					
		Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Entry (See Instructions)  On-Target Supplies				stics	
	Date 12/10/2024	Full name of contributor out-of-state Pr Blackridge Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 09/07/2024	Full name of contributor out-of-state Problem Blair, Harrison  Contributor address; City; State; Zip Code  Dallas, TX 75232		)		Amount of Contribution (\$)	\$75.00
	Principal occu President/CE	pation / Job title (See Instructions)		Employer (See Instructions Dallas Black Chamber of	•	Commerce	
	Date 09/03/2024	Full name of contributor out-of-state Part Blair, Lorie  Contributor address; City; State; Zip Code  Dallas, TX 75232				Amount of Contribution (\$)	\$75.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			,				

	MONEI	ARY POLITICAL (	CONTRIBUTIO	N	IS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains hov	v to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 3/28 Rpt: 6/89	
2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)
	Jones Jr., Ve	enton C. (The Honorable)					00086182	
4	Date 09/02/2024	<ul><li>5 Full name of contributor</li><li>Brown, Jermaca</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$75.00
		Dallas, TX 75234						
8	Principal occu Self	pation / Job title (See Instructions	s) !	9	Employer (See Instructions Self	5)		
_	Date	Full name of contributor	out-of-state PAC (ID#:		,	Т	Amount of Contribution (\$)	
	09/08/2024	Bryant, Randall	Uni-oi-state PAC (ID#		)		Amount of Continuation (4)	\$75.00
	03/00/2024		***** 7'- 0-d-			l		Ψ13.00
		Contributor address; City; S	tate; ZIP Code					
		Dallas, TX 75201						
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	CEO				Politics United Marketin	g		
	Date	Full name of contributor	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	
	12/14/2024	Bryant, Randall						\$250.00
		Contributor address; City; S	tate; Zip Code					
		Dallas, TX 75201						
	Principal occu	pation / Job title (See Instruction:	s)		Employer (See Instructions	5)		
	CEO				Politics United Marketin	g		
	Date	Full name of contributor	x out-of-state PAC (ID#: C	:00	002089		Amount of Contribution (\$)	
	09/24/2024	CWA - COPE PCC						\$2,000.00
		Contributor address; City; S	tate; Zip Code					
		Washington, DC 20001						
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	s)		
	Date	Full name of contributor	X out-of-state PAC (ID#: C	:00	0002089	Г	Amount of Contribution (\$)	
	10/17/2024	CWA - COPE PCC	<b>—</b>					\$1,000.00
		Contributor address; City; S	tate; Zip Code					
		•						
		Washington, DC 20001						
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
								<u></u>

	MONEI	ARY POLITICAL C		SCHEDUI	E A1		
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/28 Rpt: 7/89	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Jones Jr., Ve	enton C. (The Honorable)				00086182	
4	Date 08/13/2024	<ul><li>5 Full name of contributor</li><li>Cain, Randy</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$150.00
		Austin, TX 78763	ite, Zip Code				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Lawyer			R. Cain Law			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/11/2024	Campos, Lorena					\$250.00
		Contributor address; City; Sta	ate; Zip Code		1		
		Austin, TX 78701					
		pation / Job title (See Instructions)		Employer (See Instructions			
	Government Affairs Campos Consulting Gr		oup				
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/18/2024	Carlo, John					\$2,500.00
		Contributor address; City; Sta	ate; Zip Code		]		
		D. II TV 75000					
	Delegale at a second	Dallas, TX 75228		Formal Control of the street o	<u></u>		
		pation / Job title (See Instructions)		Employer (See Instructions	•		
	Physician			Prism Health North Tex	as		
	Date	· '	x out-of-state PAC (ID#: C00	)035006		Amount of Contribution (\$)	
	12/10/2024	Chevron Employees PAC					\$500.00
		Contributor address; City; Sta	ate; Zip Code				
		SAN RAMON, CA 94583					
	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	i inioipai oooa	patient / des title (des metractions)		Employer (Goo moudouene	-,		
	Date	Full name of contributor	Out of state DAC (ID#)		Г	Amount of Contribution (\$)	
	09/08/2024	Chism, Crystal	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$75.00
	03/00/2024		nto: Zin Codo		ŀ		Ψ13.00
		Contributor address; City; Sta	ate, zip Code				
		Desoto, TX 75115					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.                                    </u>		
	Self			Employed	•		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 5/28 Rpt: 8/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	n Filers)
4	Date 10/29/2024	Churchwell, Charles	-state PAC (ID#: ode		7	Amount of Contribution (\$)	\$100.00
		Dallas, TX 75219					
8	Principal occu Self	pation / Job title (See Instructions)	9	Employer (See Instructions Podiatrist/Lawyer	i)		
	Date 09/08/2024	Full name of contributor out-of- Coleman, Kardal  Contributor address; City; State; Zip C				Amount of Contribution (\$)	\$75.00
		Dallas, TX 75201					
				Employer (See Instructions Dallas County Democra		Party	
	Date 08/17/2024	Full name of contributor out-of-Colon, Ricardo  Contributor address; City; State; Zip C	-state PAC (ID#:	)		Amount of Contribution (\$)	\$75.00
		Mckinney, TX 75070					
	Principal occu Chief Execut	pation / Job title (See Instructions) ive Officer		Employer (See Instructions MTM	i)		
Date 08/17/2024		Full name of contributor out-of-state PAC (ID#:)  Colon, Ricardo  Contributor address; City; State; Zip Code  Mckinney, TX 75070				Amount of Contribution (\$)	\$75.00
	Principal occu Chief Execut	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 09/07/2024	Full name of contributor out-of- Cooks, Desmond Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$75.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Cooks Law Firm, Pllc	5)		
	·,						

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/28 Rpt: 9/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)		3	Filer ID (Ethics Commission 00086182	n Filers)
4	Date 11/26/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$500.00
_		Dallas, TX 75215				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 09/08/2024	Full name of contributor out-of-state PAC (ID#:_ Davis, Mike Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$75.00
	Delicational	Dallas, TX 75228	Faralassa (Caralassa trastica)			
	Consultant	pation / Job title (See Instructions)	Employer (See Instructions Self	)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_ Dinh, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Dallas, TX 75207				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions Distinctive Vision Care	)		
	Date 07/09/2024	Full name of contributor out-of-state PAC (ID#:_ Driffin, Daniel Contributor address; City; State; Zip Code  Atlanta, GA 30344	)		Amount of Contribution (\$)	\$25.00
	Principal occu Student	pation / Job title (See Instructions)	Employer (See Instructions Student	)		
	Date 08/09/2024	Full name of contributor out-of-state PAC (ID#:_ Driffin, Daniel Contributor address; City; State; Zip Code Atlanta, GA 30344	)		Amount of Contribution (\$)	\$25.00
	Principal occu Student	pation / Job title (See Instructions)	Employer (See Instructions Student	)		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to com	nplete this form	n.	1	Total pages Schedule A1: Sch: 7/28 Rpt: 10/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 09/02/2024	Ewing, Pamela	-state PAC (ID#:		7	Amount of Contribution (\$)	\$75.00
_		Diamondhead, MS 39525	1-				
8	Principal occu Employed	pation / Job title (See Instructions)	9	Employer (See Instructions Solventum	i)		
	Date 09/02/2024	Full name of contributor out-of- Ewing, Pamela Contributor address; City; State; Zip C	-state PAC (ID#:	)		Amount of Contribution (\$)	\$75.00
	Principal occu	Diamondhead, MS 39525 pation / Job title (See Instructions)		Employer (See Instructions			
	Employed	pation 7 300 title (See Instructions)		Solventum	')		
	Date 10/03/2024	Full name of contributor out-of- Forsythe Lill, Veletta  Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		Dallas, TX 75223					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 12/10/2024	Full name of contributor out-of- Friends of UT Southwestern Medic Contributor address; City; State; Zip C				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/11/2024	Full name of contributor out-of- Friends of UT-Dallas PAC  Contributor address; City; State; Zip C  Dallas, TX 75240	-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			1				

	MONET	ARY POLITICAL CONTRIBU	JTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 8/28 Rpt: 11/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 10/05/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$1,000.00
0	Dringing oggu	Dallas, TX 75225	lo.	Employer (See Instructions			
8	Attorney	pation / Job title (See Instructions)	9	Munsch Hardt	·)		
	Date 09/07/2024	Full name of contributor  out-of-state PA Goree, Ahmad Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$75.00
	Principal occu	Desoto, TX 75115 pation / Job title (See Instructions)		Employer (See Instructions			
	PIO	oation / Job title (See instructions)		SBA	יי		
	Date 11/26/2024	Full name of contributor	.C (ID#:			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75240					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 08/13/2024	Full name of contributor out-of-state PA HMWK LLC 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 10/11/2024	Full name of contributor out-of-state PAHOMEPAC of Texas  Contributor address; City; State; Zip Code  Austin, TX 78701	C (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			<u> </u>				

	MONET	ARY POLITICAL C	CONTRIBUTION	IS 		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 9/28 Rpt: 12/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 10/08/2024	<ul><li>5 Full name of contributor Hamilton, Jane Hope</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
		Desoto, TX 75115					
8	Principal occu Real Estate	pation / Job title (See Instructions Dev	9	Employer (See Instructions Matthews Southwest	s)		
	Date 12/06/2024	Full name of contributor Harris, George  Contributor address; City; St		)		Amount of Contribution (\$)	\$50.00
	Principal occu	Dallas, TX 75219 pation / Job title (See Instructions		Employer (See Instructions	s)		
	Retired	pation 7 300 the (See manuchons		Retired	3)		
	Date 09/08/2024	Full name of contributor Haynes, Torrance Contributor address; City; St		)		Amount of Contribution (\$)	\$75.00
		Dallas, TX 75216					
	Principal occu Barber	pation / Job title (See Instructions	)	Employer (See Instructions Self	s)		
	Date 12/13/2024	Full name of contributor Hendrix, Mike  Contributor address; City; St  Dallas, TX 75207	out-of-state PAC (ID#: ate; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu Consultant	pation / Job title (See Instructions	)	Employer (See Instructions Self	s)		
	Date 08/30/2024	Full name of contributor Henson, Rozia Contributor address; City; St Woodbridge, VA 22194	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$75.00
	Principal occu Represenati	pation / Job title (See Instructions ve	)	Employer (See Instructions VA House of Delegates			
	·		L				

