#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080619 3 COMMITTEE NAME **OFFICE USE ONLY** Charter Schools Now PAC Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 3005 S. Lamar Blvd Date Hand-delivered or Date Postmarked Suite D109 #250 Change of Address Austin, TX 78704 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Rex NAME NICKNAME LAST **SUFFIX** Gore STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1304 W. Oltorf St. STREET **ADDRESS** (Residence or Business) Austin, TX 78704 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3005 S. Lamar Blvd MAILING **ADDRESS** Suite D109 #250 Austin, TX 78704 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 694-7777 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME		13 Filer ID	(Ethics Commission Filers)	
Charter Schools Now PAC		00080619	,	
4 COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Caroline Harris Davila State R	epresentative		
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
Measures  (Describe by date and location)	A. Supported			
of election and nature of issue				
	B. Opposed			
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
TOTALS PLEDGES, LOANS CONTRIBUTIONS	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	0.00	
	CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,941.19	
EXPENDITURE 3. TOTAL UNITEMIZ TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES			
4. TOTAL POLITIC				
CONTRIBUTION 5. TOTAL POLITICAL OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	408,458.66	
	L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00	
6 AFFIDAVIT		<u> </u>		
	I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.			
		_		
	Rex Signature of Car	Gore	rer	
AFFIX NOTARY STAMP / SEAL ABOVI		npaign measu	i Ci	
Sworn to and subscribed before me, by the said of, 20, to certif	, th	nis the	day	
oi, to cerui	y which, whiless my hand and seal of office.			

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00080619	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	John Lujan State Representative	e	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Lacey Hull State Representative	•	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Marc LaHood State Representa	tive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if				
		applicable, classify by party.)				

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COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Charter Schools Now P	AC				00080619	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Brian Harrison	State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Rafael Anchia	State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Jared Patterso	n State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if					
	applicable, classify by party.)					

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now P	AC			00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Joanne Shofner State Represer	ntative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A Supported	Philip Cortez State Representat	ivο	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Fillip Cortez State Representat	ive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported	Elizabeth Campos State Repres	sentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME							13 Filer ID	(Ethics	Commission Filers
	Charter Schools Now P.	AC						00080619	)	
14	COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this	Candidates (Identify by name or, if applicable, classify by party.)			Barbara Gervin	Hawkins	State I	Representativ	е	
	report if necessary.)									
		2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted						
			B. Oppose	ed						
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ted	Eddie Morales	State Re <sub>l</sub>	present	ative		
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed						
		2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor							
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppor	ted	Josey Garcia S	tate Rep	resenta	tive		
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed						
		2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted						
			B. Oppose	ed						
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Sam Harless State Representat	ive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Charles Cunningham State Rep	resentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Chance Cammigham Chance Hop		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Dennis Paul State Representati	ve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC				00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Angelia Orr Sta	ate Representativ	re	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	1. Candidates	A Supported	Tom Oliverson	State Represent	ativo	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Tom Onversor	State Represent	auve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mike Schofield	State Represent	ative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

	DMMITTEE NAME					
					13 Filer ID	(Ethics Commission Filers)
Ch	narter Schools Now P	AC			00080619	
	OMMITTEE CTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Gene Wu State Representative		
pa	tach lists on plain per to complete this port if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				
	DMMITTEE CTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Paul Dyson State Representativ	re	
pa	tach lists on plain per to complete this port if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				
	DMMITTEE CTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Armando Walle State Represen	tative	
pa	tach lists on plain per to complete this port if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if				
		applicable, classify by party.)				

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COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Charter Schools Now P	AC			00080619	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Valoree Swanson State Rep	resentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Will Metcalf State Represent	ative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Will Meteur State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted     (Identify by name or, if)				
	applicable, classify by party.)	<u> </u>			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Brent Money State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted     (Identify by name or, if				
	applicable, classify by party.)				

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	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
(	Charter Schools Now Pa	AC			00080619	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Terri Leo Wilson State Represe	ntative	
ŗ	Attach lists on plain paper to complete this eport if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Christian Manuel Hayes State F	Representative	
ŗ	Attach lists on plain paper to complete this eport if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Cody Vasut State Representation	/e	
ŗ	Attach lists on plain paper to complete this eport if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if				
		applicable, classify by party.)	<u> </u>			

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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC				00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Gary Gates	State Representativ	/e	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	1. Candidates	A Supported	Cacil Ball 1r	. State Representat	ive	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Cecii Beli Ji	. State Nepresental	ive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ryan Guille	n State Representat	iive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now P.	AC			00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Todd Hunter State Represe	ntative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	Δ Supported	Katrina Pierson State Repre	scontativo	
	ACTIVITY	(Identify by name or, if		Kalıma Pierson State Repre	esentative	
		applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Oscar Longoria State Repre	esentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				ı	
	COMMITTEL NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00080619	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Richard Pena Raymond State F	Representative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		JM Lozano State Representativ	е	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Sheryl Cole State Representation	/e	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13	Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC				00080619	
,	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Wes Virdell State Repre	esentative		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Richard Hayes State Re	epresentativ	re	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Helen Kerwin State Rep	oresentative		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC				00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Shelby Swans	on State Represe	ntative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	1. Candidates	A Supported	Daniel Aldoro	State Representat	tivo	
	ACTIVITY	(Identify by name or, if		Darliel Aluers	State Representat	live	
		applicable, classify by party.)					
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	James Frank	State Representati	ive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		•	•				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Carrie Isaac State Representation	ve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Brooks Landgraf State Represe	ntative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Brooke Eurograf State Represe		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tom Craddick State Representa	ative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Charter Schools Now Pa	AC				00080619	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Carl Tepper	State Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	1. Candidates	A. Supported	David Lowe	State Representativ	/e	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		David Lowe	State Representativ		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if					
	applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Nate Schatz	ine State Represen	itative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if					
	applicable, classify by party.)					

					Page 19 01 67
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Charter Schools Now P	AC			00080619	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Tony Tinderholt State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	Candidates	A. Supported	A.J. Louderback State Represe	ntative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		71.0. Louderback State Neprese	mauve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted     (Identify by name or, if				
	applicable, classify by party.)	l			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Bryan Hughes State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted     (Identify by name or, if				
	applicable, classify by party.)				

