STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

FORM SC C/OH COVER SHEET PG 1

The SC C/OH Instruction 6	Guide explains how to complete t	this form.	1 Filer ID (Ethics Commission	r Filers)	2 Total pages fil	ed:	
	· · ·		00088311		23		
3 CANDIDATE NAME	MS / MRS / MR	FIRST		MI	OFFICE (USE ONLY	
IVAIVIL	Mr.	Shelby			Date Received		
					ELECTRONICA	ALLY FILED	
	NICKNAME	LAST		SUFFIX	01/09/2025		
		Williams					
					Date Hand-delivered or	r Date Postmarked	
4 CANDIDATE	ADDRESS / PO BOX; APT	/ SUITE #; C	ITY; STATE; ZI	P CODE	1		
ADDRESS	6040 Garden Gate Dr.				Receipt #	Amount	
					<u></u>		
Change of Address	Plano, TX 75024				Date Processed		
					Date Imaged		
					<u> </u>		
5 CAMPAIGN	MS / MRS / MR	FIRST			MI		
TREASURER NAME		Pat					
	NICKNAME	LAST			SUFFIX		
		Greer					
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE)	; APT / SUITE #;	CITY;	STATE;	ZIP CODE	
TREASURER ADDRESS	3012 Jomar Dr.						
(Residence or Business)							
·	Plano, TX 75075						
7 CAMPAIGN	AREA CODE	PHONE N	NUMBER		EXTENSION		
TREASURER PHONE	(972) 768-5544						
8 REPORT TYPE	January 1E	☐ 20th do		/ - In adian			
	X January 15	30th day	y before convention /	election	Runoff		
	July 15	8th day	before convention / e	election	Final report (F	Attach SC C/OH-FR)	
		<u> </u>			<u> </u>		
9 PERIOD	1	'ear				Day Year	
COVERED	07/01/2024		THROUGH	4	12/3	31/2024	
12 CON (ENITION) /	Marianta Dov. V		11 05	5:05			
10 CONVENTION / ELECTION DATE	Month Day You 10 10 10 10 10 10 10 10 10 10 10 10 10	ear	11 OFF	HICE UGHT	STATE CHAI		
	0012012027				X COUNTY CH	IAIR	
12 POLITICAL	Republican		1	COUNTY (If Applica	able)		
PARTY	-1			Collin	•		
		GO	TO PAGE 2				

STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT: SUPPORT & TOTALS

FORM SC C/OH COVER SHEET PG 2

2 of 23

13 CANDIDATE NAME	Williams, Shelby (Mr	.)	14 Filer ID (E 00088311	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)		political expenditures by political committees to suppandidate's knowledge or consent. Candidates are rependitures.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
	🖵	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		L ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 3,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 22,157.70
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 3,588.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mr.	Shelby Williams	
		Signa	ature of Candidate	
AFFIX NO	ΓARY STAMP / SEAL AΒ	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	er administering oath	Printed name of officer administering oath	Title of officer	administering oath

SUBTOTALS - SC C/OH

FORM SC C/OH COVER SHEET PG 3

3 of 23

		3 of 23					
18 CANDIDATE NAME19 Filer ID(Ethics Conditions)Williams, Shelby (Mr.)00088311							
	SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,200.00			
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4. X	SCHEDULE E: LOANS		\$	0.00			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	6	\$	9,291.54			
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00			
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	1,139.09			
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	11,727.07			
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
12.	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER						