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 10/28 Rpt: 13/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)				3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 12/14/2024	<ul><li>5 Full name of contributor Hickson, DeMarc</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$100.00
_	Daine in all a con-	Washington, DC 20019	, I	_	Foundation (October to the street)			
8	Executive Di	pation / Job title (See Instructions rector	)	9	Employer (See Instructions Us Helping Us	5)		
	Date 07/08/2024	Full name of contributor HillCo PAC Contributor address; City; St			)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	)		Employer (See Instructions	;) 		
	o.pa. 000a	paner rest and (est men sense.	,			,		
	Date 10/01/2024	Full name of contributor Hoffman, Marguerite Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code		)		Amount of Contribution (\$)	\$1,000.00
	Drincinal occu	Dallas, TX 75220 pation / Job title (See Instructions	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Employer (See Instructions	·/		
	Investor	pation / Job title (See matrictions	,		Self	,,		
	Date 10/13/2024	Full name of contributor Holland And Knight Texas Contributor address; City; St  Dallas, TX 75201			)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions	)		Employer (See Instructions	<u>(</u>		
	Date 09/08/2024	Full name of contributor Holley, Nadthaneil Contributor address; City; St	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$225.00
	Principal occu Ceo	pation / Job title (See Instructions	)		Employer (See Instructions Freelux	;)		

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 11/28 Rpt: 14/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	n Filers)
4	Date 09/08/2024	Holley, Nathaniel	ut-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$75.00
		Dallas, TX 75207					
8	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Freelux Project	)		
	Date 12/14/2024	Holmes IV, Oscar  Contributor address; City; State; Z		)		Amount of Contribution (\$)	\$50.00
	Principal occu	Woolwich Township, NJ 08085 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Professor			Rutgers University			
	Date 12/12/2024	Full name of contributor	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Lancaster, TX 75134					
	Principal occu Truck Driver	pation / Job title (See Instructions)		Employer (See Instructions JB HUNT	)		
	Date 10/11/2024	Full name of contributor o Johnson, Willis Contributor address; City; State; Z	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions JBJ Management	)		
	Date 07/08/2024	Full name of contributor o Jones, Buddy Contributor address; City; State; Z	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$500.00
	Principal occu Co-Founder	pation / Job title (See Instructions)		Employer (See Instructions HillCo Partners	)		
			•				

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 12/28 Rpt: 15/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	n Filers)
4	Date 12/11/2024	<ul><li>5 Full name of contributor Kapoor, Poonam</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: e; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
_	Deignigal	Houston, TX 77007	lo.	Frankrijer (Coo koets istorio			
8	Marketing	pation / Job title (See Instructions)	9	Employer (See Instructions Rose International	)		
	Date 09/30/2024	Full name of contributor  Kemp, Andrew  Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$100.00
	Deinsinal assu	Dallas, TX 75211		Frankrian (Cook la structions			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions University of Houston	)		
	Date 12/07/2024	Full name of contributor  Kitchell, Ellen  Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75204					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Utsw	)		
	Date 10/10/2024	Full name of contributor  L Swanson, Lisa  Contributor address; City; State  Dallas, TX 75218		)		Amount of Contribution (\$)	\$100.00
	Principal occu Medical Dire	pation / Job title (See Instructions) ctor		Employer (See Instructions BCBS	)		
	Date 09/08/2024	Full name of contributor  Lel, Ruben  Contributor address; City; State  Dallas, TX 75208	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$75.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas ISD	)		
			<u>'</u>				

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 13/28 Rpt: 16/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 12/12/2024	<ul><li>5 Full name of contributor Loewy, Adam</li><li>6 Contributor address; City; States</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78731	1-				
8	Principal occu Law	pation / Job title (See Instructions	9	Employer (See Instructions Loewy Law Firm	5)		
	Date 09/08/2024	Full name of contributor  Long, Amber  Contributor address; City; Sta		)		Amount of Contribution (\$)	\$75.00
	Principal occu	New York, NY 10034 pation / Job title (See Instructions)	)	Employer (See Instructions	 5)		
	Education			RCS			
	Date 10/04/2024	Full name of contributor  Matthews, Jack  Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code	)		Amount of Contribution (\$)	\$5,000.00
		Lewisville, TX 75057					
	Principal occu Developer	pation / Job title (See Instructions)	)	Employer (See Instructions Matthew SW/Matthew H	-	dings	
	Date 12/05/2024	Full name of contributor  McClurkin, Courtney  Contributor address; City; Sta		)		Amount of Contribution (\$)	\$100.00
	Principal occu Podiatrist	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 10/25/2024	Full name of contributor McGarrahan, Andy Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2.00
	Principal occu Psychologist	pation / Job title (See Instructions)	)	Employer (See Instructions Self	<u>(</u>		

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	IS		SCHEDULE	A1
	The Instruc	ction Guide explains hov	v to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 14/28 Rpt: 17/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)				3	Filer ID (Ethics Commission 00086182	Filers)
4	Date 10/27/2024	<ul><li>5 Full name of contributor McGarrahan, Andy</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		)	7	Amount of Contribution (\$)	\$2.00
_	Deignigal	Dallas, TX 75248		٦	Franksian (Cookastustians			
8	Principal occu Psychologist	pation / Job title (See Instruction:	5)	9	Employer (See Instructions Self	5)		
	Date 09/12/2024	Full name of contributor McGarrahan, Andy Contributor address; City; S			)	•	Amount of Contribution (\$)	\$3.00
		Dallas, TX 75248						
	Principal occu Psychologist	pation / Job title (See Instruction:	5)		Employer (See Instructions Self	s)		
	Date 09/15/2024	Full name of contributor McGarrahan, Andy Contributor address; City; S	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$3.00
		Dallas, TX 75248						
	Principal occu Psychologist	pation / Job title (See Instruction:	5)		Employer (See Instructions Self	5)		
	Date 09/26/2024	Full name of contributor McGarrahan, Andy Contributor address; City; S Dallas, TX 75248			)		Amount of Contribution (\$)	\$2.00
	Principal occu Psychologist	pation / Job title (See Instruction:	5)		Employer (See Instructions	<u>                                      </u>		
	Date 10/03/2024	Full name of contributor McGarrahan, Andy Contributor address; City; S Dallas, TX 75248	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$2.00
	Principal occu Psychologist	pation / Job title (See Instruction:	5)		Employer (See Instructions Self	s)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 15/28 Rpt: 18/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 10/12/2024	<ul><li>5 Full name of contributor [ McGarrahan, Andy</li><li>6 Contributor address; City; Star</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$3.00
8	Principal occu	Dallas, TX 75248 pation / Job title (See Instructions)	I q	Employer (See Instructions	<u>:)</u>		
0	Psychologist		j	Self	P)		
	Date 12/14/2024	Full name of contributor  McGarrahan, Andy  Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$4.00
		Dallas, TX 75248					
	Principal occu Psychologist	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
	Date 11/26/2024	Full name of contributor  McGuire Woods Federal P  Contributor address; City; Star		)		Amount of Contribution (\$)	\$250.00
		Richmond, VA 23219					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 10/07/2024	Full name of contributor  McGuire, Michael  Contributor address; City; Star  Dallas, TX 75205	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,500.00
	Principal occu President & (	pation / Job title (See Instructions) CEO		Employer (See Instructions Andrews Distributing	5)		
	Date 09/06/2024	Full name of contributor  Medrano, Pauline  Contributor address; City; Star  Dallas, TX 75219	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$75.00
	Principal occu Elected Office	pation / Job title (See Instructions)		Employer (See Instructions Dallas County	s)		
			L				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/28 Rpt: 19/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)		l	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 12/13/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,000.00
_		Dallas, TX 75219				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_ Meyers, Lucas  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78759  spation / Job title (See Instructions)	Employer (See Instructions	) 		
	Self	pation 7 cos title (cos metadotorio)	Governmental Affairs, LI			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:_ Miller, Adam Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75206				
	Principal occu Finance	pation / Job title (See Instructions)	Employer (See Instructions) Matthews	5)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_ Montoya, Daniel  Contributor address; City; State; Zip Code  Austin, TX 78705	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Healthcare	pation / Job title (See Instructions)	Employer (See Instructions Gilead Sciences	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Montoya, Daniel Contributor address; City; State; Zip Code  Austin, TX 78705			Amount of Contribution (\$)	\$1,000.00
	Principal occu Healthcare	pation / Job title (See Instructions)	Employer (See Instructions Gilead Sciences	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/28 Rpt: 20/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)		3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 12/10/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_North Texas Automobile Dealers PAC</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$2,000.00
		Irving, TX 75062				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Norton, Jonathan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$75.00
		Dallas, TX 75204				
	Principal occu Playwright	pation / Job title (See Instructions)	Employer (See Instructions Dallas Theater Center	)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Orozco, Michael Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75227				
	Principal occu Constable	pation / Job title (See Instructions)	Employer (See Instructions Dallas County	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Patricia Shipton Governmental Affairs 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#:_ Patricia Shipton Governmental Affairs  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains hov	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 18/28 Rpt: 21/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 09/05/2024	<ul><li>5 Full name of contributor Prince, Martese</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		_) <b>7</b>	Amount of Contribution (\$)	\$75.00
		Dallas, TX 75215					
8	Principal occu Director	pation / Job title (See Instructions	9	Employer (See Instru Abounding Prospe			
	Date 12/14/2024	Full name of contributor Pritchett, Brad Contributor address; City; S				Amount of Contribution (\$)	\$1,500.00
	Principal occu	Houston, TX 77008 pation / Job title (See Instructions	s)	Employer (See Instru	ctions)		
	Interim CEO			Equality Texas	oo.,		
	Date 10/12/2024	Full name of contributor Puga, Christina Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Dallas, TX 75376					
	Principal occu Commission	pation / Job title (See Instructions er	s)	Employer (See Instru City of Dallas	ctions)		
	Date 11/22/2024	Full name of contributor Quesada, George Contributor address; City; S Dallas, TX 75208				Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instru Sommerman & Qu	•	LLP	
	Date 09/08/2024	Full name of contributor Rayson, Linda Contributor address; City; S Desoto, TX 75115				Amount of Contribution (\$)	\$75.00
	Principal occu PSR	pation / Job title (See Instructions	s)	Employer (See Instru Chub and Son Insu			
			,				

