CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comple	te this form.	1 Filer ID (Ethics Commis 00062137	sion Filers)	2 Total pages fi	led: 32
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Brian D.			Date Received	
10 WIL					ELECTRONIC	ALL V EIL ED
						ALLI FILLD
	NICKNAME	LAST		SUFFIX	01/15/2025	
		Birdwell				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered o	or Date Postmarked
OFFICEHOLDER	P.O. Box 1111					
MAILING ADDRESS					Receipt #	Amount
Change of Address	Granbury, TX 76048					
	Charibary, 1X 70040				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER		FIRST		MI		
NAME		Ron				
	NICKNAME	LAST		SUFFIX		
		Sutton				
6 CAMPAIGN	STREET ADDRESS (NO PO E	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER	8926 Brierfield Rd.					
ADDRESS						
(Residence or Business)	Granbury, TX 76049					
	Granbury, 1X 70049					
7 CAMPAIGN	AREA CODE PHONE	E NUMBER E	XTENSION			
TREASURER	(817) 219-4453					
PHONE						
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff		mpaign treasurer
					appointment (offi	
	July 15	8th day before 6		Exceeded modified reporting limit	Final Report (Att	ach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	IROUGH	12/31/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
		□G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGHT	「(if known)	
	State Senator District 22				,	
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 82

13 C / OH NAME	Birdwell, Brian D. (Th	e Honorable)	14 Filer ID (00062137			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political exp These expenditures may have been made wi officeholders are required to report this infor	thout the candidate's or office	holder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
_	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NA	ME			
		COMMITTEE CAMPAIGN TREASURER AD	DRESS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER ES OF LOANS, OR CONTRIBUTIONS MADE		\$ 0.00		
	OANS)	\$ 353,800.00				
EXPENDITURE TOTALS						
	4. TOTAL POLITIC		\$ 105,975.81			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TRIOD	THE LAST DAY OF THE	\$ 1,021,940.13		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOAN TING PERIOD	IS AS OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT			penalty of perjury, that the acc ides all information required to ode.			
		The	Honorable Brian D. Birdwe	ell		
		Signat	ure of Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL AB	DVE				
Sworn to and subso	cribed before me, by the s	aid	, this the	day		
of	, 20, to co	rtify which, witness my hand and seal of offic	e.			
Signature of office	er administering	Printed name of officer administering	Title of officer	administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				JVL	3 of 82
18 FILE			19 Filer ID	(Eth	ics Commission Filers)
		Brian D. (The Honorable)	00062137		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	353,800.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	93,426.74
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	12,549.07
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	DNS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	17,087.79

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/34 Rpt: 4/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	5 Full name of contributor out-of-state PAC (ID#:_ A&M PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$2,500.00
_	Dringing! good	Austin, TX 78701	0 Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Advanced Drainage Systems Inc, PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Lakeway, TX 78738 spation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Aghamalian, Brandon Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Consultant	patient cos tale (cos metadatorio)	Focused Advocacy, LLC			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Ahlberg, Trevor Contributor address; City; State; Zip Code Irving, TX 75038)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Hatada Ranch)		
-	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Allen Boone Humphries Robinson, LLP Contributor address; City; State; Zip Code Houston, TX 77027)	-	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDUI	LE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/34 Rpt: 5/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/02/2024	 Full name of contributor	00040535	7	Amount of Contribution (\$)	\$1,000.00
_	Daine in all account	Washington, DC 20004	9 Employer (20 a lastration			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor X out-of-state PAC (ID#: CAMERICAN PROPERTY CASUALTY INS. ASSN. PAC Contributor address; City; State; Zip Code	00066472		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Chicago, IL 60631 pation / Job title (See Instructions)	Employer (See Instructions)		
	· ····o.pa. oooa		p.oyo. (000oadoao	,		
	Date 11/19/2024	Full name of contributor x out-of-state PAC (ID#: C Americans for Citizen Voting PAC Contributor address; City; State; Zip Code	00863696		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Woodbridge, VA 22913 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/15/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID#:_ Associated General Contractors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78768			Amount of Contribution (\$)	\$7,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS					LE A1
	The Instru	ction Guide explains how t	to complete this for	m.	1	Total pages Schedule A1: Sch: 3/34 Rpt: 6/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 11/06/2024	5 Full name of contributor)	7	Amount of Contribution (\$)	\$3,000.00
•	Dringing oggu	Dallas, TX 75240	lo.	Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	·)		
	Date 12/11/2024	Full name of contributor Austin Police Association P Contributor address; City; Stat				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78721 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
		,					
	Date 10/31/2024	Full name of contributor E Bear Backer PAC Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Houston, TX 77056					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/24/2024	Full name of contributor Beef PAC Contributor address; City; Stat Amarillo, TX 79106	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/19/2024	Full name of contributor Black, Jason Contributor address; City; State Alvin, TX 77511	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS				ULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/34 Rpt: 7/82		
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)	
4	Date 12/12/2024	5 Full name of contributor out-of-state PAC (ID#:_ Blacklock Partners, LLC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00	
_	<u> </u>	Fort Worth, TX 76135					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID#:_ Boating Trades Assn. of Metro Houston PAC Contributor address; City; State; Zip Code Houston, TX 77054)		Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Brannon, Blake Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
	Principal occu	Brenham, TX 77833 pation / Job title (See Instructions)	Employer (See Instructions				
	i illicipai occa	pation 7 oob title (occ mondellons)	Employer (See Manacions	,			
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Brannon, Michael Contributor address; City; State; Zip Code Brenham, TX 77833)		Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_Bullard, Thomas Contributor address; City; State; Zip Code Spring, TX 77386			Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	MONETARY POLITICAL CONTRIBUTIONS					LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/34 Rpt: 8/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	5 Full name of contributor Butler Snow LLP6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$1,000.00
0	Principal occu	Ridgeland, MS 39158	<u>, , , , , , , , , , , , , , , , , , , </u>	Employer (See Instructions	", 		
<u> </u>	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	·)		
	Date 11/05/2024	Full name of contributor Calpine Corporation PAC Contributor address; City; S)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Houston, TX 77002 pation / Job title (See Instructions	s)	Employer (See Instructions	 s)		
	'		,		,		
	Date 12/14/2024	Full name of contributor Carlson, David Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5,000.00
		Addison, TX 75001	, 1		<u></u>		
	Principal occu President &	pation / Job title (See Instructions COO	5)	Employer (See Instructions Waste Control Specialis	•		
	Date 11/19/2024	Full name of contributor Caterpillar, Inc. PAC Contributor address; City; S Irving, TX 75039)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor Charter Communications, Contributor address; City; S Austin, TX 78701				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
			-				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 6/34 Rpt: 9/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 11/05/2024	 Full name of contributor out-of-state PAC (ID#:_ Chevron Employees PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$3,000.00
8	Princinal occu	San Ramon, CA 94583 upation / Job title (See Instructions)	9 Employer (See Instructions	-) 		
	- I morpai occ.			,		
	Date 10/31/2024	Full name of contributor X out-of-state PAC (ID#:_ Chubb Group Holdings, Inc. PAC Contributor address; City; State; Zip Code	C00348938		Amount of Contribution (\$)	\$500.00
	Principal occu	Philadelphia, PA 19106 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	_	
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#:_ Coffey, Kari Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Houston, TX 77055 upation / Job title (See Instructions)	Employer (See Instructions	;)		
				_		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Comcast Corp. and NBC Universal PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	.)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Commercial Metals Company PAC Contributor address; City; State; Zip Code Irving, TX 75039			Amount of Contribution (\$)	\$1,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
			1			

	MONET	ARY POLITICAL CONTRIBUTI		SCHEDULE A		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/34 Rpt: 10/82	
2	FILER NAME Birdwell, Bria	n D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 10/18/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
_	Dringing Logg	Houston, TX 77055	Compleyer (Coe Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID# ConocoPhillips SPIRIT PAC Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$2,500.00
	Dringing aggr	Austin, TX 78701	Employer (Co.) Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor uut-of-state PAC (ID# Constellation Brands Inc, PAC Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78711	,			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID# Constellation Energy Corporation PAC Contributor address; City; State; Zip Code Washington, DC 20001	:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor x out-of-state PAC (ID# CovestroPAC Contributor address; City; State; Zip Code Pittsburgh, PA 15205	: <u>C00585885</u>		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			-			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/34 Rpt: 11/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	5 Full name of contributor out-of-state PAC (ID#:_ DPSOA PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Duinning Langu	Austin, TX 78752	O Franks var (Caa kastrustinga			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#:_ DeJean, Clifton Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu	Baton Rouge, LA 70808 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Dobson, Sean Contributor address; City; State; Zip Code Austin, TX 78746			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_ Dossett, Markham Contributor address; City; State; Zip Code Waco, TX 76702	The Amherst Group		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/06/2024	Full name of contributor out-of-state PAC (ID#:_ Dow, Inc. PAC Contributor address; City; State; Zip Code Midland, MI 48674			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS					E A1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/34 Rpt: 12/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/12/2024	5 Full name of contributor ENPAC Texas6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)	7	Amount of Contribution (\$)	\$5,000.00
Ω	Principal occu	Austin, TX 78701 pation / Job title (See Instruction		9 Employer (See Instructions	.)		
0	Fillicipal occu	pation / 300 title (See instruction	5)	Employer (See instructions	')		
	Date 09/25/2024	Full name of contributor Employees of RTX Corpo Contributor address; City; S		000097568		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Arlington, VA 22209 pation / Job title (See Instruction	s)	Employer (See Instructions	<u> </u>		
	Date 12/14/2024	Full name of contributor Epstein, Robert Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78701					
	Principal occu Founding Pa	pation / Job title (See Instruction urtner	s)	Employer (See Instructions Prophet Capital Manage		ent	
	Date 10/24/2024	Full name of contributor ExxonMobil PAC Contributor address; City; S Irving, TX 75039				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	()		
	Date 12/13/2024	Full name of contributor Finley, Trace Contributor address; City; S Driftwood, TX 78619	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/34 Rpt: 13/82		
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)	
4	Date 12/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,500.00	
_	Dein ein al. a ann	Dallas, TX 75201	O Frankrije (Construction				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of TSTC PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of the TTU System PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#: Fulton, David Contributor address; City; State; Zip Code Sanger, TX 76266			Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/19/2024	Full name of contributor X out-of-state PAC (ID#: GM PAC Contributor address; City; State; Zip Code Washington, DC 20001	000076810		Amount of Contribution (\$)	\$3,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/34 Rpt: 14/82		
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)	
4	Date 10/16/2024	5 Full name of contributor out-of-state PAC (ID#:_ Gachman, Arnold 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00	
_	Daine in all a con-	Fort Worth, TX 76107					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Garrett, Jon Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Waxahachie, TX 75165 pation / Job title (See Instructions)	Employer (See Instructions)			
	CEO	panent coo and (coo men actions)	Apex Sites	,			
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Gebhardt, Gwendalyn Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$300.00	
		Axtell, TX 76624					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_Goldberg, Ken Contributor address; City; State; Zip Code Dallas, TX 75230)		Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Good Government Fund Contributor address; City; State; Zip Code Fort Worth, TX 76102			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL C	NS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 12/34 Rpt: 15/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/10/2024	5 Full name of contributorGood Government Fund6 Contributor address; City; Sta	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Fort Worth, TX 76102 pation / Job title (See Instructions)	9	Employer (See Instructions	 		
		,					
	Date 12/14/2024	Full name of contributor Gray Reed PAC Contributor address; City; Sta				Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77056					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor Gregory, Bob Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78747					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Texas Disposal System			
	Date 12/11/2024	Full name of contributor Gulf States Toyota Inc. PA Contributor address; City; Sta Austin, TX 78701)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/02/2024	Full name of contributor HCA Texas Good Governr Contributor address; City; Sta				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/34 Rpt: 16/82		
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)	
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ HOMEPAC of Texas 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$2,000.00	
•	Dringing! goog	Austin, TX 78701	0 Employer (Coo Instructions				
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#:_ HS Law PAC)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ HS Law PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_Halliburton Company PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Heath, Brian Contributor address; City; State; Zip Code Fredericksburg, TX 78624			Amount of Contribution (\$)	\$1,500.00	
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Grape Creek Vineyards)			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/34 Rpt: 17/82	
2	FILER NAME Birdwell, Brid	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 10/16/2024	5 Full name of contributor out-of-state PAC (ID#:_ Henry, III, Gaile 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_	Deinainal agai	Beaumont, TX 77704	D. Faralayar (Can Instruction			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_HillCo PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: HillCo PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ IEC of Texas PAC Fund Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Incline PAC 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)		