						Page 20 of 67
12 (	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
(	Charter Schools Now Pa	AC			00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Phil King State Senator		
ŗ	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		Measures    (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted				
		(Identify by name or, if applicable, classify by party.)	,			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Tan Parker State Senator	٢	
ŗ	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and	A. Supported			
		nature of issue.)	B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Joan Huffman State Sena	ator	
ŗ	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

					Page 21 of 67
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Charter Schools Now P	AC			00080619	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	)	Juan Hinojosa State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	)			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Donna Campbell State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	)			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Adam Hinojosa State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	)			

					Page 22 of 67
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Charter Schools Now P	AC			00080619	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Brandon Creighton State Senat	or	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Paul Bettencourt State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Angela Paxton State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

						Page 23 of 67
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Charter Schools Now P	PAC				00080619	
14 COMMITTEE ACTIVITY  (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)		Dan Patrick	Lieutenant Goverr	or	
paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Greg Abbott	Governor		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					

### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

			24 of 67				
17 COMMITT Charter S	EE NAME Schools Now PAC	<b>18</b> Filer ID 00080619	(Ethics Commission Filers)				
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 8,941.19				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS						
4.	\$						
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$				
9.	SCHEDULE E: LOANS		\$				
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 251,035.60				
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 3,960.87				
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 6,765.53				
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 25/67	
2	FILER NAME Charter Scho	ools Now PAC			3	Filer ID (Ethics Commission 00080619	on Filers)
4	Date 11/07/2024	<ul> <li>5 Full name of contributor  out-of-star</li> <li>Ay, Fatih</li> <li>6 Contributor address; City; State; Zip Cod</li> </ul>		)	7	Amount of Contribution (\$)	\$26.35
	Dringing agg	Richmond, TX 77406	lo.	Employer (See Instructions	_		
8	CEO	pation / Job title (See Instructions)	9	Harmony Public Schools			
	Date 12/07/2024	Ay, Fatih		)		Amount of Contribution (\$)	\$26.35
	Deinsinal assu	Richmond, TX 77406		Franks on (Cap Instructions	_		
	CEO	pation / Job title (See Instructions)		Employer (See Instructions Harmony Public Schools			
	Date 10/30/2024					Amount of Contribution (\$)	\$5,000.00
	Principal occu	Paradise Valley, AZ 85253 pation / Job title (See Instructions)					
	Retired	pation 7 000 title (occ motivations)		Employer (dee mandenona	')		
	Date 11/22/2024	Bedell, Renelle				Amount of Contribution (\$)	\$5.52
	Principal occu Nonprofit Op	pation / Job title (See Instructions) perations		Employer (See Instructions TPCSA	)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/22/2024 Bedell, Renelle  Contributor address; City; State; Zip Code  Austin, TX 78748					Amount of Contribution (\$)	\$5.52
	Principal occu Nonprofit Op	pation / Job title (See Instructions)		Employer (See Instructions	5)		
		- ··· - ···		55.1			

	MONET	ARY POLITICAL CONT		SCHEDULE A1				
	The Instruc	ction Guide explains how to com	n.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 26/67			
2	FILER NAME Charter Scho	pols Now PAC			3	Filer ID (Ethics Commission 00080619	n Filers)	
4	Date 11/02/2024					Amount of Contribution (\$)	\$52.40	
8	Principal occu	Dallas, TX 75204 pation / Job title (See Instructions)	l <sub>a</sub>	Employer (See Instructions				
0	Superintende		Cityscape Schools	')				
	Date Full name of contributor out-of-state PAC (ID#:)  12/02/2024 Brannon, Leonard  Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$52.40	
	Dallas, TX 75204							
	Principal occu Superintende	pation / Job title (See Instructions) ent k-12		Employer (See Instructions Cityscape Schools				
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$104.48		
		San Antonio, TX 78202						
				Employer (See Instructions Essence Preparatory	5)			
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$104.48		
Principal occupation / Job title (See Instructions) Educator				Employer (See Instructions Essence Preparatory	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  11/12/2024 Celepcikay, Oner  Contributor address; City; State; Zip Code  Sugar Land, TX 77479					Amount of Contribution (\$)	\$104.48	
Principal occupation / Job title (See Instructions)  Sr. Al Engineer / Data Scientist  Employer (See Instructions)  IBM					·)			
	z Liigiilo		<u> </u>					

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 3/6 Rpt: 27/67			
2	FILER NAME Charter Scho	ools Now PAC			3	Filer ID (Ethics Commission 00080619	n Filers)
4	Date 11/04/2024	5 Full name of contributor out-of-state PAC (ID#:) Gieskes, Rebecca 6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
8	Principal occu	Bastrop, TX 78602  upation / Job title (See Instructions)  9 Employer (See Instruction TPCSA					
	Date Full name of contributor out-of-state PAC (ID#:)  12/03/2024 Kanning, Shawn  Contributor address; City; State; Zip Code  Austin, TX 78748					Amount of Contribution (\$)	\$26.35
	Principal occupation / Job title (See Instructions)  Controller  Employer (See Instruction TPCSA						
	Date Full name of contributor out-of-state PAC (ID#:)  11/22/2024 Miller, Amy  Contributor address; City; State; Zip Code			)		Amount of Contribution (\$)	\$1.00
	Dripping Springs, TX 78620  Principal occupation / Job title (See Instructions)  Director of Grassroots Engagement  TPCSA  TPCSA				<u> </u> s)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/22/2024 Miller, Amy  Contributor address; City; State; Zip Code  Dripping Springs, TX 78620				Amount of Contribution (\$)	\$1.00	
	Principal occupation / Job title (See Instructions)  Director of Grassroots Engagement  Employer (See Instruction TPCSA				5)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/17/2024 Nickell, Robert  Contributor address; City; State; Zip Code  Coppell, TX 75019					Amount of Contribution (\$)	\$260.73
	Principal occu Investment E	pation / Job title (See Instructions) anking		Employer (See Instructions Herbert J. Sims	s)		

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instru	ction Guide explains how	1	Total pages Schedule A1: Sch: 4/6 Rpt: 28/67					
2	FILER NAME Charter Scho	ools Now PAC			1	Filer ID (Ethics Commission 00080619	on Filers)		
4	Date 11/08/2024	5 Full name of contributor out-of-state PAC (ID#:) Norton, Julie 6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$26.35		
g	Principal occu	Austin, TX 78723  al occupation / Job title (See Instructions)  9 Employer (See Instructions)							
Ü		cation Admin  KIPP Texas Public Sci							
	Date 11/15/2024	1/15/2024 Salazar, Angel  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.35			
	Kyle, TX 78640								
				Employer (See Instructions TPCSA	5)				
	Date 12/15/2024			)		Amount of Contribution (\$)	\$26.35		
		Kyle, TX 78640							
Principal occupation / Job title (See Instructions)  CRM Admin  Employer (See In TPCSA				Employer (See Instructions TPCSA	s)				
Date  Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$2,604.48				
Principal occupation / Job title (See Instructions) Real Estate				Employer (See Instructions Coldwater Ventures	s)				
	Date Full name of contributor out-of-state PAC (ID#:)  11/07/2024 Wilson, Brent Contributor address; City; State; Zip Code  Midlothian, TX 76065				Amount of Contribution (\$)	\$52.40			
				Employer (See Instructions Life School	s)				

	MONET	ARY POLITICAL CONTRIB		SCHEDULE A1				
	The Instruc	ction Guide explains how to complete	1	Total pages Schedule A1: Sch: 5/6 Rpt: 29/67				
2	FILER NAME Charter Scho	pols Now PAC			3	Filer ID (Ethics Commission 00080619	n Filers)	
4	Date 12/07/2024					Amount of Contribution (\$)	\$52.40	
8	Principal occur Superintende	Midlothian, TX 76065  upation / Job title (See Instructions)  dent  9 Employer (See Instruction Life School						
	Date 11/25/2024					Amount of Contribution (\$)	\$62.23	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired				
	Date 12/25/2024			)	•	Amount of Contribution (\$)	\$62.23	
				Employer (See Instructions	<u> </u> s)			
Retired Rei  Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$52.40			
Austin, TX 78731  Principal occupation / Job title (See Instructions)  Attorney				Employer (See Instructions) Schulman, Lopez, Hoffer & Adelstein LLP				
	Date Full name of contributor out-of-state PAC (ID#:)  12/21/2024 Wood, Justin  Contributor address; City; State; Zip Code  Austin, TX 78731				Amount of Contribution (\$)	\$52.40		
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Schulman, Lopez, Hoffe		Adelstein LLP		
			•					