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 19/28 Rpt: 22/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	n Filers)
4	Date 09/08/2024	<ul><li>5 Full name of contributor Rayson, Natasha</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: ate; Zip Code	)	7	Amount of Contribution (\$)	\$75.00
8	Principal occu	Desoto, TX 75115 pation / Job title (See Instructions)	) la	Employer (See Instructions	·/_		
0	Not Employe		j	Not Employed	)		
	Date 12/10/2024	Full name of contributor Requardt, Denise Contributor address; City; Sta		)		Amount of Contribution (\$)	\$25.00
		Dallas, TX 75224					
	Principal occu Business Co	pation / Job title (See Instructions)		Employer (See Instructions Aetna CVS Healthcare	s)		
	Date 08/13/2024	Full name of contributor Rodriguez, Oscar Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78705 pation / Job title (See Instructions)	1	Employer (See Instructions	;) 		
	President	pation 7 dob title (See Manuellons,	′	Texas Association of Br		dcasters	
	Date 12/10/2024	Full name of contributor Sampson Public Affairs LL Contributor address; City; Sta		)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78749 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 10/10/2024	Full name of contributor Sampson, DeMetris Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how t	o complete this for	n.	1	Total pages Schedule A1: Sch: 20/28 Rpt: 23/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 09/07/2024	<ul><li>5 Full name of contributor Sanchez, Gerardo</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#:e; Zip Code	)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Dallas, TX 75235 pation / Job title (See Instructions)	او	Employer (See Instructions	.)		
0	Director of P		· ·	VisitDallas	')		
	Date 09/06/2024	Full name of contributor  Scott, Gregory  Contributor address; City; State				Amount of Contribution (\$)	\$1,000.00
	Dringing agg	Dallas, TX 75216	1	Employer (See Instructions	_		
	Human Reso	pation / Job title (See Instructions) ources		Employer (See Instructions Learfield	5)		
	Date 12/11/2024	Full name of contributor  Scott, Gregory  Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringing aggr	Dallas, TX 75216	1	Employer (See Instructions	_		
	Human Reso	pation / Job title (See Instructions) ources		Employer (See Instructions Learfield	')		
	Date 10/07/2024	Full name of contributor  Snell, Dave  Contributor address; City; State  Argyle, TX 76226	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu SVP	pation / Job title (See Instructions)		Employer (See Instructions Matthews Southwest	5)		
	Date 12/15/2024	Full name of contributor Street, Austin Contributor address; City; State Dallas, TX 75229	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions UT Southwestern	)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 21/28 Rpt: 24/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date 10/23/2024	<ul><li>5 Full name of contributor</li><li>Suprun, Stephen</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: e; Zip Code	)	7	Amount of Contribution (\$)	\$50.00
_		Dallas, TX 75230	<u> </u>				
8		pation / Job title (See Instructions) unty Emergency Medical Service		Employer (See Instructions Executive Director	5)		
	Date 12/10/2024	Full name of contributor  TBA Bank PAC - State  Contributor address; City; State		)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	<u></u>	Amount of Contribution (\$)	
	09/07/2024	Tabb, Angelita  Contributor address; City; State	e; Zip Code				\$75.00
	Principal occu	Roanoke, TX 76262 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Nurse	patient, cos tido (cos motidotorio)		MDMC	<i>''</i>		
	Date 09/07/2024	Full name of contributor Tabb, Jerome Contributor address; City; State Roanoke, TX 76262	out-of-state PAC (ID#: e; Zip Code	)		Amount of Contribution (\$)	\$75.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Compass	<u>I</u> 5)		
	Date 10/04/2024	Full name of contributor Teleki, Kristian Contributor address; City; State Argyle, TX 76226	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Vice Preside	pation / Job title (See Instructions) ent		Employer (See Instructions Matthews Southwest	s)		
			1				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/28 Rpt: 25/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)		3	Filer ID (Ethics Commission 00086182	on Filers)
4			7	Amount of Contribution (\$)	\$500.00	
		Midland, TX 79706				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/11/2024 Texas Land and Title Association  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/28 Rpt: 26/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)		3	Filer ID (Ethics Commission 00086182	on Filers)
4			7	Amount of Contribution (\$)	\$1,000.00	
_		Austin, TX 78705				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/09/2024 Texas Orthopaedic Polication Action Committee  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Podiatric Medical Association Political Ac Contributor address; City; State; Zip Code	tion Committee		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
		paner, cos ano (cos menastro)		,		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Sands PAC Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers 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	)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE <b>A1</b>	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 24/28 Rpt: 27/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)		3	Filer ID (Ethics Commission 00086182	on Filers)
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  7 Texas Trial Lawyers Association  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00	
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#:_ The Independent Insurance Agents of Texas PA Contributor address; City; State; Zip Code	AC		Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78768 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/22/2024	Full name of contributor out-of-state PAC (ID#:_ The Real Estate Council Political Action Commit Contributor address; City; State; Zip Code  Dallas, TX 75201			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/08/2024	Full name of contributor out-of-state PAC (ID#:_ Thomas, Casey  Contributor address; City; State; Zip Code  Dallas, TX 75236			Amount of Contribution (\$)	\$150.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Council member	)		

MONETARY POLITICAL CONTRIBUTIONS				E <b>A1</b>			
The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 25/28 Rpt: 28/89			
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	n Filers)
4 Date 12/14/2024  5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00			
_		Dallas, TX 75224	T-				
8	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions Apple	)		
	Date 08/13/2024	Tipps, Mary  Contributor address; City; State;		)		Amount of Contribution (\$)	\$100.00
Austin, TX 78701  Principal occupation / Job title (See Instructions)  Employer (See Instructions)			Employer (See Instructions	)			
			Texans for Lawsuit Refo				
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$50.00		
		Dallas, TX 75224					
	Principal occu Senior Direc	pation / Job title (See Instructions) tor		Employer (See Instructions Gartner	)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/10/2024 TxANA  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 Full name of contributor out-of-state PAC (ID#:)  10/14/2024 Underwood, Brent  Contributor address; City; State; Zip Code  Irving, TX 75062			Amount of Contribution (\$)	\$100.00			
	Principal occu V2X	pation / Job title (See Instructions)		Employer (See Instructions VP	)		
			1				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 26/28 Rpt: 29/89		
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)			3	Filer ID (Ethics Commission 00086182	on Filers)
4	5 Full name of contributor out-of-state PAC (ID#:) Urbina, Brenda 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$75.00		
		Dallas, TX 75215					
8	Principal occu Director	pation / Job title (See Instructions)	9	Employer (See Instructions Abounding Prosperity In			
	Date Full name of contributor out-of-state PAC (ID#:)  09/05/2024 Urbina, Brenda  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$75.00		
	Principal occu	Dallas, TX 75215	_	Employer (See Instructions	·/-		
			Abounding Prosperity In				
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:_ Vistra Employee Political Action Committee Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$1,000.00
		Irving, TX 75039					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/16/2024	Full name of contributor out-of-state PAC (ID#:_Vogel, Jon Contributor address; City; State; Zip Code Dallas, TX 75204		)	•	Amount of Contribution (\$)	\$500.00
		Employer (See Instructions Jonathan Vogel DDS PI					
Date  Full name of contributor out-of-state PAC (ID#:)  Vogel, Jonathan  Contributor address; City; State; Zip Code  Dallas, TX 75204		•	Amount of Contribution (\$)	\$1,000.00			
	Principal occu Dentist	pation / Job title (See Instructions)		Employer (See Instructions Jonathan Vogel DDS PI			
			•				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 27/28 Rpt: 30/89	
2	FILER NAME Jones Jr., Ve	enton C. (The Honorable)		3	Filer ID (Ethics Commission 00086182	on Filers)
4			7	Amount of Contribution (\$)	\$250.00	
		Austin, TX 78701				
8	Principal occu Co-founder	ipation / Job title (See Instructions)	9 Employer (See Instructions Seeker Strategies	)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/12/2024 Watson, Christopher  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
Washington, DC 20011  Principal occupation / Job title (See Instructions) Employer (See Instruction		Employer (See Instructions	)			
Public health DC Health						
12/10/2024 Whitmire &		Full name of contributor out-of-state PAC (ID#: Whitmire & Munoz Political Fund Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		Houston, TX 77007				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/13/2024	Full name of contributor out-of-state PAC (ID#: Wholesale Beer Distributors of Texas 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	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas  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	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	E A1	
	The Instruction Guide explains how to complete this form.			- 1	1 Total pages Schedule A1: Sch: 28/28 Rpt: 31/89		
2	FILER NAME Jones Jr., V	enton C. (The Honorable)		- 1	Filer ID (Ethics Commission 00086182	on Filers)	
4	4 Date 09/08/2024 5 Full name of contributor out-of-state PAC (ID#:)  Williams, Shawn  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$75.00		
		Dallas, TX 75249					
8	Principal occu Public Relat	upation / Job title (See Instructions) ions	Employer (See Instructions     Allyn Media	าร)			
	Date Full name of contributor out-of-state PAC (ID#:)  12/07/2024 Wilson, Thomas  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
Dallas, TX 75229  Principal occupation / Job title (See Instructions)  Western Frontier Development  Employer (See Instruction CEO			าร)				
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Young, Sharon  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
		Dallas, TX 75220					
	Principal occu Investor	upation / Job title (See Instructions)	Employer (See Instructions Quadrant Holdings	ns)			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ groshardt, joanne  Contributor address; City; State; Zip Code  Richardson, TX 75081	)		Amount of Contribution (\$)	\$10.00	
Principal occupation / Job title (See Instructions)  Not Employed  Not Employed			ns)				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ction Guide explains how to complete this 1	1 Total pages Schedule A2: Sch: 1/2 Rpt: 32/89					
2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
Jones Jr., V	enton C. (The Honorable)		00086182				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$				
5 Date	6 Full name of contributor  ut-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description				
12/10/2024			• \$350.001Email Blast for Fundraiser				
	7 Contributor address; City; State; Zip Code		<u> </u>				
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON					
Founder		Blackridge - Texas	Government Affairs				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
<b>16</b> If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description				
07/12/2024	Planned Parenthood Texas Votes PAC		\$16.38 I Staff Time				
	Contributor address; City; State; Zip Code						
			į į				
	Austin, TX 78704						
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  JUDICIAL) (See instructions)				
	,	1 17 ( 1	, .				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description				
12/10/2024	TREPAC		\$300.00 Fundraising Reception				
	Contributor address; City; State; Zip Code		Event Fee				
			į į				
	Austin, TX 78768		mi				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)				
i iiicipai occi	apation / 300 title (1 Ort NON 300 ICIAL)	Employer (1 OK NOI	(OSS MOLICIAL)				
Contributor's	Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)						
Contributor's	Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)						
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 33/89 3 Filer ID (Ethics Commission Filers) FILER NAME Jones Jr., Venton C. (The Honorable) 00086182 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 09/30/2024 Texas Organizing Project PAC \$9,557.15 Literature Printing and 7 Contributor address; City; State; Zip Code Staff Time San Antonio, TX 78212 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 10/27/2024 Texas Organizing Project PAC \$5,243.00 Printing, Advertising, and Contributor address; City; State; Zip Code staff time San Antonio, TX 78212 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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 (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		_
	Sch: 1/55 Rpt: 34/89	Jones Jr., Venton C. (The Honorable) 00086182	
4	Date	5 Payee name	٦
	09/10/2024	9Nine Kitchen & Lounge	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$2,799.98	2211 N Houston Street	
		Dallas, TX 75219	
8	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	
		Venue Fee and Food Expense	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	4
5	expenditure to benefit C/O		
_	Data		4
	Date	Payee name	
	11/01/2024	A L E Graphix	┙
	Amount (\$)	Payee address; City; State; Zip Code	
	\$60.00	900 S FM 1417	
		Sherman, TX 75092	
	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.	
	<b>—</b>	Check if Austin, TX, officeholder living expense  Graphic Design	
		Graphile Design	
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	<b>S</b>	
			=
	Date	Payee name	
	08/12/2024	A L E Graphix	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	900 S FM 1417	
		Sherman, TX 75092	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
	LXI LINDITORL	Check if Austin, TX, officeholder living expense	
		Graphic Design	
	2		_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense 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 Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T.1 C.1 11 =:	· · · · · · · · · · · · · · · · · · ·	_
1	Total pages Schedule F1:		
L	Sch: 2/55 Rpt: 35/89	Jones Jr., Venton C. (The Honorable) 00086182	
4	Date	5 Payee name	
	12/16/2024	ADP	
6	Amount (\$)	7 Payee address; City; State; Zip Code	$\neg$
	\$113.43	1 ADP Blvd	
		Deceland N1 07060	
		Roseland, NJ 07068	_
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor	
		Payroll Software	
		T dyron contware	
<u>_</u>	Complete ONII V if allows a	Condidate/Officeholder name	_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
L			
	Date	Payee name	
	11/18/2024	ADP	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$113.43	1 ADP Blvd	
		Roseland, NJ 07068	
	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Payroll Software	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	$\neg$
	expenditure to benefit C/OI		
H	Date	Davos nama	=
	10/16/2024	Payee name ADP	
			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$113.43	1 ADP Blvd	
		Roseland, NJ 07068	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	$\exists$
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Payroll Software	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	n 	