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/23	
2	FILER NAME Williams, Sh	elby (Mr.)				3	Filer ID (Ethics Commission 00088311	on Filers)
4	Date 12/11/2024	5 Full name of contributor Campean, Virginia6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Prosper, TX 75078 pation / Job title (See Instruction:	5)	9	Employer (See Instructions	;) 		
	Retired	padon / dos das (ede medadas).			Retired	,,		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:) Golubchik, Yuri Contributor address; City; State; Zip Code Plano, TX 75093 cipal occupation / Job title (See Instructions) Employer (See Instructions)				Amount of Contribution (\$)	\$50.00	
	Data disal asses							
	Retired Retired Retired					5)		
	Date 07/02/2024	e Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$100.00		
		Plano, TX 75025						
	Principal occu Accountant	pation / Job title (See Instruction	5)		Employer (See Instructions SFE Brands	s)		
	Date 12/16/2024	Full name of contributor Nakaoka, John Contributor address; City; S Fairview, TX 75069					Amount of Contribution (\$)	\$500.00
	Principal occu Business Co	pation / Job title (See Instruction: nsultant	5)		Employer (See Instructions	5)		
	Date 12/20/2024 Full name of contributor out-of-state PAC (ID#:) Wilson, Kirk Contributor address; City; State; Zip Code Dallas, TX 75229			Amount of Contribution (\$)	\$2,500.00			
	Principal occu CEO	pation / Job title (See Instruction	5)		Employer (See Instructions T Wilson	5)		
			1					

PLEC	OGED CONTRIBU	TIONS			SCHEDULE B
TI	he Instruction Guide exp	olains how to comple	ete this form.	1	Total pages Schedule B: Sch: 1/1 Rpt: 5/23
2 FILER NA	AME , Shelby (Mr.)			3	
4 TOTAL	OF UNITEMIZED PLEDO	SES			\$ 0.
5 Date	6 Full name of pledgorout-of-state PAC (ID#: 7 Pledgor Address; City; State; Zip Code				Amount of pledge (\$)
			T.,	_ [Check if travel outside of Texas. Complete Schedu
10 Principal	occupation / Job title (See Instru	ictions)	11 Employer (See Ins	structi	ions)

