

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00084941	<b>2</b> Total pages filed: 47				
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Stephen	MI MI	<b>OFFICE USE ONLY</b>			
	NICKNAME Andy	LAST Hopper	SUFFIX		Date Received <b>ELECTRONICALLY FILED</b> 01/15/2025		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 1052  Decatur, TX 76234			Date Hand-delivered or Date Postmarked			
				Receipt #      Amount			
				Date Processed			
				Date Imaged			
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Jean	MI MI				
	NICKNAME	LAST Bassinger	SUFFIX				
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 210 Edgewood Dr  Highland Village, TX 75077						
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(972)	317-7286					
<b>8</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)						
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
<b>9</b> PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	10/27/2024				12/31/2024		
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 11/05/2024			ELECTION TYPE			
				<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
			<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special			
<b>11</b> OFFICE	OFFICE HELD (if any)			<b>12</b> OFFICE SOUGHT (if known) State Representative District 64			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 47

<b>13 C / OH NAME</b> Hopper, Stephen (Mr.)	<b>14 Filer ID</b> (Ethics Commission Filers) 00084941
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.											
<table border="1" style="width:100%"> <tr> <td style="width:20%"><b>COMMITTEE TYPE</b></td> <td style="width:80%"><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td rowspan="2"><b>COMMITTEE ADDRESS</b></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> </tr> <tr> <td colspan="2"><b>COMMITTEE CAMPAIGN TREASURER NAME</b></td> </tr> <tr> <td colspan="2"><b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b></td> </tr> </table>	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>				
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>										
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>										
	<input type="checkbox"/> SPECIFIC											
<b>COMMITTEE CAMPAIGN TREASURER NAME</b>												
<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>												

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 420.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35,274.88
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 25,076.49
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 78,398.31
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 23,200.00

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Stephen Hopper  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Hopper, Stephen (Mr.)		<b>19 Filer ID</b> (Ethics Commission Filers) 00084941
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 32,642.88
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,632.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 2,000.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 25,076.49
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/22 Rpt: 4/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) AGC of Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78768	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arens, Margie <hr/> Contributor address; City; State; Zip Code  Argyle, TX 76226	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arredondo, Paul <hr/> Contributor address; City; State; Zip Code  Newark, TX 76071	Amount of Contribution (\$)  \$20.24
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Associated Builders & Contractors of TX PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78767	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barekman, Cheryl <hr/> Contributor address; City; State; Zip Code  Euless, TX 76039	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/22 Rpt: 5/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barnett, Andrea <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boyd, TX 76023	<b>7</b> Amount of Contribution (\$)  \$20.24
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bartoli, Larry <hr/> Contributor address; City; State; Zip Code  Weatherford, TX 76087	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bass, Charles <hr/> Contributor address; City; State; Zip Code  Sunset, TX 76270	Amount of Contribution (\$)  \$20.24
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Leslie <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bryant, Deborah <hr/> Contributor address; City; State; Zip Code  Bridgeport, TX 76426	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/22 Rpt: 6/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calevich, Don <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76207	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carroll, Kevin <hr/> Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Lockheed Martin
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caughlin, Judy <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76006	Amount of Contribution (\$)  \$20.24
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caughlin, Judy <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76006	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coats Rose PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77046	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/22 Rpt: 7/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cure, Richard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sanger, TX 76266	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) unemployed		<b>9</b> Employer (See Instructions) unemployed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dahlstrom, Dan <hr/> Contributor address; City; State; Zip Code  Bridgeport, TX 76426	Amount of Contribution (\$)  \$20.24
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVine, Gaylyn <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77581	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) DeVine Promotions
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dolan, Bryan <hr/> Contributor address; City; State; Zip Code  Aurora, TX 76078	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Trinity Utilities & Boring
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dolan, Bryan <hr/> Contributor address; City; State; Zip Code  Aurora, TX 76078	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Trinity Utilities & Boring

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/22 Rpt: 8/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Follis, Thomas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boyd, TX 76023	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Paramount Plumbing
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frankenfield, Samuel <hr/> Contributor address; City; State; Zip Code  Sunset, TX 76270	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fridley, Dale <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gerstenschlager, Merrylynn <hr/> Contributor address; City; State; Zip Code  Weatherford, TX 76086	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grant, Kathy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Kathy Grant Group



