CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FOF	RM (C/OH	
COVER SH	EET	PG 1	

Th	e C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00081727		2 Total pages	s filed: 87
3	CANDIDATE /	MS / MRS / MR	FIRST		MI		E USE ONLY
	OFFICEHOLDER	The Honorable	David M.				
	NAME					Date Received	
							CALLY FILED
		NICKNAME	LAST		SUFFIX	01/15/2025	
		Mayes	Middleton		II		
4	CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #: CIT	TY:	ZIP CODE	Date Hand-delivere	d or Date Postmarked
ľ	OFFICEHOLDER	P.O. Box 1526		.,			
	MAILING ADDRESS	1.0. Dox 1020				Receipt #	Amount
	Change of Address	Galveston, TX 77553				Date Processed	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
	TREASURER NAME	Mr.	J.P.				
		NICKNAME	LAST		SUFFIX		
			Bryan				
			-				
6	CAMPAIGN	STREET ADDRESS (NO F	O BOX PLEASE):	AP	T / SUITE #; CITY;	S	STATE; ZIP CODE
	TREASURER	1315 21st St.	//		,		,
	ADDRESS						
	(Residence or Business)	Columnation TV 77550					
		Galveston, TX 77550					
7	CAMPAIGN	AREA CODE PHO	ONE NUMBER	EXTENSION			
	TREASURER	(713) 753-1544					
	PHONE						
8	REPORT						
	TYPE	X January 15	30th day before	e election	Runoff		campaign treasurer
						7	officeholder only)
		July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)
	252102						
9	PERIOD COVERED	Month Day Year		HROUGH	Month Day	Year	
	001222	07/01/2024	11	HROUGH	12/31/2024	4	
			i				
10	ELECTION	ELECTION DATE		Primary	ELECTION TYPE	Cthar	
		Month Day Yea		linary	Runoff	Other	
				General	Special		
11	OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT	(if known)	
		State Senator District 11	_		State Senator Dis	strict 11	
⊢		ļ			1		
	GO TO PAGE 2						
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For	ns provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 87

13 C / OH NAME	Middleton II, David M	. (The Honorable)	14 Filer ID 00081727	(Ethics Commiss	sion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political exper These expenditures may have been made with d officeholders are required to report this informa-	out the candidate's or office	eholder's knowle	dge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAM	E		
		COMMITTEE CAMPAIGN TREASURER ADD	RESS		
16 CONTRIBUTION TOTALS		L IZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$	0.00
	\$ 2	67,527.00			
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					0.00
4. TOTAL POLITICAL EXPENDITURES					52,483.02
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH	E LAST DAY OF THE	\$ 3	48,321.06
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	AS OF THE LAST DAY	\$	0.00
17 AFFIDAVIT	•			•	
		I swear, or affirm, under per true and correct and include under Title 15, Election Coc	es all information required t		
			orable David M. Middlet		
		Signatur	e of Candidate or Officeho	lder	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
		aid		da	ay
01	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offic	er administering	Printed name of officer administering	Title of office	r administering c	path
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0).5dd2ace2

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 87 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Middleton II, David M. (The Honorable) 00081727 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 267,527.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 123,256.36 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 29,226.66 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

⊢							
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 1/26 Rpt: 4/87	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
Ĺ		David M. (The Honorable)			_	00081727	
4	Date	5 Full name of contributor	ut-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/12/2024	A&M PAC					\$2,500.00
		6 Contributor address; City; State; Zip	ip Code				
		1					
		1					
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
╞	Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	ATT Texas PAC					\$5,000.00
	Contributor address; City; State; Zip Code						
		1					
		Austin, TX 78701					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor X out	ut-of-state PAC (ID#: <u>CO</u>	0040279)		Amount of Contribution (\$)	
	12/12/2024	Abbott Laboratories Employee F	PAC				\$750.00
		Contributor address; City; State; Zip	ip Code				
		1					
L		Abbott Park, IL 60064					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Ahlberg, Trevor					\$5,000.00
		Contributor address; City; State; Zip	ip Code				
		1					
L		Irving, TX 75038					
		pation / Job title (See Instructions)		Employer (See Instructions)		
L	CEO			Cottonwood Financial			
	Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Alcorta III, Victor					\$300.00
		Contributor address; City; State; Zip	ip Code				
		1					
		1					
		Austin, TX 78746					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Attorney			Alcorta Law Firm			