6 Contributor address; City; State; Zip Code  Rosharon, TX 77583  8 Principal occupation / Job title (See Instructions) Superintendent  Date Full name of contributor		MONETARY POLITICAL CONTRIBUTIONS		so	CHEDULE	A1
Charter Schools Now PAC  4 Date		The Instruction Guide explains how to complete this form.	1			
A Date 11/25/2024  Wright, Julia 6 Contributor address; City; State; Zip Code  Rosharon, TX 77583  8 Principal occupation / Job title (See Instructions) Superintendent  Date 12/25/2024  Full name of contributor out-of-state PAC (ID#:	2		3		Commission	Filers)
Principal occupation / Job title (See Instructions)  Superintendent  Date 12/25/2024  Wright, Julia  Contributor address; City; State; Zip Code  Rosharon, TX 77583  Principal occupation / Job title (See Instructions)  Principal occupation / Job title (See Instructions)	4	Date 5 Full name of contributor out-of-state PAC (ID#:)  11/25/2024 Wright, Julia	7		ution (\$)	\$26.27
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)  12/25/2024 Wright, Julia \$26  Contributor address; City; State; Zip Code  Rosharon, TX 77583  Principal occupation / Job title (See Instructions) Employer (See Instructions)						
12/25/2024 Wright, Julia \$26  Contributor address; City; State; Zip Code  Rosharon, TX 77583  Principal occupation / Job title (See Instructions) Employer (See Instructions)	8		ons)			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)		12/25/2024 Wright, Julia		Amount of Contribu	ution (\$)	\$26.27
		Rosharon, TX 77583				

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 1/31 Rpt: 31/67	Charter Schools Now PAC 00080619						
4 Date	5 Payee name						
11/20/2024	A.J. Louderback Campaign						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$1,000.00	PO Box 1792						
Expenditure from corporate funds	Victoria, TX 77902						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Contributions/Donations Made By  Contributions/Donations Made By  Contributions/Donations Made By						
EXPENDITURE	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
11/20/2024	Adam Hinojosa Campaign						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,000.00	PO Box 18301						
<b>\$2,000.00</b>	1 0 DOX 10001						
Expenditure from corporate funds	Corpus Christi, TX 78480						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Contributions/Donations Made By						
	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
11/20/2024	Angelia Orr for Texas House						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,000.00	PO Box 337						
+2,000.00							
Expenditure from corporate funds	Itasca, TX 76055						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Contributions/Donations Made By						
EXI ENDITORE	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH							

#### SCHEDULE F1

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

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

Fees O
Food/Beverage Expense P
Git/Awards/Memorials Expense P
Legal Services S

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 2/31 Rpt: 32/67	Charter Schools Now PAC 00080619						
4 Date	5 Payee name						
11/20/2024	Armando Walle Campaign						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$1,000.00	4826 Hollybrook Ln.						
Expenditure from corporate funds	Houston, TX 77039						
'	· ·						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description						
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
	Campaign Contribution						
	Sumpaign contribution						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
experientare to benefit 6/6							
Date	Payee name						
11/21/2024	Atchley & Associates LLP						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,270.00	1005 La Posada Dr.						
\$1,270.00	1003 La Posada DI.						
Expenditure from							
corporate funds	Austin, TX 78752-3805						
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.						
EXPENDITORE	Check if Austin, TX, officeholder living expense						
	Accounting Services						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O	H						
Date	Payee name						
12/06/2024	Atchley & Associates LLP						
Amount (\$)	Payee address; City; State; Zip Code						
\$2,587.57	1005 La Posada Dr.						
Evpanditure from							
X Expenditure from corporate funds	Austin, TX 78752-3805						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Consulting Expense  Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Check if Austin, TX, officeholder living expense						
	Accounting Services						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH							

#### SCHEDULE F1

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

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

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

Contributions/ Donations Made By- Candidate/Officeholder/Political Credit Card Payment				Legal S	ards/Memorials E ervices struction Gu	•	Salarie	-	s/Contract Labor		Travel Out of Di OTHER (enter a		ot listed above)
1	Total pages Schedule F1:	2	FILER NAME	:						3	Filer ID	(Ethics (	Commission Filers)
	Sch: 3/31 Rpt: 33/67		Charter Sch		Now PAC						00080619		
4	Date	5	Payee name										
	12/06/2024		Barbara Ge	rvin-H	lawkins for	State Hou	use						
6	Amount (\$)	7	Payee addres	SS;	City;	State	e; Zip	Code					
	\$1,000.00		PO Box 396	602									
	Expenditure from corporate funds		San Antonio	o, TX	78218								
8	PURPOSE	(a)	Category (Se	ee Categ	ories listed at the	e top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Contribution Candidate/0				nittee		=	n, TX	ide of Texas. Con , officeholder livin ribution		lule T.
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	cehold	er name		Office s	ought			Office h	eld	
	Date		Payee name										
	11/20/2024		Brent Mone	y for ٦	Гехаѕ								
	Amount (\$)		Payee addres	ss;	City;	State	e; Zip	Code					
	\$1,000.00		2606 Lee S	t.									
	Expenditure from corporate funds		Greenville,	TX 75	401								
	PURPOSE OF	(a)	Category (Se				hedule)	(b)	Description				
	EXPENDITURE		Contribution			-	nittoo				ide of Texas. Con		lule T.
			Candidate/0	Jilicei	ioidei/Poiit	icai Comi	muee		Check if Austin, TX, officeholder living expense  Campaign Contribution				
									pg				
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	cehold	er name	ı	Office s	ought			Office h	eld	
	Date		Payee name										
	11/20/2024		Brooks Lan	dgraf	Campaign								
	Amount (\$)		Payee addres	ss;	City;	State	e; Zip	Code					
	\$1,000.00		PO Box 131	.46									
	- "												
	Expenditure from corporate funds		Odessa, TX	7976	8			_					
	PURPOSE OF	(a)	Category (Se				hedule)	(b)	Description				
	EXPENDITURE		Contribution Candidate/C				nittaa		브		ide of Texas. Con , officeholder livin		lule T.
			Carialdale/C	JIIICEI	IOIUGI/F UIIL	icai Comi	iiiiiGC		Campaign Co			,	
									. •				
	Complete ONLY if direct		Candidate/Offi	cehold	er name		Office s	ought			Office h	eld	
	expenditure to benefit C/OF	4											