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/22 Rpt: 9/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gray, Brady <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brock, TX 76087	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Texas Family Project
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HALL, SETH <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hamilton, Monica <hr/> Contributor address; City; State; Zip Code  Boyd, TX 76023	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Marilyn <hr/> Contributor address; City; State; Zip Code  Sanger, TX 76266	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Norine <hr/> Contributor address; City; State; Zip Code  Normangee, TX 77871	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) computer		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/22 Rpt: 10/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hektner, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code  Paradise, TX 76073	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henson, Ed <hr/> Contributor address; City; State; Zip Code  Decatur, TX 76234	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hertwig, Joseph <hr/> Contributor address; City; State; Zip Code  Decatur, TX 76234	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hix, Morgan <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) PAC Secretary Treasurer		Employer (See Instructions) Local 440
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holland & Knight Texas PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/22 Rpt: 11/47
2 FILER NAME Hopper, Stephen (Mr.)		3 Filer ID (Ethics Commission Filers) 00084941
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hopper, Kenneth	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code  Hummelstown, PA 17036	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houston Police Retired Officers Association PAC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77219	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howell, Charles	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Decatur, TX 76234	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Denton Fire Department
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Inge, Peyton	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Argyle, TX 76226	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Buddy	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HillCo

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/22 Rpt: 12/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Sharon <hr/> <b>6</b> Contributor address; City; State; Zip Code  The Colony, TX 75056	<b>7</b> Amount of Contribution (\$)  \$20.24
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Guardian Pet Sitters
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kammire, Patti <hr/> Contributor address; City; State; Zip Code  Aledo, TX 76008	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kickapoo Traditional Tribe of Texas <hr/> Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kleehammer, Delia <hr/> Contributor address; City; State; Zip Code  Argyle, TX 76226	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kouri, Philomena <hr/> Contributor address; City; State; Zip Code  Runaway Bay, TX 76426	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Secretary		Employer (See Instructions) CSTH

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/22 Rpt: 13/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Mellany <hr/> <b>6</b> Contributor address; City; State; Zip Code  Flower Mound, TX 75022	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langa, Pat <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lasater, Carla <hr/> Contributor address; City; State; Zip Code  Bowie, TX 76230	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Linebarger Goggan Blair & Sampson LLP <hr/> Contributor address; City; State; Zip Code  Austin, TX 78760	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lopez, Kaden <hr/> Contributor address; City; State; Zip Code  Weatherford, TX 76086	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Texas Family Project

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/22 Rpt: 14/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Gloria	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Bartonvillr, TX 76226		
<b>8</b> Principal occupation / Job title (See Instructions) Photographer/graphic artist		<b>9</b> Employer (See Instructions) Self employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melendez, Carlos	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code  Waco, TX 76711		
Principal occupation / Job title (See Instructions) Machine Operator		Employer (See Instructions) Howmet Aerospace
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moores, Gwen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Plano, TX 75094		
Principal occupation / Job title (See Instructions) Graduate student		Employer (See Instructions) UNT Health Science Center
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moulton, Jennifer	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (See Instructions) Service Mgr		Employer (See Instructions) Biglots
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neaves, Robert	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Azle, TX 76020		
Principal occupation / Job title (See Instructions) service		Employer (See Instructions) costco

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/22 Rpt: 15/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Niederer, Sherrill <hr/> <b>6</b> Contributor address; City; State; Zip Code  Argyle, TX 76226	<b>7</b> Amount of Contribution (\$)  \$1,200.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ONCOR State PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75202	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) 
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pack, Rocky <hr/> Contributor address; City; State; Zip Code  Bridgeport, TX 76426	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pack, Rocky <hr/> Contributor address; City; State; Zip Code  Bridgeport, TX 76426	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pack, Rocky <hr/> Contributor address; City; State; Zip Code  Bridgeport, TX 76426	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/22 Rpt: 16/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pack, Rocky	<b>7</b> Amount of Contribution (\$) \$150.00
<b>6</b> Contributor address; City; State; Zip Code  Bridgeport, TX 76426		
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pack, Rocky	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code  Bridgeport, TX 76426		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phillips, Carla	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Rhome, TX 76078		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self-Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pridgen, Joanne	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prince, Dan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  ALVORD, TX 76225		
Principal occupation / Job title (See Instructions) Logistics		Employer (See Instructions) Lockheed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/22 Rpt: 17/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pritchett, Kenneth <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76201	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROGERS, JAMES <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Randall, David <hr/> Contributor address; City; State; Zip Code  Haslet, TX 76052	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lockheed Martin
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeve, Chuck <hr/> Contributor address; City; State; Zip Code  Paradise, TX 76073	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rhine, Curtis <hr/> Contributor address; City; State; Zip Code  Decatur, TX 76234	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Finance Executive		Employer (See Instructions) RS BioTherapeutics