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm	1	Total pages Schedule A1:	
	each ourde explains new to complete this h			Sch: 2/26 Rpt: 5/87	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Middleton II,	David M. (The Honorable)			00081727	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12/12/2024	Allen Boone Humpheries Robinson LLP				\$1,000.00
	6 Contributor address; City; State; Zip Code				
	Houston, TX 77027				
B Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	;)		
Date	Full name of contributor X out-of-state PAC (ID#: C	C00040535)		Amount of Contribution (\$)	
12/12/2024	American Express PAC				\$1,000.00
	Contributor address; City; State; Zip Code				
	Washington, DC 20004				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
12/17/2024 Associated Builders & Contractors of Texas PAC				\$1,000.00	
	Contributor address; City; State; Zip Code				
	Austin, TX 78767				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/02/2024	Associated General Contractors of Texas PAC				\$2,500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78768				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
Date	Full name of contributor x out-of-state PAC (ID#: C	C00450916)		Amount of Contribution (\$)	
12/12/2024	Asurion PAC				\$1,000.00
	Contributor address; City; State; Zip Code				
	Nashville, TN 37203				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 3/26 Rpt: 6/87		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Middleton II,	, David M. (The Honorable)			00081727	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/12/2024	BP North America Employee PAC				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77079				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/12/2024	BPA PAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	10/28/2024	Bailey, Shawn				\$500.00
		Contributor address; City; State; Zip Code		1		
		League City, TX 77573				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	CEO		AMOCO FCU			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	11/21/2024	Calpine Corporation PAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77002	1			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		
				_		
	Date	Full name of contributor X out-of-state PAC (ID#:	C00035006)	Γ	Amount of Contribution (\$)	
	11/21/2024	Chevron Employees PAC				\$2,000.00
		Contributor address; City; State; Zip Code		1		
		San Ramon, CA 94583	1			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 4/26 Rpt: 7/87		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Middleton II,	David M. (The Honorable)			00081727	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/12/2024	Chevron Phillips Chemical State PAC				\$1,000.00
	I	6 Contributor address; City; State; Zip Code				
	I					
	I					
	I	The Woodlands, TX 77380				
8	Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instructions)		
	F			<i>,</i>		
╞	Date	Full name of contributor X out-of-state PAC (ID#: 0	<u> </u>		Amount of Contribution (\$)	
	12/12/2024	Comcast Corporation & NBCUniversal PAC	, , ,		Allount of Contribution (+)	\$1,500.00
						Ψ1,000.00
	Contributor address; City; State; Zip Code					
	I	Philadelphia, PA 19103				
┝	Drincinal occu	·	Employer (See Instructions	<u> </u>		
	Principal occupation / Job title (See Instructions) Employer (See Instructions					
╘				_		
	Date Full name of contributor Image: state pack (ID#: C00793711)			Amount of Contribution (\$)		
	12/12/2024 Constellation Energy Corporation Employee PAC				\$1,000.00	
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Washington, DC 20001				
	Principal occu	<pre>ipation / Job title (See Instructions)</pre>	Employer (See Instructions)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	CraftPAC				\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Austin, TX 78766				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/20/2024	Delano, Joshua				\$7.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
	I	Orange, TX 77630				
\vdash	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Consultant		Delanoye Strategies LLC	С		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/26 Rpt: 8/87	
2	FILER NAME Middleton II,	David M. (The Honorable)		3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 12/12/2024	5 Full name of contributor out-of-state PAC (ID#: Dobson, Sean		7	Amount of Contribution (\$)	\$5,000.00
		6 Contributor address; City; State; Zip Code				
_	<u></u>	Austin, TX 78746		Ĺ		
8	Principal occu CEO	ipation / Job title (See Instructions)	9 Employer (See Instructions) Amherst	;)		
	Date	Full name of contributor X out-of-state PAC (ID#: C)	Γ	Amount of Contribution (\$)	
	11/11/2024	Employees of RTX Corporation PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Arlington, VA 22209				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	L 3)		
			1	,		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/12/2024	Enchanted Rock Holdings LLC Employee PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
⊢	Principal OCCL	ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
				ッ 		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/12/2024	Fieldstead and Company				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Irvine, CA 92623				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	12/12/2024	Foley & Lardner LLP				\$1,500.00
		Contributor address; City; State; Zip Code				
	D i sinclessi	Dallas, TX 75201		Ĺ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/26 Rpt: 9/87	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		David M. (The Honorable)		ľ	00081727	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/02/2024	Foley & Lardner LLP				\$1,500.00
		6 Contributor address; City; State; Zip Code		1		
		Dallas, TX 75201				
8	Principal occu		9 Employer (See Instructions	<u> </u> 5)		
				,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Friends of the University PAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78763				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Germania Farm Mutual PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Brenham, TX 77834				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Gray Reed PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77056				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Gulf States Toyota Inc State PAC				\$1,000.00
		Contributor address: City: State: Zip Code				
		Houston, TX 77077				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	The Instru	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/26 Rpt: 10/87	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
 -		David M. (The Honorable)				00081727	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/12/2024	HOMEPAC of Texas					\$2,000.00
		6 Contributor address; City; State	e; Zip Code		1		
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	HS Law PAC	_	/			\$500.00
		Contributor address; City; Stat					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/18/2024	Harte, William					\$5,000.00
		Contributor address; City; Stat	e; Zip Code		1		
		Fort Davis TV 70704					
┝	Dringing age	Fort Davis, TX 79734	i	Employer (Can Instructions			
	retired	pation / Job title (See Instructions)		Employer (See Instructions retired	<i>s)</i>		
╞	Date	Full name of contributor)		Amount of Contribution (\$)	
	12/12/2024	Hausenfluck, Amber	out-of-state PAC (ID#:)			\$500.00
	12/12/2024	Contributor address; City; State	e [.] Zin Code				\$000.00
		Contributor address, City, Stat					
		Austin, TX 78704					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Vice Preside	nt		TX Public Affairs			
Γ	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/16/2024	Heiser, Bradfield					\$5,000.00
		Contributor address; City; Stat	e; Zip Code		1		
	<u> </u>	Austin, TX 78731		E 1 (C 1 1 1 1	Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Real Estate			Bradfield Ventures			