	MONET	ARY POLITICAL COI	S	SCHEDULE A1			
	The Instru	ction Guide explains how to o	complete this forn	1.	1	Total pages Schedule A1: Sch: 15/34 Rpt: 18/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	Indepac	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78750					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions))		
	Date 12/12/2024	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
		Fort Worth, TX 76102					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Date 10/18/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		Crawford, TX 76638					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Date 10/16/2024	Lipsitz, Jr., Melvin	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL (ONS	SCHEDULE A1			
	The Instru	ction Guide explains how	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/34 Rpt: 19/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	5 Full name of contributor Lloyd Gosselink Rochelle6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instruction	is)		
	Date 12/12/2024	Full name of contributor Longbow Consulting Part Contributor address; City; S)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instruction	e)	Employer (See Instruction) 		
	r illicipai occu	pation / 300 title (See instruction	5)	Employer (See Instruction	13)		
	Date 10/24/2024	Full name of contributor Lyondell Chemical Comp Contributor address; City; S)		Amount of Contribution (\$)	\$2,000.00
		Houston, TX 77010					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instruction	is)		
	Date 12/10/2024	Full name of contributor Manufacturers PAC of Te Contributor address; City; S Austin, TX 78711)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instruction	ıs)		
	Date 10/31/2024	Full name of contributor Marathon Petroleum Cor Contributor address; City; S Findlay, OH 45840		ıC		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instruction	ns)		

	MONET	ARY POLITICAL C	NS 	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 17/34 Rpt: 20/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	 Full name of contributor McGuire Woods Federal F Contributor address; City; St 			7	Amount of Contribution (\$)	\$1,000.00
		Richmond, VA 23219					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/12/2024	Full name of contributor Moak Casey PAC Contributor address; City; St.	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	1	Employer (See Instructions	z)		
	i ilicipai occu	pation / Job title (See Instructions	′	Employer (See instructions	۰)		
	Date 12/12/2024	Full name of contributor Motorola Solutions, Inc. P. Contributor address; City; St.				Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	s)		
	Date 12/11/2024	Full name of contributor NAIFA Texas IFAPAC Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		
	Date 11/19/2024	Full name of contributor NCHA's Texas Events PA Contributor address; City; St			•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		
			I				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/34 Rpt: 21/82		
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)	
4	Date 11/26/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$3,000.00	
_	Deignaignal annu	Princeton, NJ 08540	O Familia var (Can Instructiona				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 10/24/2024	Full name of contributor X out-of-state PAC (ID#: National Assn. of Mutual Insurance Comp. PAC Contributor address; City; State; Zip Code Indianapolis, IN 46268	C00170258)		Amount of Contribution (\$)	\$750.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#: Nemec, Tim Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
		Mt. Calm, TX 76673					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ North Texas Automobile Dealers PAC Contributor address; City; State; Zip Code Irving, TX 75062)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Nucor Corporation PAC Contributor address; City; State; Zip Code Jewett, TX 75846			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/34 Rpt: 22/82		
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)	
4	Date 08/27/2024	5 Full name of contributor out-of-state PAC (ID#:_ ONEOK Employees PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00	
		Tulsa, OK 74102					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas State PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ PNM Responsible Citizens Group Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#: PharmPAC 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 10/19/2024	Full name of contributor out-of-state PAC (ID#:_ Plumbers Local Union No. 68 PAC Contributor address; City; State; Zip Code Houston, TX 77249)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1			
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 20/34 Rpt: 23/82		
2	FILER NAME Birdwell, Bria	ın D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)	
4	Date 12/14/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00	
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions	ns)			
•	· ····o.pa. ooda			,			
	Date 12/10/2024	Full name of contributor out-of-state PAC (I Populus Financial Corporation PAC Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$1,000.00	
	Dringingless	Irving, TX 75062	Franksian (Coo Instructions				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	15)			
	Date 08/30/2024	Full name of contributor out-of-state PAC (I Precast PAC Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78716					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)			
	Date 10/18/2024	Full name of contributor out-of-state PAC (I Proler, Rebecca Contributor address; City; State; Zip Code Houston, TX 77096	D#:)		Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)			
	Date 12/13/2024	Full name of contributor out-of-state PAC (I Putegnat, Steven Contributor address; City; State; Zip Code Rancho Viejo, TX 78575	D#:)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu Operator	pation / Job title (See Instructions)	Employer (See Instructions Titan Marine Fuel, LLC				
	Эрегию		Than warmer del, LLC				

	MONET	ARY POLITICAL C	NS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/34 Rpt: 24/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	5 Full name of contributor Quest Diagnostics Inc. PA6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$500.00
		Seacaucus, NJ 07094					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/14/2024	Full name of contributor Robison, Douglass Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$2,000.00
	Abilene, TX 79605 Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Founder & President)	Employer (See Instructions Natura Resources	s)		
	Date 10/16/2024	Full name of contributor Rodriguez, Roger Contributor address; City; St	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$250.00
		New Braunfels, TX 78132					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/24/2024	Full name of contributor Ryan Texas PAC Contributor address; City; St Dallas, TX 75240)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 08/17/2024	Full name of contributor Schieffer, Tracy Contributor address; City; St Kurten, TX 77862	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Vice Preside	pation / Job title (See Instructions ent)	Employer (See Instructions AL Helmcamp	5)		

	MONET	ARY POLITICAL CONTRIBUTION)NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/34 Rpt: 25/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 10/18/2024	 Full name of contributor out-of-state PAC (ID#:_Shapiro, Carrie Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78746	Employer (See Instructions			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	i)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Sledgelaw Group, PLLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78766 Ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ TALAPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78746 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ TBA Bank PAC - State Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#: TREPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78768 upation / Job title (See Instructions)	Employer (See Instructions)	<u></u> ;)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 23/34 Rpt: 26/82	
2	FILER NAME Birdwell, Bria	n D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	Filers)
4	Date 09/09/2024	 Full name of contributor		7	Amount of Contribution (\$) \$	3,000.00
ρ	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instruction	ne)		
•	r inicipal occu	oation 7 300 title (See matractions)	2 Employer (See Instruction	113)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID# TXTA Truck PAC Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$) \$	1,000.00
		Austin, TX 75701		Ţ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID# Tenaska Employees Texas PAC Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$) \$	1,000.00
		Omaha, NE 68154				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID# Tex-Pipe 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 Instruction	ns)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID# Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701	#:)		Amount of Contribution (\$) \$3	0,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/34 Rpt: 27/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/14/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
_	Deignaignal annu	Austin, TX 78741	O Franklause (Coo la structions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Aggregates & Concrete Assn. PAC Contributor address; City; State; Zip Code Austin, TX 78711)		Amount of Contribution (\$)	\$3,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Agricultural Aviation Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Apartment Association Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$7,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association Staffing PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/34 Rpt: 28/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 10/30/2024	Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
_		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 Building Branch AGC PAC Account Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Cornerstone Credit Union League PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Dallas, TX 75265 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC Contributor address; City; State; Zip Code Austin, TX 78711			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dental Association PAC Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/34 Rpt: 29/82	
2	FILER NAME Birdwell, Brid	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/12/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,000.00
_		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 Food & Fuel Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Impact, a CRH PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78726 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	- Timolpai occa	pation / vob title (see instructions)	Employer (See manuchons	,		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Association PAC Contributor address; City; State; Zip Code Austin, TX 78703)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Manufactured Housing Assn, Inc. PAC Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 27/34 Rpt: 30/82
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00062137
4	Date 11/05/2024	 Full name of contributor		7	Amount of Contribution (\$) \$5,000.00
_		Austin, TX 78701	T		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	is)	
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID# Texas Oil & Gas Assn. Good Govt. Cmte Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	l IS)	
	Date 11/09/2024	Full name of contributor out-of-state PAC (ID# Texas Optometric PAC Contributor address; City; State; Zip Code	<u> </u>		Amount of Contribution (\$) \$2,000.00
	Principal occu	Austin, TX 78705 pation / Job title (See Instructions)	Employer (See Instructions	ls)	
	•	,			
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID# Texas Podiatric 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	I IS)	
	Date 11/09/2024	Full name of contributor out-of-state PAC (ID# Texas Restaurant Association PAC Contributor address; City; State; Zip Code Austin, TX 78767	<u> </u>		Amount of Contribution (\$) \$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)	
			1		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/34 Rpt: 31/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/12/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78731				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Farm Agents PAC Contributor address; City; State; Zip Code Austin, TX 78757)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Statewide Telephone Coop, Inc. PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	<u> </u>	Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Surplus Lines Association PAC Contributor address; City; State; Zip Code Austin, TX 78766)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Towing & Storage Assn. PAC Contributor address; City; State; Zip Code Spring, TX 77386			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/34 Rpt: 32/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commissio 00062137	n Filers)
4	Date 12/10/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_		Austin, TX 78749				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas and Southwestern Cattle Raisers Associa Contributor address; City; State; Zip Code Fort Worth, TX 76185			Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Textron PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Fort Worth, TX 76101 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Timolpai occu	pation / vob title (oce motivations)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ The American Electric Power Company Texas Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ The Beer Alliance of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 30/34 Rpt: 33/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 10/15/2024	5 Full name of contributorThe Boeing Company PA6 Contributor address; City; St			7	Amount of Contribution (\$)	\$1,000.00
		Arlington, VA 22202					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Date 12/13/2024	Full name of contributor The Posey Law Firm, PC Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	e)	Employer (See Instructions	;) 		
	i ilicipai occu	pation / Job title (See matrictions	,	Employer (See Instructions	"		
	Date 12/14/2024	Full name of contributor Toyota North America, Ind Contributor address; City; St		00542365		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions	;)	Employer (See Instructions	<u> </u> s)		
	Date 10/19/2024	Full name of contributor Triesch, Johnny Contributor address; City; St)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>1 </u>		
	Date 10/19/2024	Full name of contributor Triesch, Tom Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/34 Rpt: 34/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 10/19/2024	5 Full name of contributor out-of-state PAC (ID#:_ Turakhia, Mukesh 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_	Dringing Lagge	Missouri City, TX 77459	O Frankrige (Cook keets et ander			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/19/2024	Full name of contributor out-of-state PAC (ID#:_ Turakhia, Nidhi Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Houston, TX 77019 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ TxANA PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_USAA Employee PAC Contributor address; City; State; Zip Code San Antonio, TX 78288			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/04/2024	Full name of contributor out-of-state PAC (ID#:_ Uhrick, Michael Contributor address; City; State; Zip Code Boston, MA 02116			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/34 Rpt: 35/82	
2	FILER NAME Birdwell, Bria	n D. (The Honorable)		3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/02/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
_	Deignigal	San Antonio, TX 78269	O Familia de Constituição			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID#:_Verizon Communications, Inc. Good Govt Club Contributor address; City; State; Zip Code Austin, TX 78701	- Texas		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/24/2024	Full name of contributor out-of-state PAC (ID#:_ Vexler, Jack Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	San Antonio, TX 78209 pation / Job title (See Instructions)	Employer (See Instructions)		
				,		
	Date 10/24/2024	Full name of contributor out-of-state PAC (ID#:_ Vexler, Mary Contributor address; City; State; Zip Code San Antonio, TX 78212			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/19/2024	Full name of contributor x out-of-state PAC (ID#:_Vulcan Materials Company PAC Contributor address; City; State; Zip Code Birmingham, AL 35238	C00116020		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
			,			