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 4/31 Rpt: 34/67	Charter Schools Now PAC 00080619						
4 Date	5 Payee name						
11/20/2024	Bryan Hughes for Texas Senate						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$5,000.00	PO Box 450						
Expenditure from corporate funds	Mineola, TX 75773						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Contributions/Donations Made By  Contributions/Donations Made By  Contributions/Donations Made By						
EXPENDITURE	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
11/20/2024	Carl Tepper for State Representative						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,000.00	PO Box 94534						
, , , , , , , , , , , , , , , , , , , ,							
Expenditure from corporate funds	Lubbock, TX 79493						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Contributions/Donations Made By						
	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
11/11/2024	Carr Marketing, Inc						
Amount (\$)	Payee address; City; State; Zip Code						
\$5,765.12	131 Honeycomb Ct						
•							
Expenditure from corporate funds	Encinitas, CA 92024						
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						
	Survey						
0 1. 6							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
experiulture to beliefit G/OFI							

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consultung Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1 Total pages Schedule F1:								
Sch: 5/31 Rpt: 35/67	Charter Schools Now PAC 00080619							
4 Date	5 Payee name							
11/20/2024	Carrie Isaac for Texas							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$1,000.00	100 Commons Road #7-125							
Expenditure from corporate funds	Dripping Springs, TX 78620							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.							
	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
11/20/2024	Charles Cunningham Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,500.00	PO Box 13452							
41,000.00	1 0 Box 10 102							
Expenditure from corporate funds	Humble, TX 77347							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By							
	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
11/01/2024	Charter Schools Now							
Amount (\$)	Payee address; City; State; Zip Code							
\$46,412.50	3005 S Lamar Blvd, Ste D-447							
Ţ :0, : <u>1</u>								
Expenditure from corporate funds	Austin, TX 78704							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Office Overhead/Rental Expense							
L/II LIIDITOILE	Check if Austin, TX, officeholder living expense							
	Staff Time Reimbursement to CSN							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
experiulture to beliefit C/Off								

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

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

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/31 Rpt: 36/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/13/2024	Charter Schools Now
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,500.00	3005 S Lamar Blvd, Ste D-447
Expenditure from corporate funds	Austin, TX 78704
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Staff Time Reimbursement to CSN
	Stail Time Reimbursement to Colv
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-1-	
Date	Payee name
12/10/2024	Christian Manuel Hayes Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3801 Turtlecreek Dr.
Expenditure from	
corporate funds	Port Arthur, TX 77642
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Cody Vasut Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 2724
Expenditure from corporate funds	Angleton, TX 77516
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.,50	

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 7/31 Rpt: 37/67	Charter Schools Now PAC 00080619	
4 Date	5 Payee name	
10/29/2024	Crutcher, Ally	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$135.25	5665 Arapaho Rd. Apt. 2232	
X Expenditure from corporate funds	Dallas, TX 75248	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Staff Mileage Reimbursement to Attend Meeting	
	Stall Mileage Reinbursement to Attend Meeting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	=
12/13/2024	Crutcher, Ally	
Amount (\$)	Payee address; City; State; Zip Code	_
\$268.02	5665 Arapaho Rd. Apt. 2232	
<b>Φ200.02</b>	5005 ΑΓαράπο Ru. Αρι. 2232	
X Expenditure from corporate funds	Dallas, TX 75248	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Staff Mileage Reimbursement to Attend Meeting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Data	Device serve	=
Date	Payee name	
11/20/2024	Daniel Alders for Texas	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	PO Box 8907	
- Evenanditura from		
Expenditure from corporate funds	Tyler, TX 75711	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Campaign Contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	П
expenditure to benefit C/OI	<del>1</del>	

### 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/31 Rpt: 38/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	David Lowe for Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	9017 Cedar Breaks Drive
Expenditure from corporate funds	North Richland Hills, TX 76182
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Dennis Paul Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	626 1/2 Barringer Ln Suite A
Ψ1,000.00	525 1/2 Barninger En Gallo / C
Expenditure from corporate funds	Webster, TX 77598
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Elizabeth "Liz" Campos Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1028 Rigsby
•	
Expenditure from corporate funds	San Antonio, TX 78210
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	

## SCHEDULE F1

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

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

Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/31 Rpt: 39/67	Charter Schools Now PAC	00080619
4 Date	5 Payee name	
11/05/2024	Facebook	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$463.63	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
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.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Social Media Advertising
O Commission ONII V if allowed	Out lide to (Office health and out of the control o	Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought  Harris Davila, Caroline State Repres	Office held entative District 52 State Representative District 52
·	Hairis Daviia, Caloline State Repres	entative district 32 State Representative district 32
Date	Payee name	
11/05/2024	Facebook	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,053.93	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
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
		Social Media Advertising
		oosia. modia / tarorionig
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		entative District 138 State Representative District
Date		·
11/05/2024	Payee name Facebook	
Amount (\$)	Payee address; City; State; Zip Code	
\$365.23	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
PURPOSE OF	, -	Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Social Media Advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		entative District 121
	,	

## 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/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/31 Rpt: 40/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/05/2024	Facebook
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$496.41	1 Hacker Way
Expenditure from corporate funds	Menlo Park, CA 94022
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 Social Media Advertising
	Social Wedia Advertising
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
5 .	
Date	Payee name
11/20/2024	Friends of Brandon Creighton
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	2257 N. Loop 336, Ste. 140-366
Evnanditura from	
Expenditure from corporate funds	Conroe, TX 77304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to serious ever	
Date	Payee name
11/20/2024	Friends of Cecil Bell Jr
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 819
Expenditure from corporate funds	Magnolia, TX 77353
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to bettern 6/01	<u>'</u>

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7 1 0 1 1 5	,
1 Total pages Schedule F1:	
Sch: 11/31 Rpt: 41/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	Friends of Donna Campbell Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 171002
Expenditure from	San Antonio TV 70217
corporate funds	San Antonio, TX 78217
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder   Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Onicerioider/Political Committee Campaign Contribution
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
•	
Date	Payee name
11/20/2024	Friends of Paul Bettencourt
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1 E Greenway Plaza Ste 225
Expenditure from corporate funds	Houston, TX 77046
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Contribution
	Sampaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· ·
Date	Payee name
11/20/2024	Friends of Tom Oliverson
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1 Greenway Plaza #225
Expenditure from corporate funds	Houston, TX 77046
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/31 Rpt: 42/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	Gary Gates for Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	2205 Avenue I
Expenditure from corporate funds	Rosenberg, TX 77471
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
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
11/20/2024	Gene Wu Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 742442
— Forestitus from	
Expenditure from corporate funds	Houston, TX 77274
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
11/01/2024	Haywire
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	1920 McKinney Ave., Ste. 100
Expenditure from corporate funds	Dallas, TX 75201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense  Luncheon Food/Beverages
	Luttofieoti Food/Develages
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

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

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

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: Sch: 13/31 Rpt: 43/67	2 FILER NAME Charter Schools Now PAC  3 Filer ID (Ethics Commission Filers) 00080619
4 Date 11/20/2024	5 Payee name Helen Kerwin Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 420 Grand Avenue
Expenditure from corporate funds	Glen Rose, TX 76043
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 10/27/2024	Payee name Impact Advertising, LLC
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 3685 S. 500 W.
Expenditure from corporate funds	Salt Lake City, UT 84115
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  Media Buy: In-kind contribution to Eddie Morales (HD 74)
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 11/20/2024	Payee name JM Lozano for State Rep Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 727 Arroyo Dr.
Expenditure from corporate funds	Kingsville, TX 78363
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 14/31 Rpt: 44/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	James Frank Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	3808 B Kemp Blvd. Ste 321
, ,	
Expenditure from	Michita Falla TV 76200
corporate funds	Wichita Falls, TX 76308
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaigh Contribution
O Consulate ONLY if allocat	On alidate (Office health a grants
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Jared Patterson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 5419
Expenditure from corporate funds	Frisco, TX 75035
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder (Political Committee)  Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Ÿ
Date	Payee name
11/20/2024	Joanne Shofner for Texans
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	638A N. University Drive #177
Expenditure from corporate funds	Nacogdoches, TX 75961
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>

### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/31 Rpt: 45/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	Josey Garcia for HD124
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	718 Amber Knoll
Expenditure from corporate funds	San Antonio, TX 78251
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 Campaign Contribution
	Campaign Continuation
O Commission ONLL V if dispose	Constitute / Office helder mores Office accords
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Data	
Date	Payee name
11/20/2024	Katrina Pierson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	609 S Goliad St #672
Expenditure from	
corporate funds	Rockwall, TX 75087
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee Campaign Contribution
	Campaigh Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/01/2024	Kona Grill
Amount (\$)	Payee address; City; State; Zip Code
\$257.55	7400 San Pedro Ave. #125
Ψ237.33	7400 Sail 1 Culo Avc. #123
Expenditure from corporate funds	San Antonio, TX 78216
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Staff Mileage Reimbursement to Attend Meeting
Complete CNU V Station	Constitute (Office helder nome
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
•	

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
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

Candidate/Officeholder/Politica Credit Card Payment	
orealt out a rayment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 16/31 Rpt: 46/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
10/29/2024	Marc LaHood Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,000.00	127 Encino Blanco
Expenditure from corporate funds	San Antonio, TX 78232
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/20/2024	Mike Schofield Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	934 Hidden Canyon Rd.
Expenditure from corporate funds	Katy, TX 77450
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorure to benefit C/Oi	
Date	Payee name
11/01/2024	Mims, Chelbi
Amount (\$)	Payee address; City; State; Zip Code
\$372.69	2609 Riverside Dr. B
X Expenditure from corporate funds	Houston, TX 77044
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Staff Mileage Reimbursement to Attend Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

## SCHEDULE F1

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 17/31 Rpt: 47/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
12/13/2024	Mims, Chelbi
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$14.74	2609 Riverside Dr. B
X Expenditure from corporate funds	Houston, TX 77044
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Staff Mileage Reimbursement to Attend Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Nate Schatzline for Texas Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	13037 Monte Alto St.
<b>\$2,000.00</b>	1999) Monto Filto Gi.
Expenditure from corporate funds	Fort Worth, TX 76244
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Paul Dyson for Texas
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	4040 State Highway 6 S, Ste 200
Expenditure from corporate funds	College Station, TX 77845
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	
1 Total pages Schedule F1: Sch: 18/31 Rpt: 48/67	2 FILER NAME Charter Schools Now PAC 3 Filer ID (Ethics Commission Filers) 00080619
4 Date	5 Payee name
11/20/2024	Phil King Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	PO Box 1913
Expenditure from	
corporate funds	Weatherford, TX 76086
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Officerioider/Political Committee Campaign Contribution
	The state of the s
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/20/2024	Philip Cortez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	7919 Liberty Island
Expenditure from	
corporate funds	San Antonio, TX 78227-4734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Continuution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
11/20/2024	Rafael Anchia Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 4468
Evnonditure from	
Expenditure from corporate funds	Dallas, TX 75208
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> 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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)							
	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 19/31 Rpt: 49/67	Charter Schools Now PAC 00080619							
4 Date	5 Payee name							
12/02/2024	Rafael Anchia Campaign							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$1,000.00	PO Box 4468							
Expenditure from corporate funds	Dallas, TX 75208							
8 PURPOSE		_						
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By							
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense							
	Campaign Contribution							
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_						
expenditure to benefit C/OI								
Date	Davisa sama	=						
	Payee name							
10/31/2024	Regions Commercial Bankcard	_						
Amount (\$)	Payee address; City; State; Zip Code							
\$1,045.27	PO Box 2224							
- Evenanditura from								
Expenditure from corporate funds	Birmingham, AL 35246-3042							
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.							
EXPENDITURE	Check if Austin, TX, officeholder living expense							
	Payment Of Credit Card Bill For Credit Card							
	Expenditures							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI	1							
Date	Payee name	=						
12/02/2024	Regions Commercial Bankcard							
Amount (\$)	Payee address; City; State; Zip Code	_						
\$191.90	PO Box 2224							
φ191.90	FO B0X 2224							
Expenditure from								
corporate funds	Birmingham, AL 35246-3042							
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.							
	Check if Austin, TX, officeholder living expense							
	Payment Of Credit Card Bill For Credit Card Expenditures							
		_						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
experialture to beliefft G/Of	•							

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 20/31 Rpt: 50/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	Richard Hayes Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 2818
Expenditure from corporate funds	Denton, TX 76202
8 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 travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaigh Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Davies same
Date 11/20/2024	Payee name
	Richard Pena Raymond Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 450349
Expenditure from	
corporate funds	Laredo, TX 78045
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
0 1: 01!! \( \frac{1}{2} \)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	RightSide Compliance LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4,290.00	PO Box 341027
Evpanditure from	
Expenditure from corporate funds	Austin, TX 78734
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.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Compliance Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	•

## 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 Solaries (Contract Labor

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	·	3 Filer ID (Ethics Commission Filers)
Sch: 21/31 Rpt: 51/67	Charter Schools Now PAC	00080619
4 Date	5 Payee name	•
11/20/2024	Rios, Crystal	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$554.02	10106 Asta Trl	
X Expenditure from corporate funds	San Antonio, TX 78224	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Staff Mileage Reimbursement to Attend Meeting
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI		
Date	Payee name	
12/13/2024	Rios, Crystal	
Amount (\$)	Payee address; City; State; Zip C	ode
\$381.49	10106 Asta Trl	ouc
Ф301.49	10100 A3ta 111	
X Expenditure from corporate funds	San Antonio, TX 78224	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Staff Mileage Reimbursement to Attend Meeting
		Stail Mileage Normburgerine to 7 Mortal Mostling
Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI		
Date	Payee name	
11/07/2024	Ryan Data & Research	
Amount (\$)	Payee address; City; State; Zip C	ode
\$500.00	P.O. Box 202675	
Ψ300.00	1.0.000 202010	
Expenditure from corporate funds	Austin, TX 78720-2675	
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  List Expense
		List Expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI		Office field

### SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	7 - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Al Committee Legal Services Printing Expense Travel Out of District OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
1 Total pages Schedule F1: Sch: 22/31 Rpt: 52/67	2 FILER NAME  Charter Schools Now PAC  3 Filer ID (Ethics Commission Filers)  00080619
4 Date	5 Payee name
11/20/2024	Ryan Guillen Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 1024
\$1,000.00	F.O. BOX 1024
Expenditure from corporate funds	Austin, TX 78767
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
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
11/20/2024	Sam Harless Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	15814 Champion Forest Dr., PMB 312
Expenditure from corporate funds	Spring, TX 77379
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
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
11/20/2024	Senator Juan 'Chuy' Hinojosa Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1508 S. Lone Star Way Ste 5B
Expenditure from corporate funds	Edinburg, TX 78539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H