	LOANS					SCHED	ULE E
	The Instruction	n Guide explains how to	complete this f	orm.	1 Total pages Schedule E: Sch: 1/1 Rpt: 6/23		
	FILER NAME Williams, Shelby	′ (Mr.)			3 Filer ID 00088	(Ethics Commissio	n Filers)
4	TOTAL OF UN	IITEMIZED LOANS			\$	0.00	
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$	6)
	Is lender a financial institution?	8 Lender address; City	r; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	s)	•	
14	Description of Coll None	ateral		15 Check if personal funds w	ere deposite	ed into political accour (See Instruction	
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaran	teed (\$)
	not applicable	18 Guarantor address; City	r; State;	Zip Code			
20	Principal occupation	I on		21 Employer (See Instruction	s)	.1	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 con	mplete this form.
1 Total pages Schedule F	1: 2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 7/23	Williams, Shelby (Mr.)	00088311
4 Date	5 Payee name	
12/31/2024	Anedot	
6 Amount (\$) \$109.2	7 Payee address; City; State; Zip Coo 1920 McKinney Ave 7th floor Dallas, TX 75201	de
a puppose	(1) -	nx =
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Anedot Fees for Period 7/1/2024 - 12/31/2024
Complete ONLY if direct expenditure to benefit Complete.		ght Office held
Date	Payee name	
07/01/2024	Williams, Shelby	
Amount (\$) \$9,182.3	Payee address; City; State; Zip Coo 34 Undisclosed Plano, TX 75024	de
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C		ght Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)						
Sch: 1/7 Rpt: 8/23	Williams, Shelby (M	1r.)		00088311						
4 CREDIT CARD ISSUER		ncial institution al One	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	0.0	00				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$0.82	07/02/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Amazon Web Servi	ces	410 Terry Avenue North							
			Seattle, WA 98109							
8 PURPOSE OF EXPENDITURE	(a) Category	of this cobodule)	(b) Description							
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this scriedule)	Email Services							
X Political	Advertising Expense									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense					
9 Complete ONLY if direct Candidate/Officeholder name			e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$11.97	07/06/2024								
PAYEE (a) Payee name		L	(b) Payee address;	City,	State,	Zip Code				
	Namebright		2635 Walnut Street							
			Denver, CO 80205							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Web Services							
X Political	Advertising Expense									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$44.00	07/06/2024								
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
			Unknown							
	Wellness and More									
			Forney, TX 75126							
PURPOSE OF	(a) Category	of this cohod: 1-1	(b) Description							
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Flags for Events							
X Political										
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 2/7 Rpt: 9/23	Williams, Shelby (N	⁄lr.)		00088311					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES \$ 0.00 CHARGED TO A CREDIT CARD						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$124.48	07/06/2024							
7 PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code						
	×		Market Square, 1355 Mai						
8 PURPOSE OF	(a) Category		San Francisco, CA 94103 (b) Description	3					
8 PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)									
X Political	Advertising Expense X Subscription								
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, T.			, officeholder living expense					
9 Complete ONLY if direct Candidate/Officeholder name Off			e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$7.91	08/01/2024							
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code					
	Google		1600 Amphitheatre Parkway						
			Mountain View, CA 94043						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Email Services						
X Political	. 555								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	r name Offic	ce sought Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$0.44	08/02/2024							
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code					
			410 Terry Avenue North						
	Amazon Web Serv	ices							
			Seattle, WA 98109						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Email Services						
X Political	/ Advertising Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought	Office held					
expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
Sch: 3/7 Rpt: 10/23	Williams, Shelby (M	1r.)			00088311					
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	0.0	00			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
	\$7.68	09/01/2024								
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
	Google		1600 Amphitheatre Parkway							
			Mountain '	View, CA 94043	3					
8 PURPOSE OF	(a) Category	(d): 1 11)	(b) Descript							
EXPENDITURE	(See Categories listed at the top	of this schedule)	Email Ser	vices						
X Political										
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense				
Complete ONLY if direct			e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
	\$1.44	09/02/2024								
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
	Amazon Web Servi	ces	410 Terry Avenue North							
			Seattle, WA 98109							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Email Ser	vices						
X Political	Advertising Expense									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living exp	oense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
	\$44.36	09/24/2024								
PAYEE	(a) Payee name	I.	(b) Payee a	ddress;	City,	State,	Zip Code			
			One Hack	er Way	•		·			
	Meta									
			Menlo Par	k, CA 94025						
PURPOSE OF	(a) Category		(b) Descript							
EXPENDITURE	(See Categories listed at the top	of this schedule)	Ads							
X Political	Advertising Expense									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Г	Check if Austin, TX,	officeholder living exp	oense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission File					