_				1 Total pages Schedule A1:
	The Instru	ction Guide explains how to complete this fo	orm.	Sch: 8/26 Rpt: 11/87
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Middleton II,	, David M. (The Honorable)	!	00081727
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	12/17/2024	Hillman, Hillman		\$500.00
		6 Contributor address; City; State; Zip Code	1	1
			1	
		Dickinson, TX 77539		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	<u>ا</u> ۵)
	Treasurer	1	Hillman Shrimp & Oyster	
	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	12/12/2024	Hochheim Prarie PAC		\$1,000.00
		Contributor address; City; State; Zip Code		•
			1	
		Yoakum, TX 77995	1	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	\$)
		!	l	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/21/2024	Holland and Knight Texas PAC		\$1,000.00
		Contributor address; City; State; Zip Code		•
			1	
			1	
		Dallas, TX 75201	!	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	3)
			<u> </u>	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/07/2024	Hospitality Health ER PAC		\$5,000.00
		Contributor address; City; State; Zip Code		
			1	
		Bellaire, TX 77401	!	
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u></u>
	r moipai oooa			<i>''</i>
	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	11/07/2024	Houston Associated General Contractors PAC	/	\$2,000.00
	11,01,202	Contributor address; City; State; Zip Code	J	
			1	
			1	
		Houston, TX 77092	1	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>۲</u> ۱)
			1	
1				

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/26 Rpt: 12/87	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		David M. (The Honorable)			00081727	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/21/2024	Humane Society Legislative Fund of Texas PAC	;			\$1,000.00
		6 Contributor address; City; State; Zip Code				
-		Washington, DC 20037		-		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/17/2024	IEC of Texas PAC				\$750.00
		Contributor address; City; State; Zip Code				
	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
_	D-11-		<u> </u>		1	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>ቀ1 000 00</u>
	12/12/2024	Incline PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78702				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor X out-of-state PAC (ID#: _	000674176)		Amount of Contribution (\$)	
	12/12/2024	Insuring America PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
	Drincinal occu	Chicago, IL 60631 pation / Job title (See Instructions)	Employer (See Instructions	\		
	Philopai occu)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Jackson Walker LLP PAC			•••••••••••••••••••••••••••••••••••••••	\$1,500.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

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	The Instru	ction Guide explains how to complete	e this fo	orm.	1	Total pages Schedule A1: Sch: 10/26 Rpt: 13/87	
2	FILER NAME				3	Filer ID (Ethics Commissi	ion Filers)
		David M. (The Honorable)				00081727	,
4	Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7	Amount of Contribution (\$)	
	10/02/2024	Jennings, Bet					\$250.00
		6 Contributor address; City; State; Zip Code					
		Galveston, TX 77554					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Real Estate	Broker		Greenwood King			
	Date	Full name of contributor out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Jocelyn Dabeau Government Affairs					\$500.00
		Austin, TX 78731					
⊢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions)		
					,		
⊨	Data					Amount of Contribution (f)	
	Date	Full name of contributor out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	¢1 000 00
	08/27/2024						\$1,000.00
		Contributor address; City; State; Zip Code					
		Friendswood, TX 77546					
⊢	Dringing ago			Employer (Cap Instructions			
	retired	pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Teureu			Teureu			
	Date	Full name of contributor out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	12/17/2024	Kickapoo Traditional Tribe of Texas					\$10,000.00
		Contributor address; City; State; Zip Code					
		Eagle Pass, TX 78852					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	11/26/2024	Leal, Roland					\$1,000.00
		Contributor address; City; State; Zip Code					
		Georgetown, TX 78628					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Self Employe			Roland Leal Consulting	,		
\vdash							