	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 33/34 Rpt: 36/82	
2	FILER NAME Birdwell, Bria	an D. (The Honorable)			3	Filer ID (Ethics Commission 00062137	on Filers)
4	Date 12/10/2024	 Full name of contributor out-of-state P/Waste Management Employees Better G Contributor address; City; State; Zip Code 	-		7	Amount of Contribution (\$)	\$3,000.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 10/19/2024	Full name of contributor out-of-state Provided Weekley, Richard Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Deinsinal	Houston, TX 77027		Familia de Constituido de	<u></u>		
	Founder	pation / Job title (See Instructions)		Employer (See Instructions Weekley Properties	5)		
	Date 11/06/2024	Full name of contributor x out-of-state P/Wells Fargo & Co Employee PAC Contributor address; City; State; Zip Code	AC (ID#: <u>C0(</u>	0034595)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20006 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 12/11/2024	Full name of contributor out-of-state PA Wine & Spirits Wholesalers of Texas PA Contributor address; City; State; Zip Code Austin, TX 78755	c)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/19/2024	Full name of contributor out-of-state Pa Wright, Jonathan Contributor address; City; State; Zip Code Beaumont, TX 77706)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			ı				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 34/34 Rpt: 37/82		
2	FILER NAME Birdwell, Bria	an D. (The Honorable)		3	Filer ID (Ethics Commissi 00062137	on Filers)
4					Amount of Contribution (\$)	\$500.00
	Dein sin al a ser	Beaumont, TX 77706	O Frankrije (Contraktivation			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/20/2024 Young, Mrs. Kenneth Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$1,000.00	
		Waco, TX 76710	Employer (See Instructions			
	Principal occu	pation / Job title (See Instructions)	s)			
	Date 10/24/2024	Full name of contributor out-of-state PAC (ID#:_ Zachry Corporation PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	San Antonio, TX 78265 pation / Job title (See Instructions)	Employer (See Instructions	?) 		
	- meipai occe	pation 7 oob title (eee metactions)	Employer (Gee instructions			

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/Officeholder/Politica Credit Card Payment	committee Legal Services The Instruction Guide expl	_	ges/Contract Labor		ER (enter a	category not listed above)
1	Total pages Schedule F1:	FILER NAME			3 Filer	ID	(Ethics Commission Filers)
	Sch: 1/27 Rpt: 38/82	Birdwell, Brian D. (The Honorable)			000	62137	
4	Date	Payee name					
	08/08/2024	Arthur, McKayla					
6	Amount (\$) \$1,000.00	Payee address; City; S P.O. Box 1111 Granbury, TX 76048	State; Zip Codε	9			
8	PURPOSE	a) Category (See Categories listed at the top of the	nis schedule) (k	Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel of Check if Austin,	TX, officer		olete Schedule T. expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sough	nt	ı	Office he	eld
	Date	Payee name					
	08/31/2024	Birdwell, Brian					
	Amount (\$)	Payee address; City; S	State; Zip Code	9			
	\$840.18	P.O. Box 1111					
		Granbury, TX 76048	la.				
	PURPOSE OF	a) Category (See Categories listed at the top of the	nis schedule)	Description	outside of T	avas Comr	olete Schedule T.
	EXPENDITURE	Travel In District		Check if Austin,			
				August 2024	campai	gn milea	age
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sough	nt	,	Office he	eld
	Date	Payee name					
	07/02/2024	Birdwell, Brian					
	Amount (\$)	Payee address; City; S	State; Zip Code	9			
	\$190.95	P.O. Box 1111					
		Granbury, TX 76048					
	PURPOSE OF	a) Category (See Categories listed at the top of the	nis schedule) (k	Description		_	
	EXPENDITURE	Travel In District		Check if travel of Check if Austin,			olete Schedule T.
				June 2024 ca			
					. 5	3	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sough	nt		Office he	ld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/27 Rpt: 39/82	Birdwell, Brian D. (The Honorable)	00062137
4	Date	5 Payee name	
	11/26/2024	Birdwell, Brian	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$596.70	P.O. Box 1111	
		Granbury, TX 76048	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			November 2024 campaign mileage
_	0 1: 01 1/4 1		0"
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sough	office held
	<u> </u>		
	Date	Payee name	
	10/31/2024	Birdwell, Brian	
	Amount (\$)	Payee address; City; State; Zip Code	9
	\$339.95	P.O. Box 1111	
		Granbury, TX 76048	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense October 2024 campaign mileage
			October 2024 campaign mileage
H	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
	expenditure to benefit C/O		it Office field
	Date	Payee name	
	09/25/2024	Birdwell, Brian	
	Amount (\$)	Payee address; City; State; Zip Code	9
	\$547.60	P.O. Box 1111	
		Granbury, TX 76048	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			September 2024 campaign mileage
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt Office held
	experialitate to beliefit 6/01	<u> </u>	

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

	onations Made By fficeholder/Politica ment		Gift/Awards/Memo Legal Services The Instruction	rials Expense n Guide explain		/ages/	Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed a	lbove)
1 Total mass - C	abadula F1:	2 FILED MANA		•		•	1	٦.	Filor ID	(Ethios Commit	cion Filera)
1 Total pages S Sch: 3/27 R		2 FILER NAM Birdwell, B	∟ rian D. (The ⊦	lonorable)				3	Filer ID 00062137	(Ethics Commis	sion Filers)
4 Date		5 Payee name						<u> </u>			
		,									
07/01/2024		Bock, Kirst	.ee								
6 Amount (\$)		7 Payee addre	ess; City;	Sta	te; Zip Co	de					
	\$200.00	P.O. Box 2	6802								
			70755								
		Austin, TX	/8/55								
8 PURPOSE	E	(a) Category (S	See Categories lister	at the top of this s	schedule)	(b)	Description				
OF			ages/Contrac		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
EXPENDITU	JRE						Check if Austin,	, TX,	officeholder living	expense	
							campaign stip	oen	ıd		
9 Complete ON	I V if direct	Candidate/Of	ficeholder name		Office sou	abt			Office he	7l4	
expenditure to			ilceriolder Harris	7	Office 30u	giit			Office file	aiu .	
								_			
Date		Payee name	9								
08/01/2024		Bock, Kirst	ee								
Amount (\$)		Payee addre	ess; City;	Star	te; Zip Co	de					
γιποαπί (φ)	ቀ200 00	-		Old	tc, 2ip 00	uc					
	\$200.00	P.O. Box 2	10802								
		Austin, TX	78755								
PURPOSE						(h)	D				
OF	=	(a) Category (s			schedule)	(D)	Description Check if travel (outci	de of Texas. Com	nloto Schodulo T	
EXPENDITU	JRE	Salaries/W	ages/Contrac	t Labor			-		officeholder living		
							campaign stip			гехрепас	
							campaign sup	Jen	ıu		
Complete ON			ficeholder name	9	Office sou	ght			Office he	eld	
expenditure to	benefit C/Oi	7									
Date		Payee name	<i>;</i>								
09/01/2024		Bock, Kirst									
Amount (\$)		Payee addre		Sta	te; Zip Co	de					
	\$200.00	P.O. Box 2	6802								
		Austin, TX	78755								
						<i>a</i> >					
PURPOSE OF	E	(a) Category (s			schedule)	(a)	Description				
EXPENDITU	JRE	Salaries/W	ages/Contrac	t Labor					de of Texas. Com		
							_		officeholder living	expense	
							campaign stip	ben	ıu		
Complete ON			ficeholder name	9	Office sou	ght			Office he	eld	
expenditure to	benefit C/OI	1									

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Comn	nittee Lega	Awards/Memorials E al Services • Instruction Gui	•		ages/	/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed above)	
1	Total pages Schedule F1:	2 -			• • • •			-	3	Filer ID	(Ethics Commission Filers)	
	Sch: 4/27 Rpt: 41/82	1	Birdwell, Brian	D. (The Hono	rable)					00062137	(Euiles Collillission Filels)	
4	Date	5 P	Payee name						•			
	10/01/2024	В	Bock, Kirstee									
6	Amount (\$) \$200.00	P	Payee address; P.O. Box 2680. Austin, TX 787		State;	; Zip Coo	de					
8	PURPOSE	(a) C	Category (See Ca	tegories listed at the	e top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wage						, TX,	officeholder livin	nplete Schedule T. g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		andidate/Officeh	older name	(Office souç	ght			Office h	eld	
	Date	P	ayee name									
	11/01/2024	В	Bock, Kirstee									
	Amount (\$)	Р	ayee address;	City;	State;	; Zip Cod	de					
	\$200.00	P	P.O. Box 2680	2								
	DUDDOCT	-	Austin, TX 787				/ L\					
	PURPOSE OF		Category (See Ca			nedule)	(a)	Description Check if travel of	nutsi	de of Texas Con	nplete Schedule T.	
	EXPENDITURE	8	Salaries/Wage	s/Contract La	nor			=		officeholder livin		
								campaign stip	oen	d		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeh	older name	(Office souç	ght			Office h	eld	
	Date	P	ayee name					-				
	12/02/2024	В	Bock, Kirstee									
	Amount (\$)	P	ayee address;	City;	State;	; Zip Cod	de					
	\$200.00	P	P.O. Box 2680	2								
		A	Austin, TX 787	55		<u> </u>						
	PURPOSE OF		Category (See Ca			nedule)	(b)	Description				
	EXPENDITURE	S	Salaries/Wage:	s/Contract La	bor			_		de of Texas. Con officeholder livin	nplete Schedule T. g expense	
								campaign stip			у слренас	
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeh	older name	(Office souç	ght			Office h	eld	
_												