Sch: 4/7 Rpt: 11/23	Williams, Shelby (M	1r.)		00088311				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	0.00			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$7.68	10/01/2024						
7 PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code					
	Google		1600 Amphitheatre Parkway					
	Mountain View, CA			3				
8 PURPOSE OF	(a) Category	-f.4b-i	(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Email Services					
X Political	. 555							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Off			e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$1.86	10/02/2024						
PAYEE (a) Payee name		L	(b) Payee address;	City, S	tate, Zip Code			
	Amazon Web Servi	ces	410 Terry Avenue North					
			Seattle, WA 98109					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Email Services					
X Political	Advertising Expense							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	-			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$250.00	10/23/2024						
PAYEE	(a) Payee name	ı	(b) Payee address;	City, Si	tate, Zip Code			
			Unknown					
	A Taste of Whiskey	•						
			Plano, TX 75093					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Event Expense					
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 5/7 Rpt: 12/23	Williams, Shelby (M	۱r.)			00088311		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 0.00		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	Paid		
		\$7.68	11/01/2024					
7	PAYEE	(a) Payee name Google			phitheatre Parkw		State,	Zip Code
L					n View, CA 94043	l		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descrip Email Se				
	Non-Political	(a) Chapte if traval autoida	of Toyon, Complete Cabadyla T		Charle if Austin TV	officebolder living our		
9	Complete ONLY if direct	<u>(e)</u>			Crieck ii Austiri, 1X,	officeholder living exp	erise	
	expenditure to benefit C/OH		Tiamo.	oougiit		Omoo noid		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	⁻ Paid		
		\$1.04	11/02/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Amazon Web Servi	ices	410 Terry	y Avenue North			
				Seattle, \	WA 98109			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip Email Se				
	X Political	Advertising Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	Paid		
		\$10.99	11/02/2024					
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Namebright		2635 Wa	lnut Street			
				Denver,	CO 80205			
	PURPOSE OF	(a) Category (See Categories listed at the top	of this sahadula)	(b) Descrip				
	EXPENDITURE	Advertising Expense	or this schedule)	Web Ser	vices			
	X Political							
L	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
F	expenditure to benefit C/OH							
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officenoider/Politica	-	ruction Guide explains how	to complete this		HER (enter a catego	ory not listed al	pove)		
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)						
Sch: 6/7 Rpt: 13/23	Williams, Shelby (M	1r.)			00088311		,		
4 CREDIT CARD ISSUER	Name of financial institution See previous See previous					0.0	00		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Ci	edit Card Issuer	r Paid				
	\$11.97	11/06/2024							
7 PAYEE	(a) Payee name Namebright		(b) Payee add 2635 Walnu	ıt Street	City,	State,	Zip Code		
0. 0.10000000	(a) Cataman		Denver, CO						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Web Servic						
l <u> </u>	Advertising Expense	,	Web Servic	es					
X Political									
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,		pense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH			1	-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Ci	edit Card Issuer	r Paid				
	\$378.88	11/09/2024							
PAYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code		
	Mission Ridge Ran	ge and	4340 Maple	shade Ln					
			Plano, TX 7	5093					
PURPOSE OF	(a) Category		(b) Descriptio	n					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Event Expe	nse					
X Political	Event Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Ci	edit Card Issuer	r Paid				
	\$7.68	12/01/2024							
PAYEE	(a) Payee name	<u>I</u>	(b) Payee add	dress;	City,	State,	Zip Code		
				itheatre Parkw	-		·		
	Google				,				
			Mountain V	iew, CA 94043	3				
PURPOSE OF	(a) Category		(b) Descriptio						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Email Servi	ces					
X Political	Fees								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u>'</u>	Check if Austin, TX,	officeholder living ex	pense			
Complete ONLY if direct									
expenditure to benefit C/OH									
	I								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	to complete t	his form.	(9-	.,	,
1	Total pages Schedule F4:	3 Filer ID (Ethics Commission Filers)						
	Sch: 7/7 Rpt: 14/23	Williams, Shelby (M	1r.)			00088311		
4	CREDIT CARD ISSUER	Name of financial institution see previous 5 TOTAL OF UNITEMI EXPENDITURES CHARGED TO A CR CARD				\$	0.0	00
6	PAYMENT	(a) Amount Charged	r Paid					
		\$2.86	12/02/2024					
7	PAYEE	(b) Payee a	address; Avenue North	City,	State,	Zip Code		
L				Seattle, V				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	(b) Descrip				
l		Advertising Expense	of this scriedule)	Email Se	rvices			
l	X Political	3 1						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$200.00	12/02/2024					
	PAYEE	(a) Payee name	I	(b) Payee	address;	City,	State,	Zip Code
		Collin County Cons	ervative	PO Box 2	50515			
				Plano, TX	(75025			
	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Sponsors	ship			
	X Political	Advertising Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	_	Office held		
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$15.35	07/01/2024					
Г	PAYEE	(a) Payee name	<u> </u>	(b) Payee	address;	City,	State,	Zip Code
l				1600 Am	phitheatre Parkw	<i>ı</i> ay		
		Google						
				Mountain	View, CA 94043	3		
	PURPOSE OF	(a) Category		(b) Descrip	tion			
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Email Se	rvices			
	X Political	1 003						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	-	Office held		
е	expenditure to benefit C/OH							