6 Contributor address; City; State; Zip Code Austin, TX 78760 9 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/17/2024 Longbow Consulting Partners LLC Amount of Contribution (\$) Contributor address; City; State; Zip Code Austin, TX 78701 Amount of Contribution Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)					
2 FILER NAME 3 Filer ID (Elhes Commission Filers) Middleton II, David M. (The Honorable) 0 od state PAC (ID#) 3 Filer ID (Elhes Commission Filers) 4 Date 5 Full name of contributor 0 od state PAC (ID#) 7 Amount of Contribution (\$) 12/13/2024 5 Full name of contributor 0 od state PAC (ID#) 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 12/17/2024 Full name of contributor over state PAC (ID#) Amount of Contribution (\$) \$1,000.00 12/17/2024 Full name of contributor over state PAC (ID#) Amount of Contribution (\$) \$1,000.00 12/17/2024 Full name of contributor over state PAC (ID#) Amount of Contribution (\$) \$1,000.00 12/13/2024 Full name of contributor over state PAC (ID#) Amount of Contribution (\$) \$1,000.00 11/26/2024 Full name of contributor over state PAC (ID#) Amount of Contribution (\$) \$3,000.00 Date Full name of contributor ove	The Instru	ction Guide explains how to complete this f	^f orm.		
Middleton II, David M. (The Honorable) 00081727 4 Date 5 Full name of contributor out-of-state PAC (IDE) 7 Amount of Contribution (\$) Linebarger Goggan Blair & Sampson 7 Amount of Contribution (\$) S1,500.00 6 Contributor address: City: State: Zip Code 7 Amount of Contribution (\$) Linebarger Goggan Blair & Sampson 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (IDE Amount of Contribution (\$) Austin, TX 78701 Amount of Contribution (\$) S1,000.00 Date Full name of contributor out-of-state PAC (IDE Amount of Contribution (\$) S1,000.00 Date Full name of contributor out-state PAC (IDE	2 FILER NAME			-	on Filers)
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6 Contributor address; City; State; Zip Code Austin, TX 78760 Pincipal occupation / Job title (See Instructions) 9 Employer (See Instructions) 12/17/2024 Full name of contributor	4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
6 Contributor address; City: State; Zip Code Austin, TX 78760 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (DE:	12/13/2024				\$1,500.00
Austin, TX 78760 Austin, TX 78760 Principal occupation / Job title (See Instructions) Pemployer (See Instructions) Date Full name of contributor					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date 12/17/2024 Full name of contributor in out-of-state PAC (ID#					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date 12/17/2024 Full name of contributor in out-of-state PAC (ID#					
Date Full name of contributor out-of-state PAC (IDF:		Austin, TX 78760			
12/17/2024 Longbow Consulting Partners LLC \$1,000.00 Contributor address; City: State, Zip Code	8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	i)	
12/17/2024 Longbow Consulting Partners LLC \$1,000.00 Contributor address; City: State, Zip Code					
Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 McGuire Woods Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) Richmond, VA 23219 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor address; City; State; Zip Code Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Principal occupation / Job title (See Instructions) Employer (See Instructions) Contributor address; City; State; Zip Code Fort Worth, TX 76132 Principal occupation / Job title (See Instructions) Employer (See Instructions) Geo McRreaken, Doug Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:	12/17/2024				\$1,000.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$1,000.00 Contributor address; City; State; Zip Code \$1,000.00 Richmond, VA 23219 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor address; City; State; Zip Code Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Afficiency Amount of Contribution (\$) \$3,000.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3,000.00 CEO Fort Worth, TX 76132 Amount of Contribution (\$) \$5,000.00 11/26/2024 Full name of contributor out-of-state PAC (ID#:					
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$1,000.00 Contributor address; City; State; Zip Code \$1,000.00 Richmond, VA 23219 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor address; City; State; Zip Code Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Afficiency Amount of Contribution (\$) \$3,000.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3,000.00 CEO Fort Worth, TX 76132 Amount of Contribution (\$) \$5,000.00 11/26/2024 Full name of contributor out-of-state PAC (ID#:					
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McGuire Woods \$1,000.00 Contributor address; City; State; Zip Code Richmond, VA 23219 \$1,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:			1		
12/13/2024 McGuire Woods \$1,000.00 Contributor address; City; State; Zip Code Richmond, VA 23219 Fincipal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Fort Worth, TX 76132 Fort Worth, TX 76132 \$3,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3,000.00 CEO Four Worth, TX 76132 Focused Acute Care Partners \$3,000.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$5,000.00 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$5,000.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$5,000.00 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$5,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$5,000.00 <td>Principal occu</td> <td>ipation / Job title (See Instructions)</td> <td>Employer (See Instructions</td> <td>;)</td> <td></td>	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
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Richmond, VA 23219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/26/2024 McKenzie, Mark	12/13/2024	McGuire Woods			\$1,000.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/26/2024 McKenzie, Mark \$3,000.00 Contributor address; City; State; Zip Code Fort Worth, TX 76132 \$3,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3,000.00 CEO Fort Worth, TX 76132 Focused Acute Care Partners Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Thirdswood, TX 77546 Friendswood, TX 77546 Employer (See Instructions)		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/26/2024 McKenzie, Mark \$3,000.00 Contributor address; City; State; Zip Code Fort Worth, TX 76132 \$3,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3,000.00 CEO Fort Worth, TX 76132 Focused Acute Care Partners Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Thirdswood, TX 77546 Friendswood, TX 77546 Employer (See Instructions)					
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Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 McKenzie, Mark \$3,000.00 Contributor address; City; State; Zip Code Fort Worth, TX 76132 \$3,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Focused Acute Care Partners Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 Full name of contributor out-of-state; Zip Code Amount of Contribution (\$) Friendswood, TX 77546 Employer (See Instructions) Employer (See Instructions)	D in single and			、 、	
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Contributor address; City; State; Zip Code Fort Worth, TX 76132 Principal occutation / Job title (See Instructions) CEO Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) S5,000.00 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occutation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions))	Amount of Contribution (\$)	
Fort Worth, TX 76132 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Focused Acute Care Partners Date Full name of contributor or out-of-state PAC (ID#:) McRreaken, Doug Amount of Contribution (\$) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)	11/26/2024				\$3,000.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Focused Acute Care Partners Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 McRreaken, Doug \$5,000.00 Contributor address; City; State; Zip Code Friendswood, TX 77546 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Focused Acute Care Partners Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 McRreaken, Doug \$5,000.00 Contributor address; City; State; Zip Code Friendswood, TX 77546 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Focused Acute Care Partners Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 McRreaken, Doug \$5,000.00 Contributor address; City; State; Zip Code Friendswood, TX 77546 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)		Fort Worth TY 76132			
CEO Focused Acute Care Partners Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/26/2024 McRreaken, Doug \$5,000.00 Contributor address; City; State; Zip Code Friendswood, TX 77546 Friendswood, TX 77546 Principal occur / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	Principal occu		Employer (See Instructions	<u> </u>	
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11/26/2024 McRreaken, Doug \$5,000.00 Contributor address; City; State; Zip Code \$5,000.00 Friendswood, TX 77546 Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions))	Amount of Contribution (\$)	<u>مح مم مم</u>
Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)	11/26/2024	_			\$5,000.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Friendswood TX 77546			
	Principal occu		Employer (See Instructions	<u> </u>	
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/26 Rpt: 15/87	
2	FILER NAME Middleton II,	David M. (The Honorable)		3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 12/12/2024	5 Full name of contributor out-of-state PAC (ID#: NAIFA Texas IFAPAC		7	Amount of Contribution (\$)	\$1,000.00
		6 Contributor address; City; State; Zip Code				
Ļ		Austin, TX 78746				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/21/2024	NCHA's Texas Event PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Fort Worth, TX 76107				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor X out-of-state PAC (ID#: <u>C</u>	.00366559)	Γ	Amount of Contribution (\$)	
	12/12/2024	NRG Energy Inc. PAC				\$3,000.00
		Contributor address; City; State; Zip Code				
		Princeton, NJ 18540				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/21/2024	Nix, Kim				\$200.00
		Contributor address; City; State; Zip Code				
		Kemah, TX 77565				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/12/2024	Oncor Texas State PAC				\$5,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		