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/22 Rpt: 18/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rice, JoAnn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76207	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rich, Linda <hr/> Contributor address; City; State; Zip Code  Argyle, TX 76226	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Joy <hr/> Contributor address; City; State; Zip Code  Howe, TX 75459	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scaff, Lloyd <hr/> Contributor address; City; State; Zip Code  Decatur, TX 76234	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoggins, Noel <hr/> Contributor address; City; State; Zip Code  Argyle, TX 76226	Amount of Contribution (\$)  \$20.24
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/22 Rpt: 19/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spain, Kim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76137	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) unemployed		<b>9</b> Employer (See Instructions) unemployed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spencer, Deb <hr/> Contributor address; City; State; Zip Code  Boyd, TX 76023	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spencer, Deb <hr/> Contributor address; City; State; Zip Code  Boyd, TX 76023	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spencer, Deb <hr/> Contributor address; City; State; Zip Code  Boyd, TX 76023	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spencer, Deb <hr/> Contributor address; City; State; Zip Code  Boyd, TX 76023	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/22 Rpt: 20/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Splawn, Windell	<b>7</b> Amount of Contribution (\$) \$20.24
<b>6</b> Contributor address; City; State; Zip Code  Decatur, TX 76234		
<b>8</b> Principal occupation / Job title (See Instructions) Security		<b>9</b> Employer (See Instructions) CTDI
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stahl, Jody	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Sanger, TX 76266		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Flexjet
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Staten, Mike	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code  Grapevine, TX 76051		
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) self
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stickland, Jonathan	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Willow Park, TX 76087		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sturm, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/22 Rpt: 21/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Stephen	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76207		
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sutton, Warner Kimo	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swoboda, Kimberlee	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Runaway Bay, TX 76426		
Principal occupation / Job title (See Instructions) Controls TFA		Employer (See Instructions) GE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tabor, Doug	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code  Southlake, TX 76092		
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) self
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texans for Reasonable Solutions PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78741		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/22 Rpt: 22/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Agricultural Co-op Council PAC	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78664		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Apartment Association	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association of Health Plans PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 76701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Optometric PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78705		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Trial Lawyers PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/22 Rpt: 23/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thielvoldt, Eric	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Benbrook, TX 76126		
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) Northrop Grumman
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tilotta, Nicky	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Grapevine, TX 76051		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tovar, Jessica	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Lake Dallas, TX 75065		
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) UPSPAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Washington, DC 20003		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker, Alfred	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Paradise, TX 76073		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/22 Rpt: 24/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Tanya <hr/> <b>6</b> Contributor address; City; State; Zip Code  Argyle, TX 76226	<b>7</b> Amount of Contribution (\$)  \$20.24
<b>8</b> Principal occupation / Job title (See Instructions) student		<b>9</b> Employer (See Instructions) student
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weber, James <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wholesale Beer Distributors of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wickert, Elizabeth <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wine and Spirits Wholesalers of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/22 Rpt: 25/47
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Winship, Terry <b>6</b> Contributor address; City; State; Zip Code  Decatur, TX 76234	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Winshp, Terry Contributor address; City; State; Zip Code  DECATUR, TX 76234	Amount of Contribution (\$)  \$20.24