SCHEDULE G

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor					ravel in District ravel Out of Distr	rict ategory not listed above)		
L			The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAME	<u> </u>			3 F	iler ID (Etl	hics Commission Filers)		
	Sch: 1/9 Rpt: 15/23	Williams, S	helby (Mr.)			0	0088311			
4	Date	5 Payee name								
	10/23/2024	A Taste of								
6	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	ode					
	\$250.00	Unknown								
	Reimbursement from									
	X political contributions intended	Plano, TX 7	75093							
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this sch	nedule)	(b) Description	Chec	ck if travel outside	e of Texas. Complete Schedule T.		
	OF EXPENDITURE	Event Expe	ense			Chec	ck if Austin, TX, o	officeholder living expense		
	LAFLINDITORE				Event Expense					
9		Candidate/Office	holder name		Office sought		Of	fice held		
	expenditure to benefit C/OH									
	Date	Payee name								
	07/02/2024	l ´	eb Services							
	Amount (\$)	Payee address; City; State; Zip Code								
\$0.82 410 Terry Avenue North										
	Reimbursement from	_								
	x political contributions intended	Seattle, WA	A 98109							
	PURPOSE	_	ee Categories listed at the top of this sch	nedule)	Description	Chec	ck if travel outside	e of Texas. Complete Schedule T.		
	OF	Advertising						officeholder living expense		
	EXPENDITURE		1		Email Services					
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Of	fice held		
	expenditure to benefit C/OH									
L										
	Date	Payee name								
L	08/02/2024	Amazon W	eb Services							
	Amount (\$)	Payee addre	ss; City; State	; Zip Co	ode					
	\$0.44	410 Terry A	Avenue North							
	Reimbursement from									
	X political contributions intended	Seattle, WA	A 98109							
	PURPOSE	Category (S	ee Categories listed at the top of this sch	nedule)	Description	_		e of Texas. Complete Schedule T.		
	OF EXPENDITURE	Advertising	Expense			Chec	ck if Austin, TX, o	officeholder living expense		
					Email Services					
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Of	fice held		
	C/OH									

SCHEDULE **G**

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services	Polling Ex Printing Ex			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 h	ow to co	mplete this form.		
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 2/9 Rpt: 16/23	۱ ۱	Williams, Shelby (Mr.)				00088311
4	Date	5 F	Payee name				
	09/02/2024	/	Amazon Web Services				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$1.44	4	110 Terry Avenue North				
	Reimbursement from political contributions intended	,	Seattle, WA 98109				
8	PURPOSE	(a) (Category (See Categories listed at the top of this sche	dule)	(b) Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	[· /	Advertising Expense			CI	neck if Austin, TX, officeholder living expense
	EXPENDITORE				Email Services		
9	Complete ONLY if direct expenditure to benefit C/OH	Cano	didate/Officeholder name		Office sought		Office held
	Date	F	Payee name				
	10/02/2024	/	Amazon Web Services				
	Amount (\$)	F	Payee address; City; State;	Zip Co	de		
	\$1.86	4	110 Terry Avenue North				
	Reimbursement from political contributions intended		Seattle, WA 98109				
	PURPOSE	(Category (See Categories listed at the top of this sche	dule)	Description	=	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	/	Advertising Expense		L L	CI	neck if Austin, TX, officeholder living expense
					Email Services		
	Complete ONLY if disent		didata (Office le aldeu vacas		Office security		Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cand	lidate/Officeholder name		Office sought		Office held
	Date	F	Payee name				
	11/02/2024	/	Amazon Web Services				
	Amount (\$)	F	Payee address; City; State;	Zip Co	de		
	\$1.04	4	110 Terry Avenue North				
	Reimbursement from						
	X political contributions intended		Seattle, WA 98109				
	PURPOSE	(Category (See Categories listed at the top of this sche	dule)	Description	_	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	/	Advertising Expense			CI	heck if Austin, TX, officeholder living expense
					Email Services		
	0 1: 0:::::::::::::::::::::::::::::::::						Off. 1
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cano	ιιαατε/Οπicenolder name		Office sought		Office held