SCHEDULE	A1
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			1 Total pages Calcula A1
The Instru	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 13/26 Rpt: 16/87
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Middleton II,	David M. (The Honorable)		00081727
4 Date	5 Full name of contributor X out-of-state PAC	; (ID#: <u>C00855528</u>)	7 Amount of Contribution (\$)
09/03/2024	One Gas, Inc. PAC		\$750.0
	6 Contributor address; City; State; Zip Code		1
	Tulsa, OK 74103		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Date	Full name of contributor X out-of-state PAC	; (ID#: <u>C00215384</u>)	Amount of Contribution (\$)
12/12/2024	Oneok Employees PAC		\$500.0
	Contributor address; City; State; Zip Code		1
	Tulsa, OK 74102		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)
			1
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)
12/12/2024	PAC for Engineers		\$500.0
	Contributor address; City; State; Zip Code		
	Austin, TX 78768		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC	; (ID#:)	Amount of Contribution (\$)
12/12/2024	PAC of the Independent Insurance Agents		\$5,000.0
	Contributor address; City; State; Zip Code		1
	Austin, TX 78768	- <u> </u>	
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)
Date	Full name of contributor Out-of-state PAC) ۲/۱۰/۲۰)	Amount of Contribution (\$)
12/12/2024	PNM Responsible Citizens Group	(ID#/	\$2,000.0
			· · ·
	Albuquerque, NM 87158		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)