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/5 Rpt: 26/47	
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b> 420.00	
<b>5</b> Date 12/09/2024	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bramlett, Sherry	<b>8</b> Amount of contribution (\$) \$180.00	<b>9</b> In-kind contribution description Purchased TV for Austin office
	<b>7</b> Contributor address; City; State; Zip Code  Decatur, TX 76234		
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) retired	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Jack	Amount of contribution (\$) \$30.00	In-kind contribution description Purchased coffee organizer for Austin office
	Contributor address; City; State; Zip Code  Argyle, TX 76226		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		Employer (FOR NON-JUDICIAL) (See instructions) retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler	Amount of contribution (\$) \$180.00	In-kind contribution description Purchased TV for Austin office
	Contributor address; City; State; Zip Code  Fort Worth, TX 76244		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Broker		Employer (FOR NON-JUDICIAL) (See instructions) Chandler Crouch Realtors	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 2/5 Rpt: 27/47	
2 FILER NAME Hopper, Stephen (Mr.)		3 Filer ID (Ethics Commission Filers) 00084941	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 420.00	
5 Date 12/09/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgren, Suzan	8 Amount of contribution (\$) \$167.00	9 In-kind contribution description Purchased 1/3 of color printer for district office
	7 Contributor address; City; State; Zip Code  Denton, TX 76207		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) professor		11 Employer (FOR NON-JUDICIAL) (See instructions) MGH School of Nursing	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golihar, Lisa	Amount of contribution (\$) \$169.00	In-kind contribution description Purchased bookcase for Austin office
	Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		Employer (FOR NON-JUDICIAL) (See instructions) retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenawalt, Julie	Amount of contribution (\$) \$167.00	In-kind contribution description Purchased 1/3 of color printer for district office
	Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		Employer (FOR NON-JUDICIAL) (See instructions) retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 3/5 Rpt: 28/47	
2 FILER NAME Hopper, Stephen (Mr.)		3 Filer ID (Ethics Commission Filers) 00084941	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 420.00	
5 Date 12/09/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Gail	8 Amount of contribution (\$) \$110.00	9 In-kind contribution description Purchased digital picture frame for Austin office
	7 Contributor address; City; State; Zip Code  Denton, TX 76207		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		11 Employer (FOR NON-JUDICIAL) (See instructions) retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, John	Amount of contribution (\$) \$52.00	In-kind contribution description Purchased a laptop table for Austin office
	Contributor address; City; State; Zip Code  Sanger, TX 76266		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		Employer (FOR NON-JUDICIAL) (See instructions) retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Maurice	Amount of contribution (\$) \$80.00	In-kind contribution description Purchase of countertop icemaker for Austin office
	Contributor address; City; State; Zip Code  Krum, TX 76249		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Engineer		Employer (FOR NON-JUDICIAL) (See instructions) Smith System	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 4/5 Rpt: 29/47	
2 FILER NAME Hopper, Stephen (Mr.)		3 Filer ID (Ethics Commission Filers) 00084941	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 420.00	
5 Date 12/09/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, Lynne	8 Amount of contribution (\$) \$167.00	9 In-kind contribution description Purchased 1/3 of color printer for District office
	7 Contributor address; City; State; Zip Code  Denton, TX 76207	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		11 Employer (FOR NON-JUDICIAL) (See instructions) retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plangman, Joel	Amount of contribution (\$) \$120.00	In-kind contribution description Purchased microwave for Austin office
	Contributor address; City; State; Zip Code  Denton, TX 76209	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		Employer (FOR NON-JUDICIAL) (See instructions) retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preston, Melinda	Amount of contribution (\$) \$240.00	In-kind contribution description Purchased microfridge storage unit for Austin office
	Contributor address; City; State; Zip Code  Frisco, TX 75033	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Executive Director		Employer (FOR NON-JUDICIAL) (See instructions) CCDF	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 5/5 Rpt: 30/47	
<b>2</b> FILER NAME Hopper, Stephen (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084941	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b> 420.00	
<b>5</b> Date 12/09/2024	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tafoya, Judith	<b>8</b> Amount of contribution (\$) \$500.00	<b>9</b> In-kind contribution description Purchased a color printer for Austin office
	<b>7</b> Contributor address; City; State; Zip Code  Denton, TX 76207	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) retired	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Everett	Amount of contribution (\$) \$50.00	In-kind contribution description Purchased sound bar for Austin office
	Contributor address; City; State; Zip Code  FARMERSVILLE, TX 75442	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 31/47