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Ex Printing E: Salaries/V	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME		•	3	Filer ID (Ethics Commission Filers)
_	Sch: 3/9 Rpt: 17/23	_	Williams, Shelby (Mr.)			3	00088311
4	Date	5	Payee name				
	12/02/2024		Amazon Web Services				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$2.86		410 Terry Avenue North	,			
	Reimbursement from political contributions intended		Seattle, WA 98109				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description	₫ .	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		L	С	Check if Austin, TX, officeholder living expense
					Email Services		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	07/14/2024		Capital One				
	Amount (\$)	Т	Payee address; City; State;	Zip Co	de		
	\$5,034.36		2000 Preston Rd				
	Reimbursement from						
	political contributions intended		Plano, TX 75093				
	PURPOSE		Category (See Categories listed at the top of this sche	dule)	Description	C	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment			С	Check if Austin, TX, officeholder living expense
					Credit Card Payn	ner	nt
	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	08/14/2024		Capital One				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$4,821.69		2000 Preston Rd				
	Reimbursement from political contributions intended		Plano, TX 75093				
	PURPOSE		Category (See Categories listed at the top of this sche	dule)	Description	С	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment			С	Check if Austin, TX, officeholder living expense
	LA LIBITOIL				Credit Card Payn	ner	nt
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought		Office held

SCHEDULE G

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				ages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
				10 001	·		
1	. •	2	FILER NAME		;		Filer ID (Ethics Commission Filers)
	Sch: 4/9 Rpt: 18/23		Williams, Shelby (Mr.)				00088311
4	Date	5	Payee name				
	09/14/2024		Capital One				
6	Amount (\$)	7	Payee address; City; State; Zip	р Со	de		
	\$8.35		2000 Preston Rd				
	Reimbursement from						
	X political contributions intended		Plano, TX 75093				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule))	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment			Ch	eck if Austin, TX, officeholder living expense
	LAFENDITORE				Credit Card Paym	en	t
9		Car	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH						
	Date		Payee name				
	10/14/2024		Capital One				
	Amount (\$)		Payee address; City; State; Zip	о Сос	de		
	\$9.12		2000 Preston Rd				
	Reimbursement from						
	X political contributions intended		Plano, TX 75093				
	PURPOSE		Category (See Categories listed at the top of this schedule))	Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment			Ch	eck if Austin, TX, officeholder living expense
	LAFENDITORE				Credit Card Paym	en	t
		Car	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH						
		_					
	Date		Payee name				
	11/14/2024		Capital One				
	Amount (\$)		Payee address; City; State; Zip	o Co	de		
	\$53.90		2000 Preston Rd				
	Reimbursement from political contributions						
	X political contributions intended		Plano, TX 75093				
	PURPOSE		Category (See Categories listed at the top of this schedule))	Description		eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment			Ch	eck if Austin, TX, officeholder living expense
					Credit Card Paym	en	t
		Car	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH						
\vdash							