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reinburgers

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 3/55 Rpt: 36/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	09/16/2024	ADP
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$113.43	1 ADP Blvd
		Roseland, NJ 07068
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Payroll Software
_	0 1: 0:11:4"	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/16/2024	ADP
	Amount (\$)	Payee address; City; State; Zip Code
	\$113.43	1 ADP Blvd
		Roseland, NJ 07068
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Payroll Software
		r dyfoli Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	Daniel and a second a second and a second an
	Date 07/16/2024	Payee name ADP
	Amount (\$)	Payee address; City; State; Zip Code
	\$113.43	1 ADP Blvd
		Roseland, NJ 07068
	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
		Payroll Software
		,
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>o</b>

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Exp mittee Legal Services  The Instruction Guide	Salaries/\	Wages	s/Contract Labor	Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schodula F1:	12					Filer ID	(Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 4/55 Rpt: 37/89	_	Jones Jr., Venton C. (The Hor	norable)			00086182	(Eurics Commission Filers)
4	Date 09/03/2024	5	Payee name Al Green & The Green & Gree	en Co				
6	Amount (\$) \$900.00	7	Payee address; City; 4100 Springs Valley Rd Suite 475 Dallas, TX 75244	State; Zip Co	ode			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the tree to Contributions/Donations Made Candidate/Officeholder/Politic	е Ву	(b)	Description  Check if travel outside the Check if Austin, TX, Control of the Check if Austin, TX, Cont	officeholder living	
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught		Office he	ld
	Date		Payee name					
	08/30/2024		Al Green & The Green & Gree	en Co				
	Amount (\$)		Payee address; City;	State; Zip Co	ode			
	\$2,000.00		4100 Springs Valley Rd					
			Suite 475					
			Dallas, TX 75244					
	PURPOSE	(a)	Category (See Categories listed at the to	op of this schedule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donations Made Candidate/Officeholder/Politic	е Ву		Check if travel outside Check if Austin, TX, of DLM Award Gala	officeholder living	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught		Office he	ld
	Date 10/15/2024		Payee name Alpha Merit Committee					
	Amount (\$) \$150.00		Payee address; City; P.O. Box 150303	State; Zip Co	ode			
			Dallas, TX 75215					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Contributions/Donations Made Candidate/Officeholder/Politic	е Ву	(b)	Description  Check if travel outside  Check if Austin, TX, of  Annual GALA Co	officeholder living	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught		Office he	ld

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 5/55 Rpt: 38/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	10/15/2024	Alpha Merit Committee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,250.00	P.O. Box 150303
		Dallas, TX 75215
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Annual GALA Contribution
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	Date	Davisa nama
	12/24/2024	Payee name Association of Former Students (A&M)
_	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	505 Geroge Bush Drive
	+=55.30	
		College Station, TX 77840
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxas, Complete Schedule T
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Quarterly Dues
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Pavee name
	11/25/2024	Association of Former Students (A&M)
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	505 Geroge Bush Drive
		College Station, TX 77840
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Quarterly Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Polling Expense 7 - Gift/Awards/Memorials Expense Printing Expense Id Committee Legal Services Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)					
	Credit Card Payment		The Instruction Guide	e explains how	to comp	ete this form.				
1	Total pages Schedule F1: Sch: 6/55 Rpt: 39/89	l	E Venton C. (The Hor	norable)			3	Filer ID 00086182	(Ethics Commission Filers)	
4	Date	<b>5</b> Payee name					<u> </u>			_
	10/23/2024	1	n of Former Studen	ts (A&M)						
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code					
	\$250.00	505 Gerog	e Bush Drive							
_	DUDDOCE	_	ation, TX 77840		(6)					
8	PURPOSE OF EXPENDITURE	Contribution	See Categories listed at the to ons/Donations Made /Officeholder/Politic	e By			n, TX,	ide of Texas. Cor , officeholder livir	mplete Schedule T. Ig expense	
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office	sought			Office h	eld	
	Date	Payee name	<del></del>							
	09/24/2024	Associatio	n of Former Studen	ts (A&M)						
	Amount (\$)	Payee addr	ess; City;	State; Zip	Code					
	\$250.00	505 Gerog	e Bush Drive							
		College St	ation, TX 77840							
	PURPOSE	(a) Category	See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE		ons/Donations Made						mplete Schedule T.	
		Candidate.	Officeholder/Politic	al Committee	,	Quarterly Du		, officeholder livir	ig expense	
						Quartoriy Du				
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office	sought			Office h	eld	
_										_
	Date 08/19/2024	Payee name Avis Car R	e ental (Chicago)							
	Amount (\$)	Payee addr	ess; City;	State; Zip	Code					
	\$572.23	10255 W Z	Zemke Blvd							
		Chicago, I	L 60666							
	PURPOSE OF		See Categories listed at the to		(b)	Description				
	EXPENDITURE	Transporta Expense	tion Equipment And	d Related		ш		, officeholder livir	mplete Schedule T. ng expense	
		Ехрепос				Car Rental				
	Complete ONLY if direct		ficeholder name	Office	sought			Office h	eld	_
	expenditure to benefit C/OI	H								

## 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	Committee	Gift/Awards/Memorials E Legal Services			se s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed abo	ove)
	Credit Card Payment		The Instruction Gui	ide explains how to co	omple	ete this form.				
1	Total pages Schedule F1:	PILER N	AME				3	Filer ID	(Ethics Commission	on Filers)
	Sch: 7/55 Rpt: 40/89	Jones J	r., Venton C. (The H	onorable)				00086182		
4	Date	Payee na	ıme							
	07/26/2024	Biden V	ictory Fund							
6	Amount (\$)	Payee ac	ldress; City;	State; Zip Co	ode					
	\$188.36	430 SOI	JTH CAPITOL STR	EET SE						
		Washin	gton, DC 20003							
8	PURPOSE	<b>a)</b> Category	(See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE		itions/Donations Ma			Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	LAFENDITORE	Candida	te/Officeholder/Polit	ical Committee		_		officeholder living	g expense	
						Campaign Do	ona	ition		
					Ļ					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate	Officeholder name	Office sou	ught			Office h	eld	
	<u> </u>									
	Date	Payee na								
	11/21/2024	Black Ti	e Dinner							
	Amount (\$)	Payee ac	ldress; City;	State; Zip Co	ode					
	\$500.00	3824 Ce	edar Springs							
		#335								
		Dallas, <sup>-</sup>	ΓX 75219							
	PURPOSE	<b>a)</b> Category	(See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE		itions/Donations Mad			<b>=</b>			plete Schedule T.	
		Candida	te/Officeholder/Polit	ical Committee		GALA Tickets		officeholder living	g expense	
						O/IE/T HOROIS	,			
	Complete ONLY if direct	Candidate	/Officeholder name	Office sou	ıaht			Office he	eld e	
	expenditure to benefit C/O	Carraractor	Cincendide name	000 000	agiit			Omoo n	old.	
	Date	Dove no								
	11/06/2024	Payee na Black Ti	e Dinner							
	Amount (\$)	Payee ac		State; Zip C	ode					
	\$514.00	•	edar Springs	State, Zip Ci	oue					
	Ψ514.00	3037 00	dar oprings							
		Dallac -	ΓX 75219							
	DUDDOOF				4.3					
	PURPOSE OF		(See Categories listed at the		(a)	Description  Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		ıtions/Donations Ma ıte/Officeholder/Polit					officeholder living		
						2024 Black Ti	ie I	Dinner Ticke	ets	
	Complete ONLY if direct	Candidate	Officeholder name	Office sou	ught			Office he	eld	
	expenditure to benefit C/O									

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/55 Rpt: 41/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	08/20/2024	Busy Beaver Chicago
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$165.38	3407 W Armitage Ave
		Chicago, IL 60647
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Staff Meal
Ļ	Operation ONLY if dispose	Out it is to the later where where the later where where the later where the later where the later where where the later where
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	· 	
	Date	Payee name
	10/08/2024	Campuzanos
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.17	2618 Oak Lawn Ave
		Dallas, TX 75219
	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
		Staff Meal
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/12/2024	Capitol Giftshop
	Amount (\$)	Payee address; City; State; Zip Code
	\$437.33	1400 N. Congress Avenue
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense  Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gifts for Constituents
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	•