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

	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: 5/27 Rpt: 42/82	Birdwell, Brian D. (The Honorable) 00062137
4	Date	5 Payee name
	08/24/2024	Bosque County Republican Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	P.O. Box 63
		Cranfills Gap, TX 76637
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 sponsorship support
		Sportsorship support
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	07/01/2024	Brannon, Kevin
H	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1911 Lorraine Avenue
		Allen, TX 75002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign consulting services
		Campaign consuling services
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	08/01/2024	Brannon, Kevin
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1911 Lorraine Avenue
		Allen, TX 75002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign consulting services
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 6/27 Rpt: 43/82	2 FILER NAME Birdwell, Brian D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062137
4	Date	5 Payee name
	08/31/2024	Brannon, Kevin
6	Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 1911 Lorraine Avenue Allen, TX 75002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign consulting services
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/24/2024	Brannon, Kevin
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1911 Lorraine Avenue
	DUDDOG	Allen, TX 75002
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign consulting services
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/25/2024	Brannon, Kevin
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1911 Lorraine Avenue
		Allen, TX 75002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		campaign consulting services
	Complete ONLY if direct expenditure to benefit C/Ol	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 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 The Instruction Guide	Salaries/\	Wages	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commission F	ilers)
	Sch: 7/27 Rpt: 44/82		ian D. (The Honora	able)				00062137	•	,
4	Date	5 Payee name								
	11/25/2024	Brannon, K	evin							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$2,500.00	1911 Lorra	ne Avenue							
		Allen, TX 7	5002							
8	PURPOSE OF		ee Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Consulting	Expense			_		de of Texas. Comp officeholder living		
						campaign coi				
						capa.g co.		g 00.7.00		
9	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	l ught			Office he	eld	
	Date	Payee name								
	07/02/2024	Brazos Pre	gnancy Center							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$1,200.00	1812 Actor	Hwy							
		Granbury, ⁻	ГХ 76049							
	PURPOSE OF		ee Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Advertising	Expense					de of Texas. Comp officeholder living		
						gala sponsors			expense	
						gaia oponioon	۰	۲		
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ught			Office he	eld	
	experiditure to beliefit C/Or	1								
	Date	Payee name								
	09/09/2024	Capitol Cor	nmission							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$1,000.00	12302 Mar	shall Drive							
		Magnolia, ∃	X 77354							
	PURPOSE OF	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Advertising	Expense			ш		de of Texas. Comp officeholder living		
						sponsorship s			expense	
						cponcoronip .	Jup	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
\vdash	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	laht			Office he	eld	
	expenditure to benefit C/O		.conoladi namo	Oilice 300	-911L			Omice ne		
l										

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)
1	Sch: 8/27 Rpt: 45/82	Birdwell, Brian D. (The Honorable)
4	Date	5 Payee name
	10/16/2024	Davidson, Donna
6	Amount (\$) \$3,450.00	7 Payee address; City; State; Zip Code P.O. Box 12131 Austin, TX 78711
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Legal Services Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense campaign legal services
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/15/2024	Eastland County GOP
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	200 CR 315
		Eastland, TX 76448
	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
		election night watch party sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/19/2024	Ellis County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	610 Water St.
		Wayahashia TV 75105
		Waxahachie, TX 75165
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		donation to organization
	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 Com 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	
_	Tatal manage Calculula E4.	O. Eller D. MAME
1	Total pages Schedule F1: Sch: 9/27 Rpt: 46/82	2 FILER NAME Birdwell, Brian D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062137
4	Date	5 Payee name
	10/11/2024	Ellis County Republican Party
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 610 Water St. Waxahachie, TX 75165
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
		donation to organization
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/30/2024	Estrada, David
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 1111
		Granbury, TX 76048
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if traval subside of Tayon Complete Categories
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign wages
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/21/2024	Falls County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 1336
		Marlin, TX 76661
	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. Check if Austin TV office helder (Political Companitors)
		Candidate/Officeholder/Political Committee
		donation to organization
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 10/27 Rpt: 47/82	2 FILER NAME Birdwell, Brian D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062137
4	Date 10/17/2024	5 Payee name Frederick Douglass Republicans of Tarrant County PAC
6	Amount (\$) \$750.00	7 Payee address; City; State; Zip Code P.O. Box 170912
		Arlington, TX 76003
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship support
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/01/2024	Galloway, JW
	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 26802
		Austin, TX 78755
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign stipend
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 08/01/2024	Payee name Galloway, JW
	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 26802
		Austin, TX 78755
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign stipend
	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
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/27 Rpt: 48/82	Birdwell, Brian D. (The Honorable) 00062137
4	Date	5 Payee name
	09/01/2024	Galloway, JW
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	P.O. Box 26802
		Austin, TX 78755
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign stipend
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	·	
	Date	Payee name
	10/01/2024	Galloway, JW
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 26802
		Austin, TX 78755
	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
		campaign stipend
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	11/01/2024	Galloway, JW
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 26802
		Austin, TX 78755
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign stipend
L	0 1: 0:::::::::::::::::::::::::::::::::	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/27 Rpt: 49/82	Birdwell, Brian D. (The Honorable) 00062137
4	Date	5 Payee name
	12/02/2024	Galloway, JW
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	P.O. Box 26802
		Austin, TX 78755
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign stipend
		Sampaigh Sapona
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/25/2024	Graphics Management
	Amount (\$)	Payee address; City; State; Zip Code
	\$11,269.98	9322 Moss Trail
	, ,	
		Dallas, TX 75231
	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
		campaign mailers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 11/01/2024	Payee name Keep Tarrant Red
		·
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 309 E. Broad St.
	φ300.00	SUS E. BIOdu St.
		Mansfield, TX 76063
	DUDDOGE	· · · · · · · · · · · · · · · · · · ·
	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 Check if Austin, TX, officeholder living expense
		donation to organization
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experioralize to benefit C/O	1

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

	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: 13/27 Rpt: 50/82	Birdwell, Brian D. (The Honorable) 00062137
4	Date	5 Payee name
	10/16/2024	McLennan County Junior Stock Show
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	P.O. Box 8990
		Waco, TX 76714
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 Sponsorship support
		Sportsorstilp support
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name Mel annon County Population Women
	11/12/2024	McLennan County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.00	113 S University Parks Dr
		Waco, TX 76706
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		tickets for Doc Anderson farewell reception
		districts for 2007 independent recognish
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/16/2024	Rancho Brazos Gala
	Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 5266
	φ300.00	F.O. Box 5200
		Granbury, TX 76049
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		sponsorship support
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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		nmittee	Legal Services	·		ages.	Contract Labor		OTHER (enter a	strict a category not listed above)
				The Instruction Gu	ıide explains ho	w to con	nple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 14/27 Rpt: 51/82		Birdwell, Bri	an D. (The Hon	orable)					00062137	
4	Date	5	Payee name								
	10/30/2024		Randy's								
6	Amount (\$)	7	Payee addres	s; City;	State; 2	Zip Cod	de				
	\$800.00		1454 E Hwy	377							
			Granbury, T	X 76048							
8	PURPOSE	₩					(h)	D wheth			
ľ	OF	^(a)		e Categories listed at t		ule)	(D)	Description Check if travel of	nutsir	de of Teyas, Com	nplete Schedule T.
	EXPENDITURE			s/Donations Ma Officeholder/Poli		ee		브		officeholder living	•
			Our laidato/ C		tiodi Committ			—			y HS football team
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Offi	ice soug	ght			Office he	eld
	expenditure to benefit C/OI	Н									
	Date	Π	Payee name								
	09/10/2024		•	Women of Arlin	gton						
	Amount (\$)	\vdash	Payee addres	s; City;	State; 2	Zip Cod	de				
	\$500.00		P.O. Box 14	-		·					
	,										
			Arlington, TX	76004							
	DUDDO05	₩					<i>"</i> \				
	PURPOSE OF			e Categories listed at t	ne top of this schedu	ule)	(a)	Description	outoi	do of Toyon Com	nplete Schedule T.
	EXPENDITURE		Advertising I	=xpense						officeholder living	
								sponsorship s			
	Complete ONLY if direct		Candidate/Offic	eholder name	Offi	ice soug	ght			Office he	eld
	expenditure to benefit C/OI	Н									
_	Date	Π	Payee name								
	10/04/2024		Revv								
	Amount (\$)	\vdash	Payee addres	s; City;	State; 2	Zin Cod	de				
	\$373.10		1920 L St. N	-	Ototto, .	p					
	φ0.0.10		1020 2 00 1								
			Washington	DC 20026							
		١				1.	<i></i>				
	PURPOSE OF	1		e Categories listed at t	ne top of this schedu	ule)	(a)	Description Check if travel of	nutei	de of Teyas Com	nplete Schedule T.
	EXPENDITURE		Fees							officeholder living	
											ng fees period 10/4-
								12/13/24		·	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Offi	ice soug	ght			Office he	eld
	expenditure to benefit C/OI					5	-				
\vdash											
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
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: 15/27 Rpt: 52/82	Birdwell, Brian D. (The Honorable) 00062137
4	Date	5 Payee name
	07/01/2024	Ross Fischer Law, PLLC
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 430 Old Fitzhugh, No. 7 Dripping Springs, TX 78620
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign legal services
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/01/2024	Ross Fischer Law, PLLC
	Amount (\$) \$1,693.00	Payee address; City; State; Zip Code 430 Old Fitzhugh, No. 7
	DUDDOOF	Dripping Springs, TX 78620
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign legal services
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/01/2024	Payee name Ross Fischer Law, PLLC
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 430 Old Fitzhugh, No. 7
		Dripping Springs, TX 78620
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign legal services
	Complete ONLY if direct expenditure to benefit C/O	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 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 The Instruction Guide	Salaries/V	Vages	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission F	ilore)
1	, -			hla)			•	00062137	(Ethics Commission F	ileis)
	Sch: 16/27 Rpt: 53/82		ian D. (The Honora	wie)				00002137		
4	Date	5 Payee name								
	10/01/2024	Ross Fisch	er Law, PLLC							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$1,000.00	430 Old Fit	zhugh, No. 7							
		Dripping S _l	orings, TX 78620							
8	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Legal Serv		,		Check if travel	outsi	de of Texas. Com	olete Schedule T.	
	LAI LINDITORE					\Box		officeholder living	expense	
						campaign leg	jai :	services		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sou	ıght			Office he	eld	
	experience to benefit of or	·								
	Date	Payee name								
	11/01/2024	Ross Fisch	er Law, PLLC							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$1,000.00	430 Old Fit	zhugh, No. 7							
		Dripping S _l	orings, TX 78620							
	PURPOSE	(a) Category (S	ee Categories listed at the to	pp of this schedule)	(b)	Description				
	OF EXPENDITURE	Legal Serv	ces					de of Texas. Com		
						campaign leg		officeholder living	expense	
						campaignicg	jui .	oci viceo		
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	l Iaht			Office he	eld	
	expenditure to benefit C/OI				. 9					
-	Date	Dayes name								
	12/08/2024	Payee name	er Law, PLLC							
			<u> </u>							
	Amount (\$)	Payee addre	•	State; Zip Co	ode					
	\$1,000.00	430 Old Fit	zhugh, No. 7							
		Dripping Sp	orings, TX 78620							
	PURPOSE OF	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Legal Serv	ces					de of Texas. Com officeholder living		
						campaign leg			expense	
						Jampaignieg	,aı .	J. 11003		
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	laht Iaht			Office he	ald.	
	expenditure to benefit C/OI		iccholuci name	Office Suc	igill			Office He	iu.	