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	The Instru	ction Guide explains how	<i>ı</i> to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/26 Rpt: 17/87	
2	FILER NAME				3	Filer ID (Ethics Commissio	n Filers)
-		David M. (The Honorable)				00081727	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/13/2024	PharmPAC	_				\$1,000.00
		6 Contributor address; City; St	tate; Zip Code				
		Austin TV 70757					
0	Dringinal occu	Austin, TX 78757		9 Employer (See Instructions			
0	Phillipal Occu	pauon / Job lille (See Instructions)))		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/12/2024	Poinsett PLLC					\$1,000.00
		Contributor address; City; St					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)	,)	Employer (See Instructions	;)		
					_		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/09/2024	Poling, Matt					\$500.00
		Contributor address; City; St					
		College Station, TX 77840	n				
	Principal occu	Ipation / Job title (See Instructions		Employer (See Instructions	<u> </u>		
	Physician	pation / oub the loce manuelane		Baylor Scott White and		kas AM	
		Full name of contributor				Amount of Contribution (\$)	
	Date 12/17/2024	Populus Financial Group I	out-of-state PAC (ID#:_)			\$1,000.00
	12/1//2024						Φ1,000.00
		Contributor address; City; St	ate; Zip Coue				
		Austin, TX 75062					
	Principal occu	I Ipation / Job title (See Instructions	 (ذ	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
			,				
-	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/26/2024	Provider Coalition for Care				,	\$1,000.00
		Contributor address; City; St					
		Lewisville, TX 75007					
	Principal occu	pation / Job title (See Instructions	;)	Employer (See Instructions	;)		

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/26 Rpt: 18/87	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		David M. (The Honorable)			00081727	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/12/2024	Riceland Consulting LLC				\$500.00
		6 Contributor address; City; State; Zip Code		1		
		Eagle Lake, TX 77434				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Γ	Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	12/13/2024	Rodriguez, Oscar				\$200.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78705				
		pation / Job title (See Instructions)	Employer (See Instructions			
	President		TX Assn of Broadcaster	rs		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/12/2024	Ryan LLC PAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75240				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/17/2024	Scott, James				\$2,000.00
		Contributor address; City; State; Zip Code				
		Beaumont, TX 77705		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions			
	President		Trans-Global Solutions I	Inc		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/17/2024	Scott, William				\$2,000.00
		Contributor address; City; State; Zip Code				
		Beaumont, TX 77705				
		pation / Job title (See Instructions)	Employer (See Instructions			
	President		Trans-Global Solutions I	Inc		

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	The Instru	ction Guide explains how to complete this fo	vrm.	1	Total pages Schedule A1: Sch: 16/26 Rpt: 19/87	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		David M. (The Honorable)			00081727	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/07/2024	See B. Seen Eyecare LLC				\$500.00
		6 Contributor address; City; State; Zip Code				
		Friendswood, TX 77546				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/12/2024	Sentry Insurance A Mutual Co				\$1,000.00
				1		
		Stevens Point, WI 54481				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/21/2024	Sherlock, Colleen				\$50.00
		Contributor address; City; State; Zip Code		ł		
		Houston, TX 77019				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real rstate		Self employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/23/2024	Skufca, Richard G				\$20.00
		Contributor address; City; State; Zip Code				
		Galveston, TX 77551				
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
	retired		retired			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/11/2024	TALAPAC				\$1,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78759				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		L				