SCHEDULE G

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		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		Expense Wages/Contract Labor	Т	ravel in District rravel Out of District)THER (enter a category not list	ted above)
1	Total pages Schedule G:	2 FILER	NAME			3 F	iler ID (Ethics Comm	ission Filers)
	Sch: 5/9 Rpt: 19/23	Willia	ms, Shelby (Mr.)			0	0088311	
4	Date	5 Payee	name			1		
	12/14/2024	l '	al One					
6	Amount (\$)	7 Payee		tate; Zip C	nde			
	\$660.56	1	Preston Rd	, <u></u> ,p				
	Reimbursement from political contributions intended		, TX 75093					
8	PURPOSE	(a) Categ	Ory (See Categories listed at the top of th	is schedule)	(b) Description	Chec	ck if travel outside of Texas. Co	omplete Schedule T.
	OF EXPENDITURE	Credi	t Card Payment			Ched	ck if Austin, TX, officeholder livir	ng expense
					Credit Card Payr	ment		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate	Officeholder name		Office sought		Office held	
	Date	Payee	name					
	12/02/2024	Collin	County Conservative Repub	licans				
	Amount (\$)	Payee	address; City; S	tate; Zip C	ode			
	\$200.00	РО В	ox 250515					
	Reimbursement from political contributions intended	Planc	, TX 75025					
	PURPOSE	Categ	Ory (See Categories listed at the top of th	is schedule)	Description	=	ck if travel outside of Texas. Co	•
	OF EXPENDITURE	Advei	tising Expense		L	Chec	ck if Austin, TX, officeholder livir	ng expense
					Sponsorship			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate.	Officeholder name		Office sought		Office held	
	Date	Payee	name					
	07/01/2024	Goog	le					
	Amount (\$)	Payee	address; City; S	tate; Zip C	ode			
	\$15.35	1600	Amphitheatre Parkway					
	Reimbursement from							
	X political contributions intended	Moun	tain View, CA 94043		_			
	PURPOSE OF		Ory (See Categories listed at the top of th	is schedule)	Description	=	ck if travel outside of Texas. Co ck if Austin, TX, officeholder livin	
	EXPENDITURE	Fees			Email Sandage	Cried	ck ii Austiri, TA, officeriolider livii	ig expense
					Email Services			
-	Complete ONLY if direct	Candidata	Officeholder name		Office squart		Office held	
	expenditure to benefit C/OH	Canuluale,	Omcenouer Hame		Office sought		Onice field	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/9 Rpt: 20/23 Williams, Shelby (Mr.) 00088311 Date Payee name 08/01/2024 Google Amount (\$) Payee address; City; State; Zip Code \$7.91 1600 Amphitheatre Parkway Reimbursement from political contributions Х intended Mountain View, CA 94043 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE Email Services** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/01/2024 Google Amount (\$) Payee address; City; State; Zip Code \$7.68 1600 Amphitheatre Parkway Reimbursement from political contributions Χ Mountain View, CA 94043 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE Email Services** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/01/2024 Google City; State; Zip Code Amount (\$) Payee address; \$7.68 1600 Amphitheatre Parkway Reimbursement from Χ political contributions intended Mountain View, CA 94043

Fees

Candidate/Officeholder name

PURPOSE

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit

C/OH

Description

Office sought

Email Services

Category (See Categories listed at the top of this schedule)