2 FILER NAME  
Hopper, Stephen (Mr.)

3 Filer ID (Ethics Commission Filers)  
00084941

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date  
12/01/2024

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)  
Friends of UNT

7 Pledgor Address; City; State; Zip Code

Dallas, TX 75380

8 Amount of  
pledge (\$)  
\$2,000.00

9 In-kind description  
(If applicable)  
UNT original check was  
lost in mail. Pledged to  
renew check after July  
1 2025.

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/16 Rpt: 32/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
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<b>4</b> Date 11/29/2024	<b>5</b> Payee name AT&T Internet
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<b>6</b> Amount (\$) \$65.65	<b>7</b> Payee address; City; State; Zip Code 208 South Akard Street  Dallas, TX 75202
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Internet for Austin	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet for Austin
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/24/2024	Payee name AT&T Internet
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Amount (\$) \$51.50	Payee address; City; State; Zip Code 208 South Akard Street  Dallas, TX 75202
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Austin internet	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Austin internet
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/29/2024	Payee name Airbnb
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Amount (\$) \$192.01	Payee address; City; State; Zip Code 888 Brannan Street 4th Floor San Francisco, CA 94103
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel for incoming COS and LD	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for incoming COS and LD to visit district
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/16 Rpt: 33/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/19/2024	<b>5</b> Payee name Airbnb	
<b>6</b> Amount (\$) \$284.77	<b>7</b> Payee address; City; State; Zip Code 888 Brannan Street 4th Floor San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel for COS and LD	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for COS and LD visit to district
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Amazon	
Amount (\$) \$21.34	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Silent Auction item for D3C
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Anedot, INC	
Amount (\$) \$511.82	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online processing fees for report date range
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/16 Rpt: 34/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/20/2024	<b>5</b> Payee name Blackburn, Benjamin	
<b>6</b> Amount (\$) \$1,900.00	<b>7</b> Payee address; City; State; Zip Code 605 W 14th St  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Austin rent	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Austin rent
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/05/2024	Payee name Blackburn, Benjamin	
Amount (\$) \$3,800.00	Payee address; City; State; Zip Code 605 W 14th St  Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Austin rent	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Austin rent for December and January
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/06/2024	Payee name Captiol Gift Shop	
Amount (\$) \$324.75	Payee address; City; State; Zip Code 1400 Congress Ave E1.006 Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteers Christmas gifts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/16 Rpt: 35/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/25/2024	<b>5</b> Payee name Copano Bay Press	
<b>6</b> Amount (\$) \$507.53	<b>7</b> Payee address; City; State; Zip Code 418 Peoples Street  Corpus Christi, TX 78401	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Austin Office	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10 art posters for Austin office walls
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2024	Payee name Decatur Chamber of Commerce	
Amount (\$) \$10.00	Payee address; City; State; Zip Code PO Box 474  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense parade entry fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2024	Payee name Denton county Conservative Coalition	
Amount (\$) \$773.41	Payee address; City; State; Zip Code 6101 Long Prairie Rd STE 744 Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/16 Rpt: 36/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
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<b>4</b> Date 11/13/2024	<b>5</b> Payee name Denton county Conservative Coalition
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<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code 6101 Long Prairie Rd STE 744 Flower Mound, TX 75028
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Silent Auction Item
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/18/2024	Payee name Dropbox
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Amount (\$) \$21.31	Payee address; City; State; Zip Code 333 Brannan Street  San Francisco, CA 94107
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2024	Payee name Dropbox
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Amount (\$) \$21.31	Payee address; City; State; Zip Code 333 Brannan Street  San Francisco, CA 94107
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/16 Rpt: 37/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/05/2024	<b>5</b> Payee name First State Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 661 W Thompson St  Decatur, TX 76234	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Incoming wire fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2024	Payee name First State Bank	
Amount (\$) \$24.04	Payee address; City; State; Zip Code 661 W Thompson St  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense checks for new business checking account
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name First State Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 661 W Thompson St  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/16 Rpt: 38/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/01/2024	<b>5</b> Payee name Google Suites	
<b>6</b> Amount (\$) \$27.63	<b>7</b> Payee address; City; State; Zip Code 500 W 2nd St Suite 2900 Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Google Suites	
Amount (\$) \$36.39	Payee address; City; State; Zip Code 500 W 2nd St Suite 2900 Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2024	Payee name Griffin Communications	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code 176 Venice Cove  Austin, TX 78737	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/16 Rpt: 39/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Griffin Communications	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 176 Venice Cove  Austin, TX 78737	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name Holiday Inn	