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	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/26 Rpt: 20/87	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		David M. (The Honorable)				00081727	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/17/2024	TARGA Resources Corp					\$2,000.00
		6 Contributor address; City; St	tate; Zip Code				
	<u> </u>	Houston, TX 77002	<u></u>		Ĺ		
8	Principal occu	pation / Job title (See Instructions	;)	9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/12/2024	TBA Bank PAC					\$5,000.00
		Contributor address; City; St					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	<u> </u> ເ)		
	T molpar out.		<i>''</i>		''		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	TREPAC				······	\$5,000.00
		Contributor address; City; St	tate; Zip Code				
	Duin singly good	Austin, TX 78768			Ĺ		
	Principal occu	pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/13/2024	TSHP PAC					\$500.00
		Contributor address; City; St	tate; Zip Code				
		Round Rock, TX 78665					
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	<u> </u> ו)		
	·		<i>''</i>		',		
-	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Tenaska Employees Texa	_				\$1,000.00
		Contributor address; City; St	tate; Zip Code				
		Omaha, NE 68154		· · · · · ·			
	Principal occu	pation / Job title (See Instructions	(ذ	Employer (See Instructions	5)		

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 18/26 Rpt: 21/87	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	David M. (The Honorable)		00081727	0111 110:07
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/12/2024	Tex-Pipe PAC			\$1,000.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)	
		l		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	·
12/12/2024				\$30,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
r Illioipai oooaj			')	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
12/12/2024	Texans for Reasonable Solutions PAC	/	Amount of Contribution (+)	\$3,500.00
 ,	Contributor address; City; State; Zip Code			+•,
	Austin, TX 78741			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	_
12/12/2024	Texas Aggregates & Concrete Association PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Round Rock, TX 78681			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
i illopai occaj			')	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
12/12/2024	Texas Association of Mutual Insurance Co PAC	/	,	\$500.00
	Contributor address; City; State; Zip Code			Ŧ ·
	Yoakum, TX 77995			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/26 Rpt: 22/87	
2	FILER NAME			2	Filer ID (Ethics Commissio	n Filors)
Ĺ		David M. (The Honorable)		J	00081727	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/12/2024	Texas Association of Staffing				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Texas Automobile Dealers Association PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78702				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
				,		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Texas Chemistry Council PAC	/			\$1,000.00
						+_,000.00
		Contributor address, City, State, Zip Code				
		Austin, TX 78701				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	i inicipai coco			,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Texas College of Emergency Physicians PAC				\$1,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/11/2024	Texas Cornerstone Credit Union League PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Contributor address, City, State, Zip Code				
		Dallas, TX 75255				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
-						

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 20/26 Rpt: 23/87
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	, David M. (The Honorable)		00081727
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/13/2024			\$500.00
	6 Contributor address; City; State; Zip Code		
	Austin, TX 78711		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/12/2024	Texas Dental Association PAC		\$1,000.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78704		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/17/2024	Texas Food and Fuel Association PAC		\$2,000.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78701		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/12/2024	Texas Land Title Association PAC		\$10,000.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78703		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/12/2024			\$2,000.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78767		
		Employer (Cap Instructions)	
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions,)
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions,)