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to cor	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 9/55 Rpt: 42/89	Jones Jr., Venton C. (The Honorable)		00086182
4	Date	5 Payee name		•
	09/16/2024	Clinton Blade aka DJ008		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$500.00	9448 Wolf Run Drive		
		Dallas, TX 75227		
8	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.
	LAFLINDITORL			Check if Austin, TX, officeholder living expense
				Entertainment Expense for Fundraising Event
_	Complete ONLY if direct	Candidate/Officeholder name Office sour	ah+	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ynı	Office field
H	D-4-			
	Date	Payee name		
	07/01/2024	Clinton Blade aka DJ008		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$500.00	9448 Wolf Run Drive		
		Dallas, TX 75227		
	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
				Entertainment Expense for Community Event
	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/O		,	
	Date	Payee name		
	08/05/2024	DFW Federal Club		
	Amount (\$)	Payee address; City; State; Zip Coo	de.	
	\$150.00	3630 Harry Hines	ue	
	Ψ130.00	Suite 306		
		Dallas, TX 75219		
			<i>.</i>	
	PURPOSE OF	,	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
				HRC DFW Federal Club
	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/O	1		

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Contributions/ Donations Made By Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 10/55 Rpt: 43/89	Jones Jr., Venton C. (The Honorable) 00086182
4 Date	5 Payee name
09/03/2024	Dallas AFL-CIO
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40.00	1408 N Washington Ave
	#240
	Dallas, TX 75204
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Labor Day Continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
09/03/2024	Dallas County Democratic Party
Amount (\$)	Payee address; City; State; Zip Code
\$30.00	1414 N Washington Ave
, , , , , ,	
	Dallas, TX 75204
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Candidate/Officeholder (Political Committee)  Candidate/Officeholder (Political Committee)
	Candidate/Officeholder/Political Committee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
09/03/2024	Dallas County Democratic Party
Amount (\$)	Payee address; City; State; Zip Code
\$200.00	1414 N Washington Ave
	Dallas, TX 75204
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Labor Day Continbution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Forms provided by Texas F	thics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/55 Rpt: 44/89	Jones Jr., Venton C. (The Honorable)  00086182
4	Date	5 Payee name
	08/15/2024	Dallas County Tax Office
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.50	500 Elm Street
		Suite 3300
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Transaction Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/05/2024	Democratic National Committee
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	430 SOUTH CAPITOL STREET SE
		Washington, DC 20003
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Sofia ibation to Organization
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
L	07/22/2024	Democratic National Committee
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	430 SOUTH CAPITOL STREET SE
		Washington, DC 20003
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Continuation to Organization
_	Complete ONLY if direct	Condidate/Officeholder name Office sought
	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)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/55 Rpt: 45/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	09/16/2024	Democratic National Committee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	430 SOUTH CAPITOL STREET SE
		Washington, DC 20003
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LXI LINDITORE	Candidate/Officeholder/Political Committee
		Contribution to Organization
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/19/2024	Democratic National Convention
	Amount (\$)	Payee address; City; State; Zip Code
	\$214.00	430 SOUTH CAPITOL STREET SE
	Ψ214.00	430 300 III CAI II OL 311 LELI 3L
		Washington, DC 20003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Contribution to Organization
	Operation ONLY if allowed	One districts (Office healths grown and the control of the control
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	<u>'</u>	
	Date	Payee name
	07/22/2024	Democratic National Convention
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	430 SOUTH CAPITOL STREET SE
		Washington, DC 20003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By   Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Contribution to Organization
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	·		/ages	s/Contract Labor		OTHER (enter a	category not listed above)	
				The Instruction G	Guide explains h	now to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ē					3	Filer ID	(Ethics Commission File	rs)
	Sch: 13/55 Rpt: 46/89		Jones Jr., V	enton C. (The	Honorable)					00086182		
4	Date	5	Payee name									
	11/05/2024		Devin Barrir	ngton Ward Ca	mpaign							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$500.00		2418 Bolling	gbrook Drive								
			SW									
			Atlanta, GA	30311								
8	PURPOSE	⊢		ee Categories listed at	41 4 <b>6</b> 41 1	\	(b)	Description				
ľ	OF	(")		ee Categories listed at ns/Donations M		eaule)	()		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			Officeholder/Po		ittee				officeholder living		
								Campaign Do	ona	tion		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	08/08/2024		Discover (D	allas Sports)								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$109.29		8008 Herb I	Kelleher Way								
			Dallas, TX 7	75235								
	PURPOSE	(a)	Category (s.	ee Categories listed at	the ten of this cohe	adula)	(b)	Description				
	OF	<u> </u> `´		head/Rental Ex		suuic)	` ,	_ :	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE				.,,			Check if Austin	, TX,	officeholder living	expense	
								Office Supplie	es			
	Complete ONLY if direct		Candidate/Offi	ceholder name	O	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	H										
	Date		Payee name									
	11/12/2024		Equality Tex	xas								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$825.00		P O Box 23	40								
			Austin, TX 7	78768								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			ns/Donations M		,			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			Officeholder/Po		ittee				officeholder living		
								Contribution t	to C	Organization		
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld	
L	expenditure to benefit C/OI	Н										

## SCHEDULE F1

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

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

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

Credit Card Payment	The Instruction Guide explains how to complete	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/55 Rpt: 47/89	Jones Jr., Venton C. (The Honorable)	00086182
4 Date	5 Payee name	
11/25/2024	FedEx	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$151.53	3802 Cedar Springs Rd	
	D. II TV 75040	
	Dallas, TX 75219	
8 PURPOSE OF	, (11111)	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Printing Expense	Check if Austin, TX, officeholder living expense
		Printing Expense for Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
experiantare to benefit 6/01		
Date	Payee name	
11/25/2024	FedEx	
Amount (\$)	Payee address; City; State; Zip Code	
\$793.46	3802 Cedar Springs Rd	
	Dallas, TX 75219	
PURPOSE OF	, ( , , , , , , , , , , , , , , , , , ,	Description
EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Printing Expense for Event
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	1	
Date	Payee name	
08/14/2024	Five Star Ford	
Amount (\$)	Payee address; City; State; Zip Code	
\$255.04	8900 President George Bush Tpke	
	Dallas, TX 75252	
PURPOSE OF	1	) Description
EXPENDITURE	Transportation Equipment And Related Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	LApense	Vehicle Maintence for Travel
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	1	

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment			OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	13	B Filer ID	(Ethics Commission Filers)
	Sch: 15/55 Rpt: 48/89	Jones Jr., Venton C. (The Honorable)		00086182	,
4	Date	5 Payee name			
	07/03/2024	Five Star Ford			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$2,500.00	8900 President George Bush Tpke			
		Dallas, TX 75252			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n		
	OF EXPENDITURE	Transportation Equipment 7 and Related		tside of Texas. Com	
				X, officeholder living	
		Vernoie	viairito	ince for Trave	.1
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/OI	H			
	Date	Payee name			
	12/31/2024	Frost Bank			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$5.00	6312 La Vista Drive			
		Dallas, TX 75214			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	1 003		tside of Texas. Com X, officeholder living	
		Banking		x, onicendiaer living	g expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/OI	Н			
	Date	Payee name			
	11/29/2024	Frost Bank			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$5.00	6312 La Vista Drive			
		Dallas, TX 75214			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	1 003		itside of Texas. Com X, officeholder living	
		Banking		A, officeriolaer living	у ехрепзе
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O	•		2.1100 11	
$\vdash$					
l					

### 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: 16/55 Rpt: 49/89	Jones Jr., Venton C. (The Honorable) 00086182	
4	Date	5 Payee name	
	10/31/2024	Frost Bank	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5.00	6312 La Vista Drive	
		Dallas, TX 75214	
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  Banking Fee	
		Danking 1 cc	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	expenditure to benefit C/OI		
H	Date	Payee name	=
	09/30/2024	Frost Bank	
⊢	Amount (\$)	Payee address; City; State; Zip Code	_
	\$5.00	6312 La Vista Drive	
	φ5.00	0312 La Visia Diive	
L		Dallas, TX 75214	
	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	
		Banking Fee	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
F	Date	Payee name	=
	08/30/2024	Frost Bank	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$5.00	6312 La Vista Drive	
	40.00		
		Dallas, TX 75214	
L	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Banking Fee	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries/V	/ages	/Contract Labor		OTHER (enter a	category not listed	above)
_	T	la ======		explains now to co	p.c	1011111	_	E'I 15	(Ethir - O	
1	Total pages Schedule F1:	1					3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 17/55 Rpt: 50/89	Jones Jr.,	Venton C. (The Hon	orable)				00086182		
4	Date	5 Payee name	9							
	07/31/2024	Frost Bank								
_		7 Davis addu	City !!	Ctata: 7in Ca	al a					
О	Amount (\$)	7 Payee addre		State; Zip Co	ue					
	\$5.00	6312 La Vi	sta Drive							
		Dallas, TX	75214							
8	PURPOSE	(a) Catagony			(h)	Description				
٥	OF	Fees	See Categories listed at the to	p of this schedule)	(5)	Description  Check if travel	outs	ide of Texas Com	plete Schedule T.	
	EXPENDITURE	rees				=		, officeholder living		
						Banking Fee				
						J				
_	Complete ONLY if direct	Candidata/Of	ficabaldar nama	Office cou	abt			Office b	ald	
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	gni			Office h	eiu	
	<u>'</u>									
	Date	Payee name	9							
	12/20/2024	Frost Bank								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$15.00	6312 La Vi								
	Ψ13.00	0312 La VI	sia Diive							
		Dallas, TX	75214							
	PURPOSE	(a) Category (s	See Categories listed at the to	p of this schedule)	(b)	Description				
	OF	Fees		,		Check if travel	outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE					Check if Austin	, TX	, officeholder living	g expense	
						Wire Fee				
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ght			Office h	eld	
	expenditure to benefit C/OF	Н								
	Dete									
	Date	Payee name								
	12/13/2024	Frost Bank								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$15.00	6312 La Vi	sta Drive							
		Dallas, TX	75214							
	DUDD005				<i>a</i> >					
	PURPOSE OF		See Categories listed at the to	p of this schedule)	(a)	Description	outo	ide of Toyon Com	valete Cebedule T	
	EXPENDITURE	Fees				<b>=</b>		, officeholder living	plete Schedule T.	
						Wire Fee	, 17	, onicendiaer iivini	g expense	
	0 1. 0	L	·							
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sou	ght			Office h	eld	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Transportation Equipment & Related Expense

Solicitation/Fundraising Expense

Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/55 Rpt: 51/89 Jones Jr., Venton C. (The Honorable) 00086182 4 Date Payee name 12/06/2024 Frost Bank 6 Amount (\$) Payee address; State; Zip Code \$15.00 6312 La Vista Drive Dallas, TX 75214 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 Wire Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/26/2024 Frost Bank Amount (\$) Payee address; City; State; Zip Code \$15.00 6312 La Vista Drive Dallas, TX 75214 **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 Wire Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/19/2024 Frost Bank Amount (\$) Payee address: City: State; Zip Code \$15.00 6312 La Vista Drive Dallas, TX 75214 **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 Wire Fee 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 Co