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

	Credit Card Payment	The Instruction Guide explains how to con	-	ete this form.
1	Total pages Schedule F1: Sch: 17/27 Rpt: 54/82	2 FILER NAME Birdwell, Brian D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062137
				00002137
4	Date 12/03/2024	5 Payee name Senate Ladies Club		
6	Amount (\$) \$2,750.00	7 Payee address; City; State; Zip Coo P.O. Box 12068 Capitol Station Austin, TX 78711	е	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tickets for Senate Ladies Club Pre-Session Dinner
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date	Payee name		
	10/10/2024	Somervell County Republican Party		
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Coo P.O. Box 3104 Glen Rose, TX 76043	e	
_	DUDDOGE		1- \	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	D)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense sponsorship support
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date 07/23/2024	Payee name Texans for Medical Freedom		
	Amount (\$) \$500.00	Payee address; City; State; Zip Coo P.O. Box 175272 Arlington, TX 76003	e	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense sponsorship support
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this	s form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 18/27 Rpt: 55/82	Birdwell, Brian D. (The Honorable)	00062137
4	Date	5 Payee name	•
	09/11/2024	Texas Department of Criminal Justice	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$441.66	P.O. Box 4013	
		Huntsville, TX 77342	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription
	OF EXPENDITURE	Gift/Awards/Memorials Expense	heck if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	·	rheck if Austin, TX, officeholder living expense
		cons	stituent gifts
_	0 1 0 0 1 1 1 1		000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/12/2024	Texas Department of Criminal Justice	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,324.48	P.O. Box 4013	
		Huntsville, TX 77342	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription
	OF EXPENDITURE	Only Wards/Wellionals Expense	heck if travel outside of Texas. Complete Schedule T.
		l —	heck if Austin, TX, officeholder living expense Stituent gifts
		Cons	situent gitts
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	9	Cinico Hold
	Date	Payee name	
	09/23/2024	Texas Department of Criminal Justice	
	Amount (\$)		
	\$492.54	Payee address; City; State; Zip Code P.O. Box 4013	
	φ492.54	P.O. BOX 4013	
		Liberto illo TV 77040	
		Huntsville, TX 77342	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Desc	
	EXPENDITURE	Only Wards/Memorials Expense	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense
			stituent gifts
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/27 Rpt: 56/82	Birdwell, Brian D. (The Honorable) 00062137
4	Date	5 Payee name
	08/15/2024	Texas Federation of Republican Women PAC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 171146
		Austin, TX 78717
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 Sponsorship support
		Sponsorship support
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	08/28/2024	Texas Home School Coalition
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	P.O. Box 6747
	Ψ1,000.00	1101.56% 01 11
		Lubbock, TX 79493
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		sponsorship support
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/03/2024	Texas State Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.50	P.O. Box 12068
		Capitol Station
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		constituent gift calendars
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 20/27 Rpt: 57/82	2 FILER NAME Birdwell, Brian D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062137
4	Date 10/11/2024	5 Payee name Texas State Senate
6	Amount (\$) \$66.75	7 Payee address; City; State; Zip Code P.O. Box 12068 Capitol Station Austin, TX 78711
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense constituent gift flags
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 12/10/2024	Payee name Texas State Senate
	Amount (\$) \$34.30	Payee address; City; State; Zip Code P.O. Box 12068 Capitol Station Austin, TX 78711
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense constituent gift flags
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/25/2024	Payee name Texas State Senate
	Amount (\$) \$22.55	Payee address; City; State; Zip Code P.O. Box 12068 Capitol Station Austin, TX 78711
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense constituent gift flags
	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

	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: 21/27 Rpt: 58/82	Birdwell, Brian D. (The Honorable) 00062137
4	Date	5 Payee name
	11/07/2024	Texas State Senate
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$111.25	P.O. Box 12068
		Capitol Station
		Austin, TX 78711
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense constituent gift flags
		Constituent gilt liags
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/05/2024	Texas State Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$66.75	P.O. Box 12068
		Capitol Station
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		constituent gift flags
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
F	Date	Payee name
	12/03/2024	Texas State Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	P.O. Box 12068
		Capitol Station
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		constituent gift gavels
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

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

	Credit Gard F dyment	The Instruction Guide explains how to complete this for	rm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 22/27 Rpt: 59/82	Birdwell, Brian D. (The Honorable)	00062137
4	Date	5 Payee name	
	09/25/2024	US Postmaster	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$13,351.81	401 DFW Turnpike	
		Dallas, TX 75260	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descripti	
	EXPENDITURE	Office overhead/Nertical Experise	c if travel outside of Texas. Complete Schedule T. c if Austin, TX, officeholder living expense
		1 	ign postage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	н	
	Date	Payee name	
	07/08/2024	Verizon Wireless	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$253.16	P.O. Box 660108	
	!		
		Dallas, TX 75266	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descripti	
	EXPENDITURE	Onice Overneau/Nental Expense	c if travel outside of Texas. Complete Schedule T. c if Austin, TX, officeholder living expense
	!	1 📙	ign cell phone service
	!		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	Ч	
	Date	Payee name	
	08/06/2024	Verizon Wireless	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.71	P.O. Box 660108	
	!		
	!	Dallas, TX 75266	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descripti	tion
	OF EXPENDITURE	Office Overhead/Rental Expense	if travel outside of Texas. Complete Schedule T.
	LA LIBITORE		r if Austin, TX, officeholder living expense
	!	Campai	gii celi priorie service
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
_			

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

1 Total pages Schedule F1: Sch: 23/27 Rpt: 60/82 Birdwell, Brian D. (The Honorable) 5 Payee name Verizon Wireless 6 Amount (\$) 7 Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Date 10/08/2024 Date 09/06/2024 Candidate/Officeholder name Office sought Office held Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code Categories listed at the top of this schedule) Office sought Office held Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code Categories listed at the top of this schedule) Office sought Office held Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Date ONLY if direct Candidate/Officeholder name Office sought Office held Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF PURPOSE OF Office Note of this schedule) Office Overhead/Rental Expense (b) Description Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it travel outside of Texas. Complete Schedule T. Check it trave
4 Date
O9/06/2024 Verizon Wireless Amount (\$) \$250.71 Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF EXPENDITURE (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. Check if Austin, TX, officeholder living expense campaign cell phone service Candidate/Officeholder name Office sought Office held Date Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense
Amount (\$)
\$250.71 P.O. Box 660108 Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (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. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense campaign cell phone service Date Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF States of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (a) Category (See Categories listed at the top of this schedule) Cotheck if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign cell phone service 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/08/2024 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description (b) Description Check if ravel outside of Texas. Complete Schedule T.
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description
Office Overhead/Rental Expense Office Overhead/Rental Expense Office Overhead/Rental Expense Office Overhead/Rental Expense Office Sought Office held Candidate/Officeholder name Office sought Office held Office held Payee name 10/08/2024 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code \$250.80 P.O. Box 660108 Dallas, TX 75266 (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.
Purpose Purpose Office Overhead/Rental Expense Office of in Austin, TX, officeholder living expense campaign cell phone service Candidate/Officeholder name Office sought Office held Office held Office held Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 Purpose Office Overhead/Rental Expense (b) Description Office Overhead/Rental Expense
9 Complete ONLY if direct expenditure to benefit C/OH Date 10/08/2024 Payee name Verizon Wireless Amount (\$) Payee address; City; State; Zip Code \$250.80 P.O. Box 660108 Dallas, TX 75266 PURPOSE OF SYDENINTLIPE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Check if Austin, 1X, officeholder Inving expense campaign cell phone service Office sought Office held Office held Office held (b) Description Check if travel outside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/08/2024 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF EXPENDITURE (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.
Date Payee name 10/08/2024 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code \$250.80 P.O. Box 660108 PURPOSE OF OF OF Code (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office Overhead/Rental Expense
Date Payee name 10/08/2024 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code \$250.80 P.O. Box 660108 PURPOSE OF OF OF Code (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office Overhead/Rental Expense
Date 10/08/2024
10/08/2024 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF EXPENDITIES (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.
Amount (\$) Payee address; City; State; Zip Code P.O. Box 660108 Dallas, TX 75266 PURPOSE OF EXPENDITURE (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.
\$250.80 P.O. Box 660108 Dallas, TX 75266 PURPOSE OF Office Overhead/Rental Expense (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.
Dallas, TX 75266 PURPOSE OF OF OF OF OF OF COPE OF
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OF OF Office Overhead/Rental Expense OF Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE Office Overnead/Rental Expense Light divide dualide of rexast complete scriedale 1.
Check if Austin, TX, officeholder living expense
campaign cell phone service
campaign con phone service
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH
5. T -
Date Payee name
11/06/2024 Verizon Wireless
Amount (\$) Payee address; City; State; Zip Code
\$255.90 P.O. Box 660108
Dallas, TX 75266
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, 1X, officenoider living expense
campaign cell phone service
Operation ONLY if direct Operation (Office helder name of the Company of the Comp
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Onations 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 Salaries (Contract Labor