### SCHEDULE F1

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

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

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 Cabadula F1:	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 23/31 Rpt: 53/67	2 FILER NAME  Charter Schools Now PAC  3 Filer ID (Ethics Commission Filers)  00080619
4 Date	5 Payee name
11/20/2024	Shelby Slawson Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 286
Evponditure from	
Expenditure from corporate funds	Stephenville, TX 76401
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaigh Contribution
• • • • • • • • • • • • • • • • • • • •	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	Sheryl Cole Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 41
Expenditure from corporate funds	Austin, TX 78767
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaigh Contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	· ·
Date	Payee name
11/20/2024	Tan Parker Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 271741
Expenditure from corporate funds	Flower Mound, TX 75027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

### SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1 Tatal marca Cabadula F1.	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F1: Sch: 24/31 Rpt: 54/67	FILER NAME  Charter Schools Now PAC  3 Filer ID (Ethics Commission Filers)  00080619										
4 Date	5 Payee name										
11/20/2024	Terri Leo Wilson Campaign										
6 Amount (\$) \$1,000.00	7 Payee address; City; State; 23 Pirates Beach W										
Expenditure from corporate funds	Galveston, TX 77554										
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school Contributions/Donations Made By Candidate/Officeholder/Political Comm	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense Ontribution								
Complete ONLY if direct expenditure to benefit C/OF		Office sought	Office held								
Date	Payee name										
11/20/2024	Texans for Brian Harrison										
Amount (\$)		Zip Code									
\$2,500.00	0.00 6061 Hayes Rd.										
Expenditure from corporate funds	Midlothian, TX 76065										
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school Contributions/Donations Made By Candidate/Officeholder/Political Comm	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense Ontribution								
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held								
Date 11/20/2024	Payee name Texans for Dan Patrick										
Amount (\$) \$25,000.00	Payee address; City; State; PO Box 685085 Austin, TX 78768	Zip Code									
Expenditure from corporate funds	Austin, TX 78768										
PURPOSE	(a) Category (See Categories listed at the top of this scho	edule) (b) Description									
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Comm	<u> </u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense Ontribution								
Complete ONLY if direct expenditure to benefit C/O		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 ( Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
oroun oura raymon	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 25/31 Rpt: 55/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	Texans for Greg Abbott
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	PO Box 308
Expenditure from corporate funds	Austin, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	4
Date	Payee name
11/20/2024	Texans for Joan Huffman
Amount (\$)	Payee address; City; State; Zip Code
` *	
\$5,000.00	3733-1 Westheimer #40
Expenditure from	
corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit even	
Date	Payee name
10/31/2024	Texas Times
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	PO Box 210
Expenditure from corporate funds	Del Rio, TX 78840
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
	Radio Advertising: in-kind for Eddie Morales
	Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 26/31 Rpt: 56/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	The Angela Paxton Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	PO Box 2878
Expenditure from corporate funds	McKinney, TX 75070
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/20/2024	The Oscar Longoria Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 4224
,_,,,,,,,,,	
Expenditure from corporate funds	Mission, TX 78572
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/31/2024	Thomas Graphics, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$3,530.49	PO Box 142226
, , , , , , ,	
Expenditure from corporate funds	Austin, TX 78714-2226
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
	Direct Mail Design, Printing, Mailing & Postage: In- kind to Caroline Harris Davila Campaign
Complete CNII V if divers	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct 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
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 Card Payment	The Instruction Guide explains how to comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 27/31 Rpt: 57/67	Charter Schools Now PAC	00080619
4 Date	5 Payee name	
10/31/2024	Thomas Graphics, Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip Code	<del>)</del>
\$2,884.99	PO Box 142226	
— Foreseditors from		
Expenditure from corporate funds	Austin, TX 78714-2226	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Direct Mail Design, Printing, Mailing & Postage: In-
		kind to John Lujan Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	
Date	Payee name	
10/31/2024	Thomas Graphics, Inc.	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,062.72	PO Box 142226	•
Ψ2,002.72	1 0 Box 142220	
Expenditure from corporate funds	Austin, TX 78714-2226	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Direct Mail Design, Printing, Mailing & Postage: In-
		kind to Lacey Hull Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O		
Date	Payee name	
10/31/2024	Thomas Graphics, Inc.	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,583.81	PO Box 142226	,
<del>+</del> 2,000.01		
Expenditure from corporate funds	Austin, TX 78714-2226	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Direct Mail Design, Printing, Mailing & Postage: In-
		kind to Marc Lahood Campaign
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	9	

## SCHEDULE F1

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

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

Candidate/Officeholder/Politica Credit Card Payment								
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	$\neg$						
Sch: 28/31 Rpt: 58/67	Charter Schools Now PAC 00080619							
4 Date	5 Payee name							
11/01/2024	Tiny's No. 5							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$730.15	3636 Rice Blvd W University Pl							
Expenditure from corporate funds	Houston, TX 77005							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.							
	Check if Austin, TX, officeholder living expense							
	Luncheon Food/Beverages							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H							
Date	Payee name							
11/20/2024	Todd Hunter Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,000.00	445 Cape Henry							
Ψ1,000.00	4-10 Superiority							
Expenditure from corporate funds	Corpus Christi, TX 78412							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By							
EXI ENDITORE	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H							
Date	Payee name	_						
11/20/2024	Tom Craddick Campaign							
	, ,							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,000.00	Two Lakes Drive							
Expenditure from								
corporate funds	Midland, TX 79705							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense							
	Campaign Contribution							
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

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

ense Travel in Distr pense Travel Out of pres/Contract Labor OTHER (ente

	Candidate/Officeholder/Politica Credit Card Payment		mmittee L	egal Sen				/ages	/Contract Labor		OTHER (enter a	strict category not listed al	bove)
	ordan dara r aymoni			The Inst	truction Guide	explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 29/31 Rpt: 59/67		Charter Scho	ools No	ow PAC						00080619		
4	Date	5	Payee name										
	11/20/2024		Tony Tinderl	nolt for	Texas Hou	ise							
6	Amount (\$)	7	Payee address	s; (	City;	State;	Zip Co	de					
	\$1,000.00		PO Box 172	713									
_	T Expenditure from												
L	corporate funds		Arlington, TX	7600	3								
8	PURPOSE	(a)	Category (See	e Categor	ies listed at the to	p of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Contributions									nplete Schedule T.	
			Candidate/O	fficeho	older/Politica	al Commi	ttee		Campaign Co		officeholder living	g expense	
									Campaign	) i i (i	ibution		
9	Complete ONLY if direct		Candidate/Offic	aholda	r name		ffice sou	aht			Office h	ald	
	expenditure to benefit C/O		Sandidate/Onic	enolue	Пате		THE SOU	giit			Office III	Eiu	
	Date		Payee name										
	11/20/2024		Valoree Swa	nson f	for Texas H	ouse							
	Amount (\$)		Payee address	s; (	City;	State;	Zip Co	de					
	\$1,000.00		6046 FM 292	20 #61	.9								
	- Companyity was finance												
	Expenditure from corporate funds		Spring, TX 7	7379									
	PURPOSE	(a)	Category (See	e Categor	ies listed at the to	p of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Contributions	s/Dona	ations Made	Ву			<b>=</b>			plete Schedule T.	
	EXI ENDITORE		Candidate/O	fficeho	older/Politica	al Commi	ttee		_		officeholder living	g expense	
									Campaign Co	אוונ	ibution		
	Complete ONLY if direct		Candidate/Offic	oboldo	r nama		ffice sou	aht			Office h	old	
	expenditure to benefit C/O		Januluale/Onic	enolue	i name	O	ilice sou	yııı			Office II	ciu	
	Data	_											
	Date 11/01/2024		Payee name	ıal									
			Vantage Leg										
	Amount (\$)		Payee address		City;	State;	Zip Co	de					
	\$429.00		PO Box 3410	)16									
V	Expenditure from												
Х	corporate funds		Austin, TX 7	8734									
	PURPOSE OF	(a)	Category (See		ies listed at the to	p of this sche	dule)	(b)	Description				
	EXPENDITURE		Legal Servic	es							de of Texas. Com officeholder living	plete Schedule T.	
									Legal Consult			g expense	
									- 3		,		
	Complete ONLY if direct		Candidate/Offic	eholde	r name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/O					J		J. /•			200 11		

## SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 30/31 Rpt: 60/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
12/09/2024	Vantage Legal
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$71.50	PO Box 341016
- Evpanditura from	
X Expenditure from corporate funds	Austin, TX 78734
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Legal Consulting Services
	Legal Consulting Services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
11/01/2024	Vonlane
Amount (\$)	Payee address; City; State; Zip Code
\$135.00	3800 Maple Ave Ste 265
X Expenditure from corporate funds	Dallas, TX 75219-4087
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Staff Mileage Reimbursement to Attend Meeting
	Start Willedge Normburserine to Attend Wiesting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/20/2024	Wes Virdell for Texas
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 147
Ψ1,000.00	1 0 80% 147
Expenditure from corporate funds	Brady, TX 76825
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

## SCHEDULE F1

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

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

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

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: 31/31 Rpt: 61/67	Charter Schools Now PAC 00080619
4 Date	5 Payee name
11/20/2024	Will Metcalf Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 454
Expenditure from corporate funds	Conroe, TX 77305
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/28/2024	Winter Garden Advertising Agency
Amount (\$)	Payee address; City; State; Zip Code
\$900.00	PO Box 196
Expenditure from corporate funds	Eagle Pass, TX 78853
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Radio Advertising: in-kind for Eddie Morales Campaign
Commission ONII V if disposi	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/31/2024	Winter Garden Advertising Agency
Amount (\$)	Payee address; City; State; Zip Code
\$3,120.00	PO Box 196
Expenditure from corporate funds	Eagle Pass, TX 78853
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
D. LIBITORE	Check if Austin, TX, officeholder living expense
	Radio Advertising: in-kind for Eddie Morales Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 62/67 Charter Schools Now PAC 00080619 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 12/19/2024 Charter Schools Now Amount (\$) Payee address; State; Zip Code \$905.15 3005 S Lamar Blvd, Ste D-447 Expenditure from Austin, TX 78704 corporate funds **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense List Rental 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/04/2024 RightSide Compliance LLC Amount (\$) Payee address; City; State; Zip Code \$3,055.72 PO Box 341027 Expenditure from corporate funds Austin, TX 78734 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Compliance Consulting 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 Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 1/5 Rpt: 63/67	Charter Schools No	ow PAC		00080619		
4 CREDIT CARD ISSUER		ncial institution NS BANK	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
Expenditure from corporate funds	\$226.50	10/27/2024	10/31/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Austin Digital Printi	ng	13581 Pond Springs Rd,	Suite 307		
			Austin, TX 78729			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
X Political	Printing Expense	o. alic conceancy	Printing Door Hangers			
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 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		
Expenditure from corporate funds	\$1,000.00	12/12/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Gene Wu Campaig	n	PO Box 742442			
			Houston, TX 77274			
PURPOSE OF	(a) Category	of this schodule)	(b) Description			
EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Campaign Contribution			
X Political	Candidate/Officeholde					
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 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		
Expenditure from corporate funds	\$1,680.73	12/02/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
			1920 McKinney Ave., Ste	. 100		
	Haywire					
			Dallas, TX 75201			
PURPOSE OF	(a) Category	of this school: 1-1	(b) Description			
EXPENDITURE	(See Categories listed at the top <b>Event Expense</b>	of this schedule)	Event Food/Beverages			
X Political	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 expenditure to benefit C/OH	Candidate/Officeholder name Office 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 (Eth	3 Filer ID (Ethics Commission Filers)		
Sch: 2/5 Rpt: 64/67	Charter Schools Now PAC			00080619			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
Expenditure from corporate funds	\$124.00	10/31/2024	12/02/2024				
7 PAYEE	(a) Payee name  Josey Garcia for HI	D124	(b) Payee address; 718 Amber Knoll	City,	State,	Zip Code	
			San Antonio, TX 78251				
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Campaign Contribution				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living ex	pense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT  Expenditure from corporate funds	(a) Amount Charged \$151.02	(b) Date of Charge 10/27/2024	(c) Date(s) Credit Card Issi 10/31/2024	uer Paid			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Mama Margies		7335 S Zarzamora St	•		·	
			San Antonio, TX 78224				
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Meeting Food/Beverage	es			
Non-Political	(a) Chapte if traval outside	of Toyon Complete Cohodule T	Chook if Austin	TV officebolder living ov			
Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	TX, officeholder living ex Office held	pense		
expenditure to benefit C/OH							
PAYMENT  Expenditure from corporate funds	(a) Amount Charged \$2.00	(b) Date of Charge 12/10/2024	(c) Date(s) Credit Card Issi	uer Paid			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Parking.com		1 Greenway Plaza				
			Houston, TX 77046				
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Parking				
Non-Political	(c) Chock if traval autoida	of Toyas, Complete Schodule T	Chook if Avestin	TV officeholder living av	nonco		
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	Check if Austin,	TX, officeholder living ex Office held	perise		