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/55 Rpt: 52/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	11/04/2024	Frost Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
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  Wire Fee
		Which co
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	10/28/2024	Frost Bank
_	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
	\$15.00	0312 La Visia Diive
		Dulley TV 75044
		Dallas, TX 75214
	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
		Wire Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	10/21/2024	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
	,	
		Dallas, TX 75214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Wire Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	¬
_		

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/55 Rpt: 53/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	10/15/2024	Frost Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
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
		Wire Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	10/07/2024	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
	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  Wire Fee
		Will be the second of the seco
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/01/2024	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense  Wire Fee
		vviie ree
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/55 Rpt: 54/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	09/27/2024	Frost Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
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
		Wire Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/16/2024	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
	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 Wire Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	09/09/2024	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
	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  Wire Fee
		······································
-	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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 22/55 Rpt: 55/89	Jones Jr., Venton C. (The Honorable)	00086182
4	Date	5 Payee name	
	09/03/2024	Frost Bank	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$15.00	6312 La Vista Drive	
		Dallas, TX 75214	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if trave	l outside of Texas. Complete Schedule T.
		Check if Austi Wire Fee	n, TX, officeholder living expense
		Will Cit Co	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
_	Date	Payee name	
	08/26/2024	Frost Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	6312 La Vista Drive	
	,		
		Dallas, TX 75214	
_	PURPOSE	(1)	
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 003	n, TX, officeholder living expense
		Wire Fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit eroi	1	
	Date	Payee name	
	08/19/2024	Frost Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	6312 La Vista Drive	
		Dallas, TX 75214	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 003	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Wire Fee	ii, 17, oniceroluer living expense
		11.10 1 33	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
l			

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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

Legal Services 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: 23/55 Rpt: 56/89 Jones Jr., Venton C. (The Honorable) 00086182 4 Date Payee name 08/12/2024 Frost Bank 6 Amount (\$) Payee address; State; Zip Code \$15.00 6312 La Vista Drive Dallas, TX 75214 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 Wire Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/01/2024 Frost Bank Amount (\$) Payee address; City; State; Zip Code \$15.00 6312 La Vista Drive Dallas, TX 75214 **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 Wire Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/24/2024 Frost Bank Amount (\$) Payee address: City: State; Zip Code \$15.00 6312 La Vista Drive Dallas, TX 75214 **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 Wire Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/55 Rpt: 57/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	07/10/2024	Frost Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
		Dallas, TX 75214
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Wire Fee
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	'	
	Date	Payee name
L	07/01/2024	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	6312 La Vista Drive
l		Dallas, TX 75214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense  Wire Fee
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/19/2024	Gene & Jerry Jones Family Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	1 Cowboys Way
		Frisco, TX 75034
_	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Non-profit Donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/O	·

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction Guid		Wages	s/Contract Labor		OTHER (enter a	strict a category not listed ab	ove)
⊢		_			uc explains now to co	Jilipi	tte till3 formi.	_			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commiss	on Filers)
	Sch: 25/55 Rpt: 58/89		Jones Jr., \	enton C. (The Ho	onorable)				00086182		
4	Date	5	Payee name					_			
l	12/02/2024		Hill Country								
Ļ		<del> _</del>			0 7. 0						
6	Amount (\$)	'	Payee addre		State; Zip Co	oae					
l	\$10.83		10019 S I-3	35 Frontage Rd							
l											
l			Austin, TX	78747							
8	PURPOSE	(2)				(h)	Description				
ľ	OF	رم) 		ee Categories listed at the		(0)	Description  Check if traval	oute	ido of Toyas Con	nplete Schedule T.	
l	EXPENDITURE		Office Over	head/Rental Expe	ense		<u>—</u>		, officeholder livin		
l							Office Supplie		, 0001101001 114111	g expense	
l							Отпос Сарри	00			
L						Ļ					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	Office sou	ught			Office h	eld	
	experiulture to benefit C/Oi	-									
	Date		Payee name								
l	11/01/2024		Hill Country								
⊢	Amount (¢)	┢			State: 7in C	odo					
	Amount (\$)		Payee addre	-	State; Zip Co	oue					
	\$10.83		10019 S I-3	35 Frontage Rd							
			Austin, TX	78747							
Н	PURPOSE	(a)	Category (a	ee Categories listed at the		(b)	Description				
l	OF	``		thead/Rental Expe		( )	_	outsi	ide of Texas. Con	nplete Schedule T.	
l	EXPENDITURE		Office Over	neau/Nentai Expe	51130		<b>=</b>		, officeholder livin		
							Office Supplie	es			
⊢	Complete ONLY if direct	<u> </u>		iceholder name	Office sou	ıaht			Office h	<u></u>	
l	expenditure to benefit C/OI		Januluale/On	icenolaei name	Office 300	agrit			Office II	ciu	
	Date		Payee name								
	09/03/2024		Hill Country	/ Springs							
H	Amount (\$)		Payee addre	ss; City;	State; Zip Co	ode					
	\$10.83		-	85 Frontage Rd	, ,						
l	410.00		10010 0 . 0	o i romago ma							
l											
			Austin, TX	78747							
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
l	OF			head/Rental Expe			Check if travel	outs	ide of Texas. Con	nplete Schedule T.	
	EXPENDITURE			•					, officeholder livin	g expense	
							Office Supplie	es			
1											
Г	Complete ONLY if direct		Candidate/Off	iceholder name	Office sou	ught			Office h	eld	
l	expenditure to benefit C/OI					-					
$\vdash$											

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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: 26/55 Rpt: 59/89	Jones Jr., Venton C. (The Honorable) 00086182				
4	Date	5 Payee name				
	08/01/2024	Hill Country Springs				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$10.83	10019 S I-35 Frontage Rd				
		Austin, TX 78747				
8	PURPOSE					
O	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Office Supplies				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	- CAPOTIGITATO TO BOTTOTIC GAOT					
	Date	Payee name				
	10/01/2024	Hill Country Springs				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$30.82	10019 S I-35 Frontage Rd				
		Austin, TX 78747				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense  Office Supplies				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
	Date	Payee name				
	07/01/2024	Hill Country Springs				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$30.82	10019 S I-35 Frontage Rd				
	400.02	10010 0 1 00 1 10 Mago Na				
		Austin, TX 78747				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Office Supplies				
	0 1. 0					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				

### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Constributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Il Committee Legal Services Salaries/Wages/Contract Labor				Travel in District Travel Out of District OTHER (enter a category not listed above)				
	credit card r dyment		The Instruction Guide	explains how to	compl	ete this form.				
1	Total pages Schedule F1:	l		ovalala)			3	Filer ID	(Ethics Commission	Filers)
	Sch: 27/55 Rpt: 60/89		Venton C. (The Hond	огаріе) ————				00086182		
4	Date 08/02/2024	5 Payee name Hodge, Te								
6	Amount (\$)	<b>7</b> Payee addre	ess; City;	State; Zip	Code					
	\$505.00	7106 Abrai	ms Road	,						
		Dallas, TX	75231 							
8	PURPOSE OF EXPENDITURE	Contributio	see Categories listed at the top ns/Donations Made Officeholder/Political	Ву	(b)		n, TX	, officeholder livii		
9	Complete ONLY if direct expenditure to benefit C/O		ïceholder name	Office s	ought			Office h	eld	
	Date	Payee name	1							
	11/25/2024	House Der	nocratic Campaign C	Committee						
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code					
	\$4,000.00	P.O. BOX	300095							
		Austin, TX	78703							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made					ide of Texas. Co , officeholder livii	mplete Schedule T.	
		Candidate/	Officeholder/Political	Committee		Campaign D			ig expense	
						, 3				
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office s	ought			Office I	eld	
	Date	Payee name	·							
	08/02/2024	ILLECTIVE								
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code					
	\$50.00	851 Lake 0	Carolyn Pkwy							
		Apt. 256								
		Irving, TX	75039							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising	Expense			ш		ide of Texas. Co , officeholder livii	nplete Schedule T.	
						Graphic Desi		, officeriolder livil	ig expense	
							_			
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office s	ought			Office I	eld	

### SCHEDULE F1

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

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

**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
Of USE (content actions on the listed charge)

	Constilling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/55 Rpt: 61/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	08/15/2024	Jpmc Fee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.95	270 Park Avenue
		New York, NY 10017
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
		Debit Card Processing Fee
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/23/2024	Kamala Harris Victory Fund
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.08	430 SOUTH CAPITOL STREET SE
		Washington, DC 20003
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Davies same
	Date 07/22/2024	Payee name  Kamala Harris Victory Fund
		Kamala Harris Victory Fund
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	430 SOUTH CAPITOL STREET SE
		Washington, DC 20003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By   Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Campaign Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	1

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 29/55 Rpt: 62/89	Jones Jr., Venton C. (The Honorable)		00086182			
4	Date	5 Payee name		•			
	08/20/2024	Lark Restaurant					
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode				
	\$73.70	2015 Woodall Rodgers Fwy					
		Dallas, TX 75201					
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.			
	LAFLINDITORE			Check if Austin, TX, officeholder living expense			
				Staff Meal			
_	Complete ONLY if direct	Condidate/Officeholder source		Office held			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ignt	Office held			
	Date	Payee name					
	10/25/2024	Legislative Solutions					
	Amount (\$)	Payee address; City; State; Zip Co	ode				
	\$350.00	807 Brazos St					
		Suite 714					
		Austin, TX 78701					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
				Email Blast for Fundraiser			
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ight	Office held			
	expenditure to benefit C/OI		•				
	Date	Payee name					
	08/05/2024	Legislative Solutions					
	Amount (\$)	Payee address; City; State; Zip Co	nde				
	\$350.00	807 Brazos St	Juc				
	4000.00	Suite 714					
		Austin, TX 78701					
	DUDDOCE		/L\	D 11			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(D)	Description  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Solicitation/Fundraising Expense		Check if Austin, TX, officeholder living expense			
				Email Blast for Fundraiser			
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held			
	expenditure to benefit C/OI	1					