e Travel in District
Travel Out of Dis
Contract Labor OTHER (enter a

	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: 24/27 Rpt: 61/82	Birdwell, Brian D. (The Honorable) 00062137						
4	Date	5 Payee name						
	12/06/2024	Verizon Wireless						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$346.41	P.O. Box 660108						
		Dallas, TX 75266						
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.						
		Check if Austin, TX, officeholder living expense campaign cell phone service						
		campaign cen phone service						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·						
_	Data							
	Date	Payee name						
	11/13/2024	Vici Media Group						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$499.59	\$499.59 5101 Bonneville Bend						
		Austin, TX 78744						
	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 campaign website services						
		campaign website services						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
_	Date	Davies same						
	07/15/2024	Payee name Visa						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$822.94	P.O. Box 4521						
		Carol Stream, IL 60197						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Credit Card Payment Credit Card Payment Credit Card Payment						
		Check if Austin, TX, officeholder living expense campaign credit card payment						
		campaigh credit card payment						
_	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 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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.				
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers	s)
	Sch: 25/27 Rpt: 62/82	Birdwell, Brian D. (The Honorable)			00062137		
4	Date	5 Payee name					
	08/06/2024	Visa					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$407.82	P.O. Box 4521					
		Carol Stream, IL 60197					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description				
	OF EXPENDITURE	Credit Card Payment	ш		ide of Texas. Com		
			_		, officeholder living card payme		
			campaign	orcan	oura payme		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld .	
	expenditure to benefit C/OI				000 1	3.0	
	Date	Payee name					
	09/16/2024	Visa					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,934.28	P.O. Box 4521					
	Ψ1,004.20	1.0. 500 4021					
		Carol Stream, IL 60197					
	PURPOSE		Description				
	OF	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Check if tra	vel outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE	Great Gara Fayment	Check if Au	ıstin, TX	, officeholder living	expense	
			campaign	credit	card payme	ent	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought			Office he	eld	
	Date	Payee name					
	10/10/2024	Visa					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,147.95	P.O. Box 4521					
		Carol Stream, IL 60197					
	PURPOSE OF	, ,	Description				
	EXPENDITURE	Credit Card Payment			ide of Texas. Com , officeholder living		
			_		card payme		
			. 0		. , -		
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld	
	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 Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		d above)		
	Croan cara r aymon	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethics Comn	nission Filers)		
	Sch: 26/27 Rpt: 63/82	Birdwell, Brian D. (The Honorable) 00062137			
4	Date	5 Payee name			
	11/10/2024	Visa			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,107.38	P.O. Box 4521			
		Carol Stream, IL 60197			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.			
	LXI LINDITORL	Check if Austin, TX, officeholder living expense			
		campaign credit card payment			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experialitire to beliefit C/Oi				
	Date	Payee name			
	12/05/2024	Visa			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$3,118.73	P.O. Box 4521			
		Carol Stream, IL 60197			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.			
	LAFENDITORE	Check if Austin, TX, officeholder living expense			
		campaign credit card payment			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	09/01/2024	Wildcat Specialty Services			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,415.00	419 S. Shenandoah Drive			
		Latrobe, PA 15650			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Gift/Awards/Memorials Expense			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		retirement gift for TXDPS director			
	Operation ONE VIII	Our stide to 10 ff as had an array of fine			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Transportation Equipment & Related Expense Travel in District Travel Out of District DTHER (enter a category not listed above)	Travel in District Travel Out of Di	Expense Expense	Polling ense Printing	Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	/ -	ense Donations Made By Officeholder/Political	Candidate/Of	
	this form.	complete	e explains how to	The Instruction Guid		yment	Credit Card Pay	
	3 Filer ID 00062137		ahla)	E rian D. (The Honor	2 FILER NAME	I	Total pages S Sch: 27/27 F	
						· .		
					5 Payee name Youth Conn	I	Date 08/16/2024	
		:ode	State; Zip (ess; City;	7 Payee addres		Amount (\$)	<u> </u>
		Jouc	State, Zip C	0984	P.O. Box 20	\$500.00	runount (\$\psi\$)	
		1			Waco, TX 76			
fficeholder living expense	Description Check if travel outside of Texas. Com Check if Austin, TX, officeholder living		op of this schedule)	See Categories listed at the t	(a) Category _{(Se} Advertising I		PURPOSI OF EXPENDITU	3
Office held	Office h	ought	Office so	ficeholder name		<u>NLY</u> if direct to benefit C/OH	Complete <u>ON</u> expenditure to)

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	3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 1/13 Rpt: 65/82	Birdwell, Brian D. (The Honorable)		(00062137			
4 CREDIT CARD ISSUER		ncial institution isa	5 TOTAL OF UNIT EXPENDITURES CHARGED TO A CARD	s s	\$	1,169.3	37	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	Card Issuer F	Paid			
	\$328.46	11/15/2024	12/13/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	;	City,	State,	Zip Code	
	Austin Land & Cattle		5510 S I-35 Fron	ntage Rd				
			Austin, TX 78745					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description					
X Political	Food/Beverage Exper		officeholder staff	dinner				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ıle T. Check if Austin, TX, officeholder living expense					
9 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 C	Card Issuer F	Paid			
	\$362.64	08/07/2024	09/17/2024					
PAYEE	(a) Payee name		(b) Payee address;	,	City,	State,	Zip Code	
	Capitol Extension G	Gift Shop	1400 Congress Ave, E1 005					
	(-) 0-1		Austin, TX 78701	<u> </u>				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description gift for departing staff member					
X Political	Gift/Awards/Memorial	ls Expense	girt for departing	stan mem	DEI			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check	if Austin, TX, of	fficeholder living exp	ense		
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 C 12/13/2024	Card Issuer F	Paid			
	\$378.88	10/30/2024	12/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	;	City,	State,	Zip Code	
	Conital Extension (Sift Chan	1400 Congress A	Ave, E1 00	5			
	Capitol Extension G	iπ Snop						
			Austin, TX 78701	1				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
l <u> </u>	Gift/Awards/Memorials Expense			gift for departing staff member				
X Political								
Non-Political	(*)	of Texas. Complete Schedule T.						
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

1. Total pages Schedule F4: 2 FILER NAME Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October 1870 Sch: 2/13 Rpt: 66/82 Filer (0 (Ethics Commission Files) October (0		The Instr	uction Guide explains how	to complete this form.				
Sure Name of financial institution See previous San Total OF UNITEMIZED CHARGED TO A CREDIT CARD CHARGED TO A CREDIT	1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
SSUER See P-VIOLS CHARGED TO A CREDIT CARD CARGO	Sch: 2/13 Rpt: 66/82	Birdwell, Brian D. (T	he Honorable)		00062137			
Sa, 839.10 12/23/2024	1			EXPENDITURES CHARGED TO A CREDIT		1,169.3	37	
PAYEE (a) Payee name	6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
Four Seasons Hotel Austin, TX 78701 (a) Category (Serc Categories listed at the top of this schedule) Travel Out of District Form Payment Form Candidate/Officeholder name Office Sought Office holder constituent lodging for swearing in ceremony Office hold Office holder living expense Office Overhead/Rental Expense Office sought Office hold Office hold Office hold Office hold Office holder living expense Office holder living expen		\$3,839.10	12/23/2024					
Four Seasons Hote Austin, TX 78701	7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
Sex Part Complete Only For the complete Schedule Complete Schedule Complete Only For the complete Schedule Complete Schedule Complete Schedule Complete Schedule Complete Schedule Complete Only For the complete Schedule Complete Schedule Complete Only For the complete Schedule Complete Schedule Complete Only For the complete Schedule		Four Seasons Hote	I	98 San Jacinto Blvd				
Ciser Categories Isted at the top of this schedule Travel Out of District Travel Out of District Travel Out of District Cicer Check if travel outside of Texas. Complete Schedule T. Check if Austin, Tx, officeholder living expense Candidate/Officeholder name Office sought Office held				ļ				
Payment Candidate/Officeholder name Office sought Officeholder living expense			of this schedule)	` '				
9 Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged \$46.05 (b) Date of Charge 08/09/2024 PAYEE (a) Payee name Google (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (a) Category (See Categories listed at the top of this schedule T. Check if Austin, TX, officeholder living expense PAYMENT (a) Amount Charged \$46.05 (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (b) Pescription campaign email service (c) Description Campaign email service (d) Category (See Categories listed at the top of this schedule T. Check if Austin, TX, officeholder living expense PAYMENT (a) Amount Charged (b) Date of Charge 08/06/2024 PAYMENT (a) Amount Charged (b) Date of Charge 08/06/2024 (b) Date of Charge 09/17/2024 (c) Date(s) Credit Card Issuer Paid 09/17/2024 (d) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (a) Amount Charged 08/06/2024 (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (a) Amount Charged 08/06/2024 (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (c) Date(s) Credit Card Issuer Paid 09/17/2024 (d) Description campaign email service (d) Description campaign email service (o) Description campaign email service (o) Check if tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	l <u> </u>	Travel Out of District			dging for swear	ring in ce	remony	
PAYMENT (a) Amount Charged \$46.05 (b) Date of Charge 07/01/2024 (c) Date(s) Credit Card Issuer Paid 08/09/2024 PAYEE (a) Payee name Google (a) Category Gee Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (a) Category Gee Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description campaign email Service (c) Check if ravel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office sought (c) Date(s) Credit Card Issuer Paid Office held PAYMENT (a) Amount Charged (b) Date of Charge 08/06/2024 (b) Date of Charge 09/17/2024 (c) Date(s) Credit Card Issuer Paid O9/17/2024 (d) Amount Charged 1600 Amphitheater Pkwy. Google (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (d) Date(s) Credit Card Issuer Paid O9/17/2024 (b) Date(s) Credit Card Issuer Paid O9/17/2024 (c) Date(s) Credit Card Issuer Paid O9/17/2024 (c) Date(s) Credit Card Issuer Paid O9/17/2024 (d) Date(s) Credit Card Issuer Paid O9/17/2024 (e) Date(s) Credit Card Issuer Paid O9/17/2024 (f) Date(s) Credit Card Issuer Paid O9/17/2024 (b) Date(s) Credit Card Issuer Paid O9/17/2024 (d) Date(s) Credit Card Issuer Paid O9/17/2024 (e) Date(s) Credit Card Issuer Paid O9/17/2024 (f) Date(s) Credit Card Issuer Paid O9/17/20	Non-Political	ical (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, or			, officeholder living expense			
PAYMENT (a) Amount Charged \$46.05 (b) Date of Charge 07/01/2024 (c) Date(s) Credit Card Issuer Paid 08/09/2024 (d) Payee andres; City, State, Zip Code 1600 Amphitheater Pkwy. (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense PURPOSE OF EXPENDITURE Q Office Overhead/Rental Expense	9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
### Suppose of Expenditure to benefit C/OH PAYEE (a) Payee name (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. Mountain View, CA 94043 (b) Description campaign email service (c) Complete Overhead/Rental Expense (c) Complete Overhead/Rental Expense (d) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (d) Description campaign email service (expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (d) 99/17/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code (a) Category (a) Category (see Categories listed at the top of this schedule) (b) Payee address; City, State, Zip Code (b) Description (campaign email service (a) Category (see Categories listed at the top of this schedule) (b) Description (campaign email service (c) Contect if travel outside of Texas. Complete Schedule T. Campaign email service	expenditure to benefit C/OH							
PURPOSE OF EXPENDITURE (a) Payee name Google (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. Mountain View, CA 94043 (b) Description campaign email service (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office Sought PAYMENT (a) Amount Charged \$46.05 (b) Date of Charge 09/17/2024 (c) Date(s) Credit Card Issuer Paid 09/17/2024 PAYEE (a) Payee name Google (b) Date of Charge 09/17/2024 (c) Date(s) Credit Card Issuer Paid 09/17/2024 PURPOSE OF EXPENDITURE Ophitical Oph	PAYMENT	(a) Amount Charged	(b) Date of Charge		er Paid			
Google Complete C		\$46.05	07/01/2024	08/09/2024				
PURPOSE OF EXPENDITURE A Category Cise Categories listed at the top of this schedule) Office Overhead/Rental Expense	PAYEE (a) Payee name			(b) Payee address;	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE		Google		1600 Amphitheater Pkwy.				
Campaign email service				Mountain View, CA 94043	3			
Office Overhead/Rental Expense Somplete ONLY if direct expenditure to benefit C/OH		1 ' ' '		(b) Description				
Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged \$46.05 (b) Date of Charge 09/17/2024 PAYEE (a) Payee name Google (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. Google Mountain View, CA 94043 PURPOSE OF EXPENDITURE X Political Non-Political (c) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (c) Date(s) Credit Card Issuer Paid 09/17/2024 (d) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (b) Description campaign email service (b) Description campaign email service (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name Office sought Office held	l <u> </u>	1		campaign email service				
expenditure to benefit C/OH PAYMENT (a) Amount Charged \$46.05 (b) Date of Charge 09/17/2024 (c) Date(s) Credit Card Issuer Paid 09/17/2024 (d) Payee name (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. Google Mountain View, CA 94043 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct (a) Amount Charged (b) Date of Charge (O9/17/2024) (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. (b) Description campaign email service	Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	ense		
PAYMENT (a) Amount Charged \$46.05 (b) Date of Charge 09/17/2024 (c) Date(s) Credit Card Issuer Paid 09/17/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. Google Mountain View, CA 94043 PURPOSE OF EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (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 sought Office held	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
PAYEE (a) Payee name Google (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. Mountain View, CA 94043 (b) Description campaign email service (b) Payee address; City, State, Zip Code 1600 Amphitheater Pkwy. Mountain View, CA 94043 (b) Description campaign email service (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 sought Office beld	expenditure to benefit C/OH							
Google Google 1600 Amphitheater Pkwy.	PAYMENT		.,		r Paid			
Google Mountain View, CA 94043	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political Non-Political Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held				1600 Amphitheater Pkwy				
PURPOSE OF EXPENDITURE X Political Check if travel outside of Texas. Complete Complete Office Of		Google						
EXPENDITURE See Categories listed at the top of this schedule)				Mountain View, CA 94043	3			
Office Overhead/Rental Expense Non-Political Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name Office sought Office held			of this schodula)	` '				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	l <u> </u>	Office Overhead/Rental Expense			campaign email service			
<u> </u>	Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	le T. Check if Austin, TX, officeholder living expense				
	· ·	Candidate/Officeholder	name Office	e sought	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 (Ethio	cs Commis	sion Filers)			
	Sch: 3/13 Rpt: 67/82	Birdwell, Brian D. (The Honorable)			00062137					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	1,169.3	37			
6	PAYMENT	(a) Amount Charged \$46.05	(b) Date of Charge 09/01/2024	(c) Date(s)) Credit Card Issue 124	r Paid					
7	PAYEE	(a) Payee name Google			address; phitheater Pkwy. n View, CA 94043		State,	Zip Code			
8	PURPOSE OF EXPENDITURE X Political	l ' · · ·	ries listed at the top of this schedule) verhead/Rental Expense campaign email service								
	Non-Political		of Texas. Complete Schedule T.	_			ense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	expenditure to benefit C/OH		I	T							
	PAYMENT	(a) Amount Charged \$46.05	(b) Date of Charge 10/01/2024	(c) Date(s)) Credit Card Issue 124	r Paid					
	PAYEE (a) Payee name Google				address; phitheater Pkwy. n View, CA 94043		State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$46.05	(b) Date of Charge 11/01/2024	(c) Date(s)) Credit Card Issue 124	r Paid					
	PAYEE	(a) Payee name Google	•		address; phitheater Pkwy. n View, CA 94043		State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Descrip campaig	n email service							
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
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/Wages/Contract Labor