Amount (\$) \$133.34	Payee address; City; State; Zip Code 5274 US-83  Rio Grande City, TX 78582	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Border meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/24/2024	Payee name Hopper, Andy	
Amount (\$) \$5,400.00	Payee address; City; State; Zip Code 1581 CR 2224  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense partial loan repayment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/16 Rpt: 40/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/01/2024	<b>5</b> Payee name Hoy, Ella	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 219 Amanda Way  Decatur, TX 76234	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Director
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Hoy, Ella	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 219 Amanda Way  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense District Director
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Hoy, Ella	
Amount (\$) \$21.90	Payee address; City; State; Zip Code 219 Amanda Way  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for gift purchase for donation to charity for Wise Republican Women Christmas party
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/16 Rpt: 41/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 10/29/2024	<b>5</b> Payee name IOffice	
<b>6</b> Amount (\$) \$24.68	<b>7</b> Payee address; City; State; Zip Code 1012 West Bus 380  Decatur, TX 76234	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense color copies for meeting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Loom	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 2225 Lawson Lane  Santa Clara , CA 95054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2024	Payee name Loom	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 2225 Lawson Lane  Santa Clara , CA 95054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/16 Rpt: 42/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/22/2024	<b>5</b> Payee name MailChimp	
<b>6</b> Amount (\$) \$326.74	<b>7</b> Payee address; City; State; Zip Code 675 Ponce De Leon Avenue Northeast Suite 5000 Atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/23/2024	Payee name MailChimp	
Amount (\$) \$402.63	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue Northeast Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2024	Payee name New Braunfels Smokehouse	
Amount (\$) \$169.80	Payee address; City; State; Zip Code 441 N Guenther Ave  New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Christmas gifts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/16 Rpt: 43/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 11/08/2024	<b>5</b> Payee name Putnam, Elijah	
<b>6</b> Amount (\$) \$120.00	<b>7</b> Payee address; City; State; Zip Code 997 CR 1111  Decatur, TX 76234	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign removals
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2024	Payee name Putnam, Rachel	
Amount (\$) \$120.00	Payee address; City; State; Zip Code 997 CR 1111  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign removal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name Rudy's BBQ	
Amount (\$) \$15.44	Payee address; City; State; Zip Code 520 S Interstate 35  Denton, TX 76205	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/16 Rpt: 44/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/09/2024	<b>5</b> Payee name Sams Club	
<b>6</b> Amount (\$) \$328.21	<b>7</b> Payee address; City; State; Zip Code 2850 W University Drive  Decatur, TX 76201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decatur Parade candy
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Sign Up Genius	
Amount (\$) \$29.99	Payee address; City; State; Zip Code 1213 W Morehead St Suite 500 Charlotte, SC 28208	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) subscription	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2024	Payee name Southwest Airlines	
Amount (\$) \$765.95	Payee address; City; State; Zip Code 2702 Love Field Drive  Dallas, TX 75235	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Border meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/16 Rpt: 45/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
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<b>4</b> Date 11/13/2024	<b>5</b> Payee name Support Our Troops Robson Ranch
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<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code 11413 Ridgedale Ct  Denton, TX 76207
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Silent Auction item
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/29/2024	Payee name Texas Nuclear Alliance
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Amount (\$) \$181.04	Payee address; City; State; Zip Code 401 W 15th St suite 870 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Summit ticket discounted
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/29/2024	Payee name USPS
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Amount (\$) \$9.72	Payee address; City; State; Zip Code 206 E Walnut St.  Decatur, TX 76234
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) shipping	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense shipping
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/16 Rpt: 46/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941
<b>4</b> Date 12/27/2024	<b>5</b> Payee name USPS	
<b>6</b> Amount (\$) \$71.10	<b>7</b> Payee address; City; State; Zip Code 206 E Walnut St.  Decatur, TX 76234	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) shipping	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense shipping
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/27/2024	Payee name Wall Nostalgia	
Amount (\$) \$242.55	Payee address; City; State; Zip Code 1200 37th St SW # 13 Calgary Alberta T3C1S2 Canada	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Austin office	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense canvas prints of Wise and Denton historical courthouses for Austin office walls
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Walmart	
Amount (\$) \$215.94	Payee address; City; State; Zip Code 800 S Highway 287  Decatur, TX 76234	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newark Parade candy
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/16 Rpt: 47/47	<b>2</b> FILER NAME Hopper, Stephen (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084941	
<b>4</b> Date 12/30/2024	<b>5</b> Payee name Wise Republican Women		
<b>6</b> Amount (\$) \$268.00	<b>7</b> Payee address; City; State; Zip Code PO Box 745  Bridgeport, TX 76426		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2 tickets for Red Gala	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held