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/55 Rpt: 63/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	08/22/2024	Limousine Transportation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$72.00	2801 S. 25th Avenue
		Broadview
		Chicago, IL 60155
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  Transportation
		The topological state of the st
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	08/12/2024	Marriot JW Washington DC
	Amount (\$)	Payee address; City; State; Zip Code
	\$470.36	1331 Pennsylvania Avenue NW
		Washington, DC 20004
	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
		Lodging Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/20/2024	Marriott Downtown, Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$366.57	304 E Cesar Chavez Street
		Austin, TX 78701
	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  Lodging Expense
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 31/55 Rpt: 64/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	07/01/2024	Moody, Corey
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	9225 Penton Place
		Frisco, TX 75035
8	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
		Food Vendor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
F	Date	Payee name
	12/05/2024	National Black Caucus
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	720 Massachusetts Ave
		NW
		Washington, DC 20036
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Contribution to Organization
		Contribution to Organization
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	12/02/2024	Ngp Van
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$159.90	655 15th St NW
		Suite 650
		Washington, DC 20005
	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  Email Database
		Linaii Database
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
ı		

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 32/55 Rpt: 65/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	11/04/2024	Ngp Van
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$159.90	655 15th St NW
		Suite 650
		Washington, DC 20005
8	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  Email Database
		Email Dalabase
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/02/2024	Ngp Van
	Amount (\$)	Payee address; City; State; Zip Code
	\$159.90	655 15th St NW
		Suite 650
		Washington, DC 20005
	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
		Email Database
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/03/2024	Ngp Van
	Amount (\$)	Payee address; City; State; Zip Code
	\$159.90	655 15th St NW
		Suite 650
		Washington, DC 20005
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Email Database
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)
┰	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
-	Sch: 33/55 Rpt: 66/89	Jones Jr., Venton C. (The Honorable)	00086182
4	Date	5 Payee name	
	08/07/2024	Ngp Van	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$159.90	655 15th St NW	
l		Suite 650	
		Washington, DC 20005	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T.
l	2/11 2/13/13/12		n, TX, officeholder living expense
l		Email Databa	ase
Ļ			200
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
l	07/29/2024	Ngp Van	
Г	Amount (\$)	Payee address; City; State; Zip Code	
l	\$159.90	655 15th St NW	
l		Suite 650	
		Washington, DC 20005	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T.
l	EXI ENDITORE		n, TX, officeholder living expense
l		Email Databa	ase
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
L			
l	Date	Payee name	
l	12/20/2024	Office Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$46.42	2415 N Haskell Ave	
l			
		Dallas, TX 75204	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Office Overficad/Nertial Experise	outside of Texas. Complete Schedule T.
l			n, TX, officeholder living expense
l		Office Suppli	es
$\vdash$	Complete ONLY if direct	Candidata/Officeholder name	Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
$\vdash$			
l			

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services 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: 34/55 Rpt: 67/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
L	08/12/2024	Peoples Missionary Baptist Church
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	3119 Pine Street
L		Dallas, TX 75215
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Sharon Sonangadon
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	12/24/2024	Quiktrip
H	Amount (\$)	Payee address; City; State; Zip Code
	\$57.18	511 S Zang Blvd
	401.120	orr o raing pivo
		Dallas, TX 75208
	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gas for Vehicle Related to Campaign Travel
L	0 1 0 0 1 1 1 1 1 1	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	08/23/2024	Quiktrip
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.04	511 S Zang Blvd
		Dallas, TX 75208
	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  Gas for Vehicle Related to Campaign Travel
		Gas for Verlicle Related to Campaign Travel
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
l		

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<b>,</b>
_	Sch: 35/55 Rpt: 68/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	08/23/2024	Shell Chicago
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.11	10051 W Irving Park Rd
	,	
		Schiller Park, IL 60176
8	PURPOSE	
0	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gas for Vehicle Related to Campaign Travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	11/19/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.20	2702 Love Field Dr
		Dallas, TX 75235
	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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Staff Flight to Austin
	Computate ONLY if dispost	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/06/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.20	2702 Love Field Dr
		Dallas, TX 75235
	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  Staff Flight to Austin
		Stati i light to / lastin
	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 Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1	Total pages Schedule F1:	·		3 Filer ID (Ethics Commission Filers)
	Sch: 36/55 Rpt: 69/89	Jones Jr., Venton C. (The Honorable)		00086182
4	Date	5 Payee name		•
	11/05/2024	Southwest Airlines		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$11.20	2702 Love Field Dr		
		Dallas, TX 75235		
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
				Staff Flight to Austin
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	abt	Office held
9	expenditure to benefit C/OI		gnı	Office field
	Date	Payee name		
	08/12/2024	Southwest Airlines		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$174.00	2702 Love Field Dr		
		Dallas, TX 75235		
	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.
	LA LABITORE			Check if Austin, TX, officeholder living expense
				Flight to Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		grit	Office field
	Date	Payee name		
	07/09/2024	Southwest Airlines		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$247.96	2702 Love Field Dr		
		Dallas, TX 75235		
	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 Flight to Chicago
				riight to Chicago
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	Complete ONLY if direct expenditure to benefit C/OI		yrıl	Office field

### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	T		
1	Total pages Schedule F1: Sch: 37/55 Rpt: 70/89	2 FILER NAME Jones Jr., Venton C. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00086182	
4	Date	5 Payee name	
	09/19/2024	Southwest Airlines	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$266.98	2702 Love Field Dr	
		Dallas, TX 75235	
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	
		Flight to Austin	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/OI		
	'		
	Date	Payee name	
	09/19/2024	Southwest Airlines	
	Amount (\$)	Payee address; City; State; Zip Code	
	` ,		
	\$266.98	2702 Love Field Dr	
		Dallas, TX 75235	
	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	
		Staff Flight to Austin	
		Ctan I ngili to I lacani	
_	- 1		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialture to benefit C/Oi		
	Date	Payee name	
	09/18/2024	Southwest Airlines	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$266.98	2702 Love Field Dr	
		Dallas, TX 75235	
	DUDDOCE	I	
	PURPOSE OF	(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.	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Staff Flight to Austin	
		Stati Flight to Austill	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

### SCHEDULE F1

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

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

**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: 38/55 Rpt: 71/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	07/22/2024	Southwest Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$342.98	2702 Love Field Dr
		Dallas, TX 75235
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  Flight to Austin
		Tight to 7 double
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	07/22/2024	Southwest Airlines
H	Amount (\$)	Payee address; City; State; Zip Code
	\$481.96	2702 Love Field Dr
		Dallas, TX 75235
	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  Flight to Austin
		Tight to 7 double
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/05/2024	Southwest Airlines
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$511.95	2702 Love Field Dr
		Dallas, TX 75235
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Flight to Austin
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 39/55 Rpt: 72/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	11/05/2024	Southwest Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$623.95	2702 Love Field Dr
		Dallas, TX 75235
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.
	ZA ZIIDII GIAZ	Check if Austin, TX, officeholder living expense
		Flight to Austin
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/12/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$135.96	2702 Love Field Dr
		Dallas, TX 75235
	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.
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Flight to Austin
	Opening the ONLY if allowed	One district Office health are asset of the second of the
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/07/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	2702 Love Field Dr
		Dallas, TX 75235
	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.
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Upgraded Flight
	0 1. 5	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 40/55 Rpt: 73/89	Jones Jr., Venton C. (The Honorable) 00086182				
4	Date	5 Payee name				
	09/18/2024	Squarespace				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$15.59	225 Varick Street				
		New York, NY 10014				
8	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				
		Website Creator				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	<del>-</del>				
	Date	Payee name				
	09/11/2024	Squarespace				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$93.53	225 Varick Street				
		New York, NY 10014				
	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.				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		Website Creator				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH					
	Date	Payee name				
	12/11/2024	Squarespace				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$109.12	225 Varick Street				
	,					
		New York, NY 10014				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Website Creator				
	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 Comn

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/55 Rpt: 74/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
L	10/11/2024	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$109.12	225 Varick Street
		New York, NY 10014
8	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
		Website Creator
		Website Oreator
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	08/12/2024	Squarespace
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$109.12	225 Varick Street
	Ψ100.12	225 Varion Girost
		New York, NY 10014
	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
		Website Creator
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊢	Date	Davisa nama
	07/11/2024	Payee name Squarespace
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$109.12	225 Varick Street
		New York, NY 10014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Website Creator
		Woodle Croate.
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
I		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	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: 42/55 Rpt: 75/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	11/12/2024	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$121.12	225 Varick Street
		New York, NY 10014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	2/11/2/10/11/2/12	Check if Austin, TX, officeholder living expense
		Website Creator
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/11/2024	Texas House Democratic Campaign Committee
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. BOX 300095
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Campaign Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/03/2024	Texas House Democratic Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	PO Box 12453
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAFENDITORE	Candidate/Officeholder/Political Committee
		Campaign Donation
	Operation Chilly 2.	Overfield to 100% and a left and
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	,	
_		

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula 54:	
1	Total pages Schedule F1:	
	Sch: 43/55 Rpt: 76/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	08/26/2024	The Allegro Royal Sonesta Hotel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$809.50	171 W Randolph St
	Φου3.30	TIT VV INGINUUIPII St
		Chicago, IL 60601
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
		Lodging Expense for DNC
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	Davis same
	Date	Payee name
	08/08/2024	The Allegro Royal Sonesta Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,498.04	171 W Randolph St
		Chicago, IL 60601
_	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  The cold of Districts  Check if travel outside of Tayas Complete Schedule T
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lodging Expense for DNC
		Lodging Expense for Bive
$\vdash$	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	12/04/2024	The LaSalle Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$838.49	120 S Main St
	<del>-</del> +	
		Dr. on TV 77002
		Bryan, TX 77803
	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
		Lodging Expense
	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 -

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 44/55 Rpt: 77/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	12/16/2024	The Ritz-Carlton, Washington DC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.89	1150 22nd St NW
		Washington, DC 20037
8	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
		Valet Parking
		Valot Farming
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	Date	Payee name
	07/01/2024	Tilley, Earnest
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1408 N Washington Avenue
		300
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Leadership Campaign Donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	11/08/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.96	1725 Third Street
		San Fancisco, CA 94158
	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  Transportation out of District
		Transportation out of District
_	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: 45/55 Rpt: 78/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	10/07/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.53	1725 Third Street
		San Fancisco, CA 94158
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  Transportation out of District
		Transportation out of district
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
⊨	Date	
	Date	Payee name
L	11/14/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.99	1725 Third Street
		San Fancisco, CA 94158
	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
		Transportation out of District
L	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
⊨		
	Date	Payee name
	12/11/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.34	1725 Third Street
		San Fancisco, CA 94158
	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.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Transportation out of District
$\vdash$	Complete ONLY !f allower	Condidate/Officeholder name Office assists
I	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
L		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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 compl	lete this forn	m.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 46/55 Rpt: 79/89	Jones Jr., Venton C. (The Honorable)			00086182	
4	Date	5 Payee name		<u> </u>		
	12/11/2024	Uber				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$15.63	1725 Third Street				
		San Fancisco, CA 94158				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	on		
	OF	Travel Out of District			de of Texas. Com	plete Schedule T.
	EXPENDITURE		_		officeholder living	
			Transpo	rtation o	ut of District	İ
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought			Office he	eld
	experience to benefit Gree					
	Date	Payee name				
	08/08/2024	Uber				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$16.58	1725 Third Street				
		San Fancisco, CA 94158				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	on		
	OF EXPENDITURE	Travel Out of District				plete Schedule T.
	LAFLINDITORL		_		officeholder living	
			ranspo	rtation o	ut of District	
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	ald.
	Complete ONLY if direct expenditure to benefit C/OI				Office fie	eiu
	Date	Payee name				
	11/14/2024	Uber				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$16.72	1725 Third Street				
		San Fancisco, CA 94158				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	on		
	OF EXPENDITURE	Travel Out of District				plete Schedule T.
			ш		officeholder living ut of District	
			παπομυ	n wallott U	مد ب المالالال	•
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	ald
	expenditure to benefit C/OI				Office He	Jiu