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Birdwell, Brian D. (The Honorable) Sch: 4/13 Rpt: 68/82 00062137 **CREDIT CARD** Name of financial institution **TOTAL OF UNITEMIZED** 1,169.37 **EXPENDITURES ISSUER** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 12/01/2024 \$46.05 PAYEE (a) Payee name (b) Payee address; Citv. State. Zip Code 1600 Amphitheater Pkwy. Google Mountain View, CA 94043 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) campaign email service Office Overhead/Rental Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 08/09/2024 \$100.00 07/03/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 212 Temple Hall Highway Granbury Self Storage Granbury, TX 76049 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) campaign materials storage fee Office Overhead/Rental Expense x Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (c) Date(s) Credit Card Issuer Paid (b) Date of Charge 09/17/2024 \$100.00 08/04/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 212 Temple Hall Highway Granbury Self Storage Granbury, TX 76049 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) campaign materials storage fee Office Overhead/Rental 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 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: 5/13 Rpt: 69/82	Birdwell, Brian D. (1	The Honorable)			00062137		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	1,169.3	37
6	PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 09/03/2024	(c) Date(s) 10/11/20) Credit Card Issuer 24	Paid		
7	PAYEE	(a) Payee name Granbury Self Stora	age		ple Hall Highway	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	r, TX 76049 otion n materials storaç	ge fee		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living			ense	
9 Complete ONLY if direct candidate/Officeholder name Office expenditure to benefit C/OH				e sought		Office held		
	PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 10/03/2024	(c) Date(s)) Credit Card Issuer 24	Paid		
	Granbury Self Storage			ple Hall Highway	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	r, TX 76049 otion n materials storaç	ge fee		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 11/04/2024	(c) Date(s) 12/13/20) Credit Card Issuer 24	Paid		
	PAYEE	(a) Payee name Granbury Self Stora	age	(b) Payee address; 212 Temple Hall Highway Granbury, TX 76049		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip campaign	otion n materials storaç	ge fee		
	Non-Political	(8)				officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ĺ								

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 Commiss	sion Filers)	
Sch: 6/13 Rpt: 70/82	Birdwell, Brian D. (The Honorable)		00062137			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	1,169.3	37	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$100.00	12/03/2024					
7 PAYEE	(a) Payee name Granbury Self Stora	age	(b) Payee address; 212 Temple Hall Highway	City,	State,	Zip Code	
			Granbury, TX 76049				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	(b) Description	_			
X Political	Office Overhead/Rent		campaign materials stora	ge fee			
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 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			
	\$504.00	11/20/2024	12/13/2024				
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code	
	Greater Waco Chai	m. of Comm.	101 S 3rd St				
			Waco, TX 76701				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description annual membership dues				
X Political	1 003						
Non-Political	(c) Check if travel outside	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			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$63.38	(b) Date of Charge 07/01/2024	(c) Date(s) Credit Card Issuel 08/09/2024	r Paid			
PAYEE	(a) Payee name	L	(b) Payee address;	City,	State,	Zip Code	
	Hill Country Springs	S	P.O. Box 2220				
			Manchaca, TX 78652				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	EXPENDITURE (See Categories listed at the top of this so		water service for Austin of	ffice			
X Political	X Political Office Overhead/Rental Expense						
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica			-	THER (enter a category	not listed at	oove)	
		ruction Guide explains how	to complete this form.	1			
1 Total pages Schedule F4:				3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 7/13 Rpt: 71/82	Birdwell, Brian D. (1	Γhe Honorable)		00062137			
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED		1 100 0	\ 7	
ISSUER	see pr	revious	EXPENDITURES CHARGED TO A CREDIT	. \$	1,169.3	37	
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$126.85	08/06/2024	09/17/2024				
	Ψ120.03	00/00/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	(-))		P.O. Box 2220	, ,			
	Hill Country Springs	5	1 .O. BOX 2220				
			Manchaca, TX 78652				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	water service for Austin o	ffice			
X Political	Office Overhead/Rent	tal Expense	Water corvice for 7 tactiff c				
│			<u> </u>				
	(c) Check in days desired in Texas. Complete concedite 1.			, officeholder living expe	ense		
9 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			
	\$83.14	09/03/2024	10/11/2024				
PAYEE	PAYEE (a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Lill Country Continue	_	P.O. Box 2220				
	Hill Country Springs						
			Manchaca, TX 78652				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		water service for Austin o	ffice			
X Political	omee overnead/item	Lar Experioe					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	nse		
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			
	\$71.12	10/01/2024	11/11/2024				
	'						
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code	
			P.O. Box 2220				
	Hill Country Springs	5					
			Manchaca, TX 78652				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		water service for Austin o	ffice			
X Political	Office Overhead/Rent	aı Expense					
Non-Political	(a) Chook if traval autoid-	of Toyon Complete Cahadul - T	Chook if Asseting TV	officeholder living sure	200		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held						
Complete ONLY if direct expenditure to benefit C/OH	Sandidate/Officeriolder	name Office	o oougiit	Omce neiu			
experience 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 thi	s form.		,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 8/13 Rpt: 72/82	Birdwell, Brian D. (1	Γhe Honorable)			00062137		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	1,169.3	37
6 PAYMENT	(a) Amount Charged \$54.63	(b) Date of Charge 11/01/2024	(c) Date(s) C 12/13/2024	redit Card Issuer 1	Paid		
7 PAYEE	(a) Payee name Hill Country Springs	5	(b) Payee address; City, State, P.O. Box 2220 Manchaca, TX 78652			Zip Code	
	(a) Oata wa m						
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description	fice			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	name Office	e sought		Office held			
PAYMENT	(a) Amount Charged \$115.37	(b) Date of Charge 12/02/2024	(c) Date(s) C	redit Card Issuer	Paid		
PAYEE	PAYEE (a) Payee name (b) Payee address; P.O. Box 2220			220	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Manchaca, TX 78652 (b) Description water service for Austin office				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	<u> </u>	e sought	<u> </u>	Office held		
PAYMENT	(a) Amount Charged \$283.23	(b) Date of Charge 11/25/2024	(c) Date(s) C 12/13/2024	redit Card Issuer ‡	· Paid		
PAYEE	(a) Payee name Hilton Garden Inn		(b) Payee ad 2020 Richn Arlington, V	nond Hwy	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description officeholder lodging for meetings with McLennan County College Scholars				County
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		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 Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4	2 FILER NAME			3 Filer ID (Et	hics Commiss	ion Filers)		
Sch: 9/13 Rpt: 73/82	Birdwell, Brian D. (The Honorable)		00062137				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$	1,169.3	7		
6 PAYMENT	(a) Amount Charged \$363.02	(b) Date of Charge 09/17/2024	(c) Date(s) Credit Card Issu 10/11/2024	er Paid				
7 PAYEE	(a) Payee name Honey Baked Ham		(b) Payee address; 9029 Research Blvd Austin, TX 78758	City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description	nbers at commi	ers at committee meeting			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T.	X, officeholder living e	officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Offic	e sought	Office held				
PAYMENT	(a) Amount Charged \$150.91	(b) Date of Charge 09/19/2024	(c) Date(s) Credit Card Issu 10/11/2024	er Paid				
PAYEE	(a) Payee name Jersey Mike's		(b) Payee address; 1000 East 41 St Austin, TX 78751	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description lunch for legislative members at committee meeting					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T.	X, officeholder living e	xpense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder	r name Offic	e sought	Office held				
PAYMENT	(a) Amount Charged \$251.65	(b) Date of Charge 11/14/2024	(c) Date(s) Credit Card Issu 12/13/2024	er Paid				
PAYEE	(a) Payee name Jersey Mike's	•	(b) Payee address; 1000 East 41 St Austin, TX 78751	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense			(b) Description lunch for legislative members at committee meeting					
Non-Political	(c) Check if travel outside	_	X, officeholder living e	xpense				
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder	r name Offic	e sought	Office held				
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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeriolder/Folitica		ruction Guide explains how	-	THEN (effici a category	/ Hot listed a	bove)
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 10/13 Rpt: 74/82	Birdwell, Brian D. (1	The Honorable)		00062137		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	1,169.3	37
6	PAYMENT	(a) Amount Charged \$802.44	(b) Date of Charge 08/06/2024	(c) Date(s) Credit Card Issuel 09/17/2024	r Paid		
7	PAYEE	(a) Payee name Lapel Pins Plus		(b) Payee address; 5840 Red Bug Lake Rd. Suite 35 Winter Springs, FL 32708	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description challenge coins for campa	aign		
	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.	—	officeholder living expe	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
е	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged \$418.00	(b) Date of Charge 11/01/2024	(c) Date(s) Credit Card Issuel 12/13/2024	r Paid		
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		Louisiana Trophies		1332 Texas Ave			
				Alexandria, LA 71301			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description gifts for constituents			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$44.43	(b) Date of Charge 11/05/2024	(c) Date(s) Credit Card Issue 12/13/2024	r Paid		
	PAYEE	(a) Payee name Louisiana Trophies		(b) Payee address; 1332 Texas Ave	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		Alexandria, LA 71301 (b) Description gifts for constituents			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expe	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
l							