#### 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

ine inst	ruction Guide explains how	to complete this form.			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Charter Schools No	ow PAC		00080619		
	_	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
\$2,370.88	12/10/2024				
(a) Payee name  The Artisan Gift Bo	xes	(b) Payee address; 13421 Gent Dr Austin, TX 78729	City,	State,	Zip Code
(a) Category		(b) Description			
		Gifts Baskets			
City Wards/Memorial	э Ехрепос				
(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Candidate/Officeholder	name Offic	e sought	Office held		
(a) Amount Charged	(b) Date of Charge		r Paid		
\$33.95	10/29/2024	12/02/2024			
(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code
VanillaGift.com		PO Box 826			
		Forston, GA 31808			
(a) Category		(b) Description			
		Gift Cards			
(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Candidate/Officeholder	name Offic	e sought	Office held		
(a) Amount Charged	(b) Date of Charge		r Paid		
\$101.85	10/29/2024	10/31/2024			
(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code
VanillaGift.com		PO Box 826			
		Forston, GA 31808			
(a) Category		(b) Description			
		Gift Cards for Volunteers			
cal Gill/Awards/Memorials Expense					
(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Candidate/Officeholder	name Offic	e sought	Office held		
	2 FILER NAME Charter Schools No Name of final see p  (a) Amount Charged \$2,370.88  (a) Payee name The Artisan Gift Bo  (a) Category (See Categories listed at the top Gift/Awards/Memorial  (c) Check if travel outside Candidate/Officeholder  (a) Amount Charged \$33.95  (a) Payee name VanillaGift.com  (a) Category (See Categories listed at the top Gift/Awards/Memorial  (c) Check if travel outside Candidate/Officeholder  (a) Amount Charged \$101.85  (a) Payee name VanillaGift.com  (a) Category (See Categories listed at the top Gift/Awards/Memorial  (c) Check if travel outside  Candidate/Officeholder	2 FILER NAME Charter Schools Now PAC  Name of financial institution see previous  (a) Amount Charged \$2,370.88  12/10/2024  (a) Payee name The Artisan Gift Boxes  (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office  (a) Amount Charged \$33.95  10/29/2024  (a) Payee name VanillaGift.com  (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office  (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Date of Charge \$101.85  10/29/2024  (a) Payee name VanillaGift.com  (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name VanillaGift.com	Charter Schools Now PAC  Name of financial institution see previous  (a) Amount Charged (b) Date of Charge \$2,370.88 12/10/2024 (c) Date(s) Credit Card Issue \$2,370.88 12/10/2024 (c) Date(s) Credit Card Issue \$2,370.88 12/10/2024 (c) Date(s) Credit Card Issue \$2,370.88 12/10/2024 (d) Payee address; 13421 Gent Dr  The Artisan Gift Boxes 13421 Gent Dr  The Artisan Gift Boxes (b) Date of Charge (b) Description Gifts Baskets  (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (b) Date of Charge 12/102/2024 (c) Date(s) Credit Card Issue 12/102/2024 (d) Payee address; PO Box 826  (a) Amount Charged (b) Date of Charge 12/102/2024 (d) Description Gift/Awards/Memorials Expense (e) Cift/Awards/Memorials Expense (e) Cimplete Schedule T. Candidate/Officeholder name (b) Payee address; PO Box 826 (e) Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (b) Payee address; PO Box 826 (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (b) Payee address; PO Box 826 (c) Date(s) Credit Card Issue 10/31/2024 (d) Payee name (b) Payee address; PO Box 826 (e) Poston, GA 31808 (e) Poston, GA 31808 (e) Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (f) Date(s) Credit Card Issue 10/31/2024 (f) Date(s) Credit Card Issue 10/31/	2 FILER NAME Charter Schools Now PAC  Name of financial institution see previous  (a) Amount Charged \$2,370.88  12/10/2024  (b) Date of Charge The Artisan Gift Boxes  (c) Candidate/Officeholder name  (d) Date of Charge (e) Amount Charged (f) Date of Charge (f) Date of Charge (g) Check if travel outside of Texas. Complete Schedule T.  Vanilla Gift.com  (a) Payee name  (b) Date of Charge (c) Date(s) Credit Card Issuer Paid  (d) Payee address; City, 13421 Gent Dr  Austin, TX 78729 (e) Description Gifts Baskets  (f) Description Gifts Baskets  (g) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name  (h) Payee address; City. PO Box 826  (a) Payee name (b) Payee address; City. PO Box 826  (b) Description Gift Cards  (c) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name  (b) Payee address; City. PO Box 826  (c) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name  (b) Payee address; City. PO Box 826  (c) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name  (b) Description Gift Cards  (c) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name  (b) Payee address; City. PO Box 826  (c) Date(s) Credit Card Issuer Paid 10/31/2024  (a) Payee name  VanillaGift.com  (b) Date of Charge \$101.85  (c) Date(s) Credit Card Issuer Paid 10/31/2024  (a) Payee name  VanillaGift.com  Forston, GA 31808  (b) Description Gift Cards of Volunteers  (city, PO Box 826  Forston, GA 31808  (b) Description Gift Cards for Volunteers  (city, PO Box 826  City, PO Box 826	2 FILER NAME Charter Schools Now PAC  Name of financial institution see previous  (a) Amount Charged \$2,370.88  (b) Date of Charge \$2,370.88  (c) Date(s) Credit Card Issuer Paid  (d) Payee name The Artisan Gift Boxes  (e) Payee address; City, State, 13421 Gent Dr  Austin, TX 78729  (a) Category (b) Description Gifts Baskets  (c) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name  (b) Payee address; City, State, 13421 Gent Dr  Austin, TX 78729  (c) Description Gifts Baskets  (c) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name Office sought Office held  (a) Amount Charged \$33.95  (b) Date of Charge 10/29/2024  (c) Date(s) Credit Card Issuer Paid 12/02/2024  (d) Payee name VanillaGift.com  (e) Payee address; City, State, PO Box 826  Forston, GA 31808  (e) Description Gift Cards  (f) Description Gift Cards  (g) Description Gift Cards  (h) Date of Charge \$10.185  (h) Date of Ch

## 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 tl	his form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 4/5 Rpt: 66/67	Charter Schools Now PAC		00080619				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$		
6	PAYMENT  Expenditure from corporate funds	(a) Amount Charged \$58.95	(b) Date of Charge 10/29/2024	(c) Date(s) 10/31/202	Credit Card Issuer 24	Paid		
7	PAYEE	(a) Payee name  VanillaGift.com		(b) Payee a	26	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		Forston, C (b) Descript Gift Cards				
	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 xpenditure to benefit C/OH	Candidate/Officeholder		esought		Office held		
	Expenditure from corporate funds	(a) Amount Charged \$506.95	(b) Date of Charge 10/29/2024	(c) Date(s) 10/31/202	Credit Card Issuer 24	· Paid		
	PAYEE	(a) Payee name  VanillaGift.com		(b) Payee a PO Box 8 Forston, 0	26	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Descript Gift Cards	tion s for Volunteers			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. [	Check if Austin, TX,	officeholder living expe	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT  Expenditure from corporate funds	(a) Amount Charged \$33.95	(b) Date of Charge 10/30/2024	(c) Date(s) 12/02/202	Credit Card Issuer 24	Paid		
	PAYEE	(a) Payee name  VanillaGift.com		(b) Payee a PO Box 8 Forston, 0	26	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Descript Gift Cards	tion			
	Non-Political	1	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	esought		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/Onicendide//Politica	·· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how	•	THER (effer a category flot i	iisted above)	
1 Total pages Schedule F4:	·			3 Filer ID (Ethics Co	mmission Filers)	
Sch: 5/5 Rpt: 67/67				00080619		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
Expenditure from corporate funds	\$349.75	12/13/2024				
7 PAYEE	(a) Payee name  VanillaGift.com		(b) Payee address; PO Box 826 Forston, GA 31808	City, St	tate, Zip Code	
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE  X Political	(See Categories listed at the top Gift/Awards/Memorial		Gift Cards			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
Expenditure from corporate funds	\$125.00	12/10/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, St	tate, Zip Code	
	Vonlane		3800 Maple Ave Ste 265			
			Dallas, TX 75219-4087			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
X Political	Travel In District		Transportation			
Non-Political	(c) Check if travel outside	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeho				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		