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Travel in District Travel Out of District OTHER (enter a category not listed above)				
		,	<u> </u>	now to co	ompiete tilis form.						
1	Total pages Schedule G:	2 FILER NAI				1	,	Ethics Commission Filers)			
	Sch: 7/9 Rpt: 21/23	Williams,	Shelby (Mr.)			0	0088311				
4	Date	5 Payee nan	ne								
	11/01/2024	Google									
6	Amount (\$)	7 Payee add	ress; City; State;	Zip Co	ode						
	\$7.68	1600 Ami	phitheatre Parkway	•							
	Reimbursement from	'									
	x political contributions intended	 Mountain	View, CA 94043								
8	PURPOSE	(a) Category	(See Categories listed at the top of this sche	edule)	(b) Description	Che	ck if travel outs	side of Texas. Complete Schedule T.			
ľ	OF	Fees	(See Successions instead at the top of this some	cuuic)	(b) Besonption	=		X, officeholder living expense			
	EXPENDITURE	1 003			Email Services	_					
9	Complete ONLY if direct	Candidate/Offic	reholder name		Office sought			Office held			
ľ	expenditure to benefit	Cararate/Onic	seriolaei fiame		Omec sought			Office field			
	C/OH										
	Date	Payee nan	ne								
	12/01/2024	Google									
_	Amount (\$)	Payee address; City; State; Zip Code									
	\$7.68	1 1	1600 Amphitheatre Parkway								
	Reimbursement from political contributions										
	intended	Mountain	View, CA 94043								
	PURPOSE	Category	(See Categories listed at the top of this scho	edule)	Description	=		side of Texas. Complete Schedule T.			
	OF EXPENDITURE	Fees			L	Che	ck if Austin, TX	X, officeholder living expense			
					Email Services						
	Complete ONLY if direct	Candidate/Office	ceholder name		Office sought		(Office held			
	expenditure to benefit C/OH										
	_	i									
	Date	Payee nan	ne								
	09/24/2024	Meta									
	Amount (\$)	Payee add	ress; City; State;	Zip Co	ode						
	\$44.36	One Hack	cer Way								
	Reimbursement from										
	X political contributions intended	Menlo Pa	rk, CA 94025								
	PURPOSE	Category	(See Categories listed at the top of this sche	edule)	Description	Che	ck if travel out	side of Texas. Complete Schedule T.			
	OF	Advertisir	ig Expense			Che	ck if Austin, TX	X, officeholder living expense			
	EXPENDITURE		•		Ads						
	Complete ONLY if direct	Candidate/Offic	ceholder name		Office sought		(Office held			
	expenditure to benefit				Ç ·						
L	C/OH										
l											

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/9 Rpt: 22/23 Williams, Shelby (Mr.) 00088311 Date Payee name 11/09/2024 Mission Ridge Range and Academy Amount (\$) Payee address; City; State; Zip Code \$378.88 4340 Mapleshade Ln Reimbursement from political contributions Х intended Plano, TX 75093 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE Event Expense** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/06/2024 Namebright Amount (\$) Payee address; City; State; Zip Code \$11.97 2635 Walnut Street Reimbursement from political contributions Χ Denver, CO 80205 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Web Services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/02/2024 Namebright Payee address; City; State; Zip Code Amount (\$) \$10.99 2635 Walnut Street Reimbursement from Χ political contributions intended Denver, CO 80205 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Web Services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment			Expense /Wages/Contract Labor		OTHER (enter a category not listed above)
	orean oara'r ayment		The Instruction Guide explains how to c	complete this form.		
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID (Ethics Commission Filers)
	Sch: 9/9 Rpt: 23/23		Williams, Shelby (Mr.)			00088311
4	Date	5	Payee name			
	11/06/2024		Namebright			
6	Amount (\$)	7	Payee address; City; State; Zip C	Code		
	\$11.97		2635 Walnut Street			
	Reimbursement from					
	X political contributions intended		Denver, CO 80205			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	C	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		_ c	heck if Austin, TX, officeholder living expense
	LAFLINDITORL			Web Services		
9		Car	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit C/OH					
	5.	_				
	Date		Payee name			
	07/06/2024		Wellness and More			
	Amount (\$)		Payee address; City; State; Zip C	Code		
	\$44.00		Unknown			
	Reimbursement from political contributions					
	intended		Forney, TX 75126			
	PURPOSE OF		Category (See Categories listed at the top of this schedule)	Description	=	heck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense	L		heck if Austin, TX, officeholder living expense
				Flags for Events		
_	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit	Cai	ididate/Officeriolaer Harrie	Office 30ugnt		Office field
	C/OH					
	Date		Payee name			
	07/06/2024		X			
	Amount (\$)	Г	Payee address; City; State; Zip C	ode		
	\$124.48		Market Square, 1355 Market St suite 900			
	Reimbursement from					
	X political contributions intended		San Francisco, CA 94103			
Т	PURPOSE	T	Category (See Categories listed at the top of this schedule)	Description	С	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		c	heck if Austin, TX, officeholder living expense
	LXI ENDITORE			X Subscription		
		Car	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit C/OH					
\vdash						
1						