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: 11/13 Rpt: 75/82	Birdwell, Brian D. (The Honorable)				00062137				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	1,169.3	37		
6	PAYMENT	(a) Amount Charged \$84.32	(b) Date of Charge 08/13/2024	(c) Date(s) C 09/17/2024	Credit Card Issuer 4	Paid				
7	PAYEE	(a) Payee name Mail Chimp			S St, Suite 404	City,	State,	Zip Code		
Ļ	Atlanta, GA 30318									
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description political ad						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	X, officeholder living expense				
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
€	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$84.32	(b) Date of Charge 09/13/2024	(c) Date(s) C 10/11/2024	Credit Card Issuer 4	[*] Paid				
	PAYEE	(a) Payee name	I	(b) Payee ac	ldress;	City,	State,	Zip Code		
	Mail Chimp			512 Means	S St, Suite 404					
L				Atlanta, GA						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description political ad						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		7 Check if Austin TX	officeholder living exp	ense			
H	Complete ONLY if direct	Candidate/Officeholder	·	e sought	Oneok ii zidatiii, 174,	Office held				
6	expenditure to benefit C/OH			. .						
	PAYMENT	(a) Amount Charged \$84.32	(b) Date of Charge 10/13/2024	(c) Date(s) C 11/11/2024	Credit Card Issuer 4	Paid				
	PAYEE	(a) Payee name Mail Chimp		(b) Payee ac 512 Means	ldress; s St, Suite 404	City,	State,	Zip Code		
			Atlanta, GA	30318						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description political ad						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officeriolder/Folitica		ruction Guide explains how	-	TTIER (enter a category	,	5040)	
1 Total pages Schedule F4:	ule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 12/13 Rpt: 76/82	Birdwell, Brian D. (1	Γhe Honorable)		00062137			
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	1,169.3	37	
6 PAYMENT	(a) Amount Charged \$84.32	(b) Date of Charge 11/13/2024	(c) Date(s) Credit Card Issue 12/13/2024	r Paid			
7 PAYEE	(a) Payee name Mail Chimp		(b) Payee address; 512 Means St, Suite 404	City,	State,	Zip Code	
8 PURPOSE OF	(a) Category		Atlanta, GA 30318 (b) Description				
EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)	political advertising				
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 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			
	\$84.32	12/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Mail Chimp		512 Means St, Suite 404				
			Atlanta, GA 30318				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description political advertising				
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$166.67	(b) Date of Charge 11/12/2024	(c) Date(s) Credit Card Issue 12/13/2024	r Paid			
PAYEE	(a) Payee name McLennan Cty. Rep	o. Women	(b) Payee address; 113 S University Parks Di Waco, TX 76706	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description tickets for Doc Anderson	farewell reception	on		
Non-Political	on-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct 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 (Eth	3 Filer ID (Ethics Commission Filers)			
	Sch: 13/13 Rpt: 77/82	Birdwell, Brian D. (The Honorable)				00062137			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$	1,169.3	37	
6	PAYMENT	(a) Amount Charged \$302.78	(b) Date of Charge 08/08/2024	(c) Date(s) 09/17/20) Credit Card Issue 24	er Paid			
7	PAYEE	(a) Payee name Santa Rita Cantina		(b) Payee 1206 W S	38th St	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descri		member			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	pense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH	() 1	[(1) D () (0)	100000					
	PAYMENT	(a) Amount Charged \$745.16	(b) Date of Charge 12/08/2024	(c) Date(s) Credit Card Issue	er Pald			
	PAYEE	(a) Payee name Walmart		(b) Payee 735 E Hv		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Descri		nolder staff			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	(, officeholder living ex	pense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$625.94	(b) Date of Charge 10/24/2024	(c) Date(s)) Credit Card Issue 24	er Paid			
	PAYEE	(a) Payee name American Airlines		(b) Payee 1 Skyvie ^o Fort Wor		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descri meetings	otion s with McLennan	County Colleg	je Scholar	'S	
L	Non-Political	(c) X Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	pense		
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
1									

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

SCHEDULE K

_						
	The Instru	ction Guide explains how to complete this form.	ı		ages Schedule K: /4 Rpt: 78/82	
2	FILER NAME		3	Filer ID	(Ethics Commissi	on Filers)
	Birdwell, Bria	an D. (The Honorable)	00062	137		
4	Date 12/10/2024	 Name of person from whom amount is received First National Bank of Granbury Address of person from whom amount is received; City; State; Zip Code 			8 Amount (\$)	\$2,704.92
		Granbury, TX 76048 7 Purpose for which amount is received	olitic	al contr	ibution returned to fi	ler
		interest earned on campaign account				
	Date 11/10/2024	Name of person from whom amount is received First National Bank of Granbury Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$2,795.08
		Granbury, TX 76048				
		Purpose for which amount is received	olitic	al conti	ribution returned to fi	ler
	Date	Name of person from whom amount is received			Amount (\$)	
	10/10/2024	First National Bank of Granbury				\$2,704.92
		Address of person from whom amount is received; City; State; Zip Code Granbury, TX 76048				
		<u> </u>	olitic	al conti	Iribution returned to fi	ler
		interest earned on campaign account				
	Date	Name of person from whom amount is received			Amount (\$)	
	09/10/2024	First National Bank of Granbury				\$2,795.08
		Address of person from whom amount is received; City; State; Zip Code				
		Granbury, TX 76048				
		Purpose for which amount is received	olitic	al conti	ibution returned to fi	ler
	Date	Name of person from whom amount is received			Amount (\$)	
	08/10/2024	First National Bank of Granbury				\$2,795.09
		Address of person from whom amount is received; City; State; Zip Code	•••••			
		Granbury, TX 76048				
		Purpose for which amount is received	olitic	al conti	ribution returned to fi	ler
						-

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 2/4 Rpt: 79/82	
2	FILER NAME		3	Filer I	D (Ethics Commission	Filers)
	Birdwell, Bria	an D. (The Honorable)		0006	2137	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	07/10/2024	First National Bank of Granbury				2,704.91
	0111012024	1				.,104.01
		6 Address of person from whom amount is received; City; State; Zip Code				
		Granbury, TX 76048				
			11.11			
		<u> </u>	politi	cal con	tribution returned to filer	
		interest earned on campaign account				
	Date	Name of person from whom amount is received			Amount (\$)	
	07/31/2024	First National Bank of Granbury				\$54.03
		Address of person from whom amount is received; City; State; Zip Code			Ϊ	
		Granbury, TX 76048				
		Purpose for which amount is received	politi	cal con	tribution returned to filer	
		interest earned on campaign account				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/30/2024	First National Bank of Granbury			(4)	\$56.42
		Address of person from whom amount is received; City; State; Zip Code				,,,,,,
		Address of person from whom amount is received, City, State, Zip Code				
		Granbury, TX 76048				
		Purpose for which amount is received Check if	politi	cal con	tribution returned to filer	
		interest earned on campaign account				
	Data				Amount (th)	
	Date	Name of person from whom amount is received			Amount (\$)	ቀ ደፍ በበ
	09/30/2024	First National Bank of Granbury			.	\$56.99
		Address of person from whom amount is received; City; State; Zip Code				
		Granbury, TX 76048				
		-	11.11			
		<u> </u>	politi	cal con	tribution returned to filer	
		interest earned on campaign account				
	Date	Name of person from whom amount is received			Amount (\$)	
	10/31/2024	First National Bank of Granbury				\$85.47
		Address of person from whom amount is received; City; State; Zip Code			1	
		Granbury, TX 76048				
		Purpose for which amount is received	politi	cal con	tribution returned to filer	
		interest earned on campaign account				

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: 3/4 Rpt: 80/82	
2	FILER NAME		3	Filer ID	(Ethics Commission F	-ilers)
	Birdwell, Bria	an D. (The Honorable)		00062	2137	
4	Date 11/29/2024	 Name of person from whom amount is received First National Bank of Granbury Address of person from whom amount is received; City; State; Zip Code 			8 Amount (\$)	5114.99
		Granbury, TX 76048				
			olitic	cal cont	I ribution returned to filer	
		interest earned on campaign account	ontic	our corn	nouter retained to mer	
	Date	Name of person from whom amount is received			Amount (\$)	
	12/31/2024	First National Bank of Granbury			4	162.95
		Address of person from whom amount is received; City; State; Zip Code			1	
		Cranbury TV 70040				
		Granbury, TX 76048			with this is not true and to file a	
		Purpose for which amount is received Check if printerest earned on campaign account	Olitio	cai cont	ribution returned to filer	
					T	
	Date 07/08/2024	Name of person from whom amount is received			Amount (\$)	ታ ር 17
	07/08/2024	Independent Bank				\$9.17
		Address of person from whom amount is received; City; State; Zip Code				
		McKinney, TX 75070				
		Purpose for which amount is received	olitio	cal cont	ribution returned to filer	
		interest earned on campaign account				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/08/2024	Independent Bank				\$8.61
		Address of person from whom amount is received; City; State; Zip Code]	
		McKinney, TX 75070				
			olitio	cal cont	I ribution returned to filer	
		interest earned on campaign account				
	Date	Name of person from whom amount is received			Amount (\$)	
	09/09/2024	Independent Bank				\$8.57
		Address of person from whom amount is received; City; State; Zip Code			1	
		Makingay TV 75070				
		McKinney, TX 75070	المالما	201 625	ribution returned to file.	
		Purpose for which amount is received Check if printerest earned on campaign account	Olitio	cai cont	ribution returned to filer	
		interest carried on campaign account				

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 81/82 2 FILER NAME Filer ID (Ethics Commission Filers) Birdwell, Brian D. (The Honorable) 00062137 8 Amount (\$) Date 5 Name of person from whom amount is received 10/08/2024 Independent Bank \$8.24 6 Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070 Purpose for which amount is received Check if political contribution returned to filer interest earned on campaign account Name of person from whom amount is received Amount (\$) Date 11/11/2024 Independent Bank \$9.43 Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070 Purpose for which amount is received Check if political contribution returned to filer interest earned on campaign account Date Name of person from whom amount is received Amount (\$) 12/09/2024 Independent Bank \$12.92 Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070 Purpose for which amount is received Check if political contribution returned to filer interest earned on campaign account

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: 82/82 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Birdwell, Brian D. (The Honorable) 00062137 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee American Airlines 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule D Schedule F1 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 Birdwell, Brian 8 Departure city or name of departure location 11/23/2024 9 Destination city or name of destination location 11/23/2024 Washington, DC 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Commercial Airplane meetings with McLennan County College Scholars