### 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 47/55 Rpt: 80/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	09/19/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.65	1725 Third Street
		San Fancisco, CA 94158
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  Transportation out of District
		Transportation out of Bistrict
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٠	expenditure to benefit C/O	
_	Date	Davies same
	08/19/2024	Payee name Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.83	1725 Third Street
		San Fancisco, CA 94158
	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
		Transportation out of District
		Transportation out of Biothot
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	08/19/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$22.16	1725 Third Street
		San Fancisco, CA 94158
	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
		Transportation out of District
		· ·
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### 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		nmittee	Legal Services	•		ages	/Contract Labor		OTHER (enter a	a category not listed ab	ove)
				The Instruction G	iuide explains h	ow to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 48/55 Rpt: 81/89		Jones Jr., V	enton C. (The	Honorable)					00086182		
4	Date	5	Payee name									
	08/19/2024		Uber									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$26.66		1725 Third S	Street								
			San Fancisc	co, CA 94158								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the ton of this sche	dule)	(b)	Description				
	OF		Travel Out o		the top of this serie	duicj	` ,		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE							Check if Austin,	TX,	officeholder livin	g expense	
								Transportatio	n o	ut of Distric	et	
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	O	ffice sou	ght			Office h	eld	
	experialture to beliefft C/Oi	п										
	Date		Payee name									
	12/05/2024		Uber									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$28.08		1725 Third 9	Street								
			San Fancisc	co, CA 94158								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE	'	Travel Out o	of District				<u></u>			nplete Schedule T.	
	ZA ZADITORZ							<b>—</b>		officeholder livin		
								Transportatio	11 0	ut of Distric	ı	
	Complete ONLY if direct	<u> </u>	`andidata/Offic	ahaldar nama	0:	ffice cour	ah+			Office b	old	
	Complete ONLY if direct expenditure to benefit C/OI		anuluate/Onic	ceholder name	U	ffice sou	ynı			Office h	leiu	
		_										
	Date	ı	Payee name									
	09/19/2024		Uber									
	Amount (\$)	ı	Payee addres		State;	Zip Co	de					
	\$30.86		1725 Third S	Street								
		:	San Fancisc	co, CA 94158								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE	'	Travel Out o	of District				ш			nplete Schedule T.	
								ш		officeholder livin		
								Transportatio	11 0	יענ טו טואנוונ	, L	
	Complete ONLY if direct	$\overline{\Gamma}$	andidate/Offic	ceholder name		ffice soug	ah+			Office h	ماط	
	Complete ONLY if direct expenditure to benefit C/OI		anunate/Offic	ciloluci Hallie	U	mce sou(	yııı			Office fi	CIU	
_												

### 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: 49/55 Rpt: 82/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	08/08/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.59	1725 Third Street
		San Fancisco, CA 94158
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  Transportation out of District
		Transportation out of District
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Dougo nama
		Payee name
	08/09/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.00	1725 Third Street
		San Fancisco, CA 94158
	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
		Transportation out of District
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	09/20/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.42	1725 Third Street
		San Fancisco, CA 94158
	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  Transportation out of District
		וומווסףטרגענוטוו טערטו בוווכר
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ense Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to co	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 50/55 Rpt: 83/89	Jones Jr., Venton C. (The Honorable)		00086182
4	Date	5 Payee name		<u> </u>
	11/20/2024	Uber		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$47.02	1725 Third Street		
		San Fancisco, CA 94158		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
•	OF	Travel Out of District	(2)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Transportation out of District
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
	experiulture to beriefft C/Oi	7		
	Date	Payee name		
	11/07/2024	Uber		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$49.62	1725 Third Street		
		San Fancisco, CA 94158		
	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.
	LAPENDITORE			Check if Austin, TX, officeholder living expense
				Transportation out of District
	Complete ONLY if direct	Candidate/Officeholder name Office so	uabt	Office held
	Complete ONLY if direct expenditure to benefit C/OI		ugnı	Office field
	Date	Payee name		
	11/20/2024	Uber		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$50.80	1725 Third Street		
		San Fancisco, CA 94158		
	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.
	ZA ZIIDII GILZ			Check if Austin, TX, officeholder living expense
				Transportation out of District
	Complete ONU V if allows	Condidate/Officeholder name		Office to the
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ugnt	Office held

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 51/55 Rpt: 84/89	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	12/05/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.30	1725 Third Street
		San Fancisco, CA 94158
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  Transportation out of District
		Transportation out of district
Ļ	0 1: 0 1: 0	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	12/10/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.83	1725 Third Street
		San Fancisco, CA 94158
	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  Transportation out of District
		Transportation out of district
L	Operation ONE Wife disease	Occasional Office health and a second of the
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	<u> </u>	
	Date	Payee name
	07/24/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.27	1725 Third Street
		San Fancisco, CA 94158
	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.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
I		Transportation out of District
_	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	Superioritate to benefit 0/01	•

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
se Event Expense Loan Repayment/Reimbu

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

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: 52/55 Rpt: 85/89	Jones Jr., Venton C. (The Honorable) 00086182							
4	Date	5 Payee name							
	12/09/2024	Washington Hilton							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$43.50	1919 Connecticut Ave NW							
		Washington, DC 20009							
8	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  Lodging Expense							
		Loughly Expense							
<u>_</u>	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	12/09/2024	Washington Hilton							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$189.26	1919 Connecticut Ave NW							
		Washington, DC 20009							
	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  Lodging Expense							
		Loughly Expense							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	Complete ONLY if direct expenditure to benefit C/OI	<b>y</b>							
	Date	Payee name							
	12/09/2024	Washington Hilton							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$934.30	1919 Connecticut Ave NW							
		Washington, DC 20009							
	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							
		Lodging Expense							
	0 1. 5								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	onponditure to benefit 0/01	•							

### 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									
_	T	· · · · · · · · · · · · · · · · · · ·	_							
1	Total pages Schedule F1: Sch: 53/55 Rpt: 86/89	2 FILER NAME  Jones Jr., Venton C. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00086182								
4	Date	5 Payee name								
	12/23/2024	Williams-Sonoma								
6	Amount (\$) \$1,721.01	7 Payee address; City; State; Zip Code 8687 N Central Expressway								
		Dallas, TX 75225								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITORE	Check if Austin, TX, officeholder living expense								
		Office Supplies								
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name	Π							
	12/02/2024	Wix								
	Amount (\$)	Payee address; City; State; Zip Code	_							
	` '									
	\$36.80	500 Terry A Francois Blvd								
		Floor 6								
		San Francisco, CA 94158								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_							
	OF									
EXPENDITURE			Check if Austin, TX, officeholder living expense							
		Website Hosting								
	vvcb3itc i iosting									
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_							
	expenditure to benefit C/OI									
	Date	Payee name								
	11/04/2024	Wix								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$36.80	500 Terry A Francois Blvd								
		Floor 6								
		San Francisco, CA 94158								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
	Website Hosting									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_							
	expenditure to benefit C/OI									
			_							

### SCHEDULE F1

dvertising Expense Event Expense Loan Repayment/Reimbur

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

Event Expense Loan Fees Office Food/Beverage Expense Polling Gitt/Awards/Memorials Expense Printin Leaal Services Salarie

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: 54/55 Rpt: 87/89	Jones Jr., Venton C. (The Honorable) 00086182						
4	Date	5 Payee name						
	10/07/2024	Wix						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$36.80	500 Terry A Francois Blvd						
		Floor 6						
		San Francisco, CA 94158						
8	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  Website Hosting						
		website Hosting						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
ľ	expenditure to benefit C/O							
F	Date	Payee name						
	09/03/2024	Wix						
H	Amount (\$)	Payee address; City; State; Zip Code						
	\$36.80	500 Terry A Francois Blvd						
		Floor 6						
		San Francisco, CA 94158						
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Advertising Expense						
	LXI LINDITORE	Check if Austin, TX, officeholder living expense						
		Website Hosting						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OH							
F	Date	Payee name						
	08/05/2024	Wix						
Г	Amount (\$)	Payee address; City; State; Zip Code						
	\$36.80	500 Terry A Francois Blvd						
		Floor 6						
		San Francisco, CA 94158						
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
l	OF EXPENDITURE	Advertising Expense						
l	LXI LINDITORE	Check if Austin, TX, officeholder living expense						
		Website Hosting						
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·						
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## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	mmittee	Food/Beverage E Gift/Awards/Mem Legal Services The Instruction			pense ages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed abov	e)
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission	n Filers)
	Sch: 55/55 Rpt: 88/89		Jones Jr., \	Venton C. (T	he Honorable)					00086182		
4	Date	5	Payee name	)								
	08/05/2024		Wix									
6	Amount (\$)	7	Payee addre	ess; City;	State	e; Zip Co	de					
	\$36.80		500 Terry	A Francois B	lvd							
			Floor 6									
			San Franci	sco, CA 941	58							
8	PURPOSE	(a)	Category (S	See Categories liste	ed at the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Advertising						vel outside of Texas. Complete Schedule T.			
	-							Website Host		officeholder living	expense	
								WEDSILE LIOS	ung			
9	Complete ONLY if direct expenditure to benefit C/OI	<u></u> Н	Candidate/Of	ficeholder nam	ne	Office sou	ght			Office he	eld	
	experience to benefit Gree											

## 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: 89/89 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Jones Jr., Venton C. (The Honorable) 00086182 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest 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 Jones, Venton (Rep.) 8 Departure city or name of departure location 08/18/2024 9 Destination city or name of destination location 08/18/2024 Chicago 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Commercial Airplane Travel to Democratic National Convention