The Instruc	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 21/26 Rpt: 24/87	
2 FILER NAME			3 Filer ID (Ethics Commission	on Eilers)
Middleton II,	David M. (The Honorable)		00081727	
4 Date	5 Full name of contributor out-of-state PAC (ID)#:)	7 Amount of Contribution (\$)	
11/21/2024	Texas Mortgage Bankers PAC			\$3,000.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
8 Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions)	<u>ا</u> ۶)	
-	· · ·		, 	
Date	Full name of contributor 🔲 out-of-state PAC (ID)#:)	Amount of Contribution (\$)	
12/12/2024	Texas Nurse Practitioners PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78735			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	\$)	
Date	Full name of contributor Out-of-state PAC (ID)#:)	Amount of Contribution (\$)	
11/07/2024	Texas Optometric PAC	m,	,	\$2,000.00
	Contributor address; City; State; Zip Code			*= , •·· ····
	Austin, TX 78705			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)	<u>)</u>	
Date	Full name of contributor 🔲 out-of-state PAC (ID)#:)	Amount of Contribution (\$)	
11/21/2024	Texas Restaurant Association PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78767			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	\$)	
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)	50 - DO OO
12/12/2024	Texas Society of Architects Committee			\$2,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78702			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)	<u></u>	
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The Instru	ction Guide explains how	/ to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/26 Rpt: 25/87	
2 FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
Middleton II,	, David M. (The Honorable)				00081727	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12/17/2024	Texas Towing & Storage	Association PAC				\$1,000.00
	6 Contributor address; City; St	ate; Zip Code:				
	Spring, TX 77386					
8 Principal occu	pation / Job title (See Instructions	;)	9 Employer (See Instructions	;)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
12/12/2024	The Posey Law Firm PC				.,	\$1,000.00
-	Contributor address; City; St					1 /-
		ale, Zip Couc				
	Austin, TX 78701					
Principal occu	I upation / Job title (See Instructions	 ٤)	Employer (See Instructions	上 5)		
		,		,		
Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
12/12/2024	The Storage Place					\$1,000.00
	Contributor address; City; St	tate: Zip Code				
	Corpus Christi, TX 78412					
Principal occu	upation / Job title (See Instructions	;)	Employer (See Instructions	;)		
Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
12/12/2024	The Texas State Universit	ty System PAC				\$1,500.00
	Contributor address; City; St	tate; Zip Code				
	Austin, TX 78701					
Principal occu	upation / Job title (See Instructions	;)	Employer (See Instructions	;)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
12/12/2024	The US Oncology Networ	k PAC				\$1,000.00
	Contributor address; City; St	tate; Zip Code				
	The Woodlands, TX 7738	.0				
Principal occu	upation / Job title (See Instructions	;)	Employer (See Instructions	;)		

	The Instru	ction Guide explains how to complet	e this f	orm.	1	Total pages Schedule A1: Sch: 23/26 Rpt: 26/87	
2	FILER NAME				2	Filer ID (Ethics Commissio	on Eilere)
		David M. (The Honorable)			J	00081727	
4	Date	5 Full name of contributor out-of-state	PAC (ID#:_)	7	Amount of Contribution (\$)	
	07/12/2024	Trone, Robert					\$2,000.00
		6 Contributor address; City; State; Zip Code					
		Potomac, MD 20654					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Owner			Total Wine			
F	Date	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Troxclair PC	- (_				\$1,000.00
							,_,
		Contributor address, City, State, Zip Code					
		Austin TX 70701					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state	PAC (ID#:_)		Amount of Contribution (\$)	
	11/26/2024	TXANA PAC					\$1,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78701					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	·						
╞	Date	Full name of contributor out-of-state	PAC (ID# [.])		Amount of Contribution (\$)	
	10/02/2024	Union Pacific Corporation Fund for Effe				(1)	\$3,000.00
	10/02/2021						<i>40,000.00</i>
		Contributor address; City; State; Zip Code					
		Washington, DC 20004					
⊢	Dringinglassy	-		Freedower (Coo Instructions	<u> </u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor X out-of-state	PAC (ID#: <u>(</u>) (00101766		Amount of Contribution (\$)	
	12/13/2024	United Airlines PAC					\$750.00
		Contributor address; City; State; Zip Code					
		Chicago, IL 60606					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
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SCHEDULE	A1
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The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 24/26 Rpt: 27/87	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Middleton II,	David M. (The Honorable)			00081727	
4 Date	5 Full name of contributor X out-of-state PAC (ID#: C	000274431)	7	Amount of Contribution (\$)	
12/12/2024	UnitedHealth Group PAC				\$2,000.00
	6 Contributor address; City; State; Zip Code		1		
	Washington, DC 20004				
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
12/17/2024	University of Houston PAC				\$2,500.00
	Contributor address; City; State; Zip Code				
D in simple and	Houston, TX 77046		Ĺ		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor X out-of-state PAC (ID#: C	00109546)	Π	Amount of Contribution (\$)	
12/12/2024	Valero PAC				\$2,500.00
	Contributor address; City; State; Zip Code				
	San Antonio, TX 78269				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)	$\overline{\top}$	Amount of Contribution (\$)	
12/17/2024	Verizon Communications Inc Good Government	Club		· · · · · · · · · · · · · · · · · · ·	\$1,000.00
	Contributor address; City; State; Zip Code				
	Austin TV 70704				
Dringing occu	Austin, TX 78701	Employer (See Instructions			
ΡΠΙΟμαί Ουυυ	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
12/17/2024	Veterinarian PAC				\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78754				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/26 Rpt: 28/87	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Middleton II,	, David M. (The Honorable)			00081727	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/12/2024	Vistra Employees PAC	ļ			\$5,000.00
		6 Contributor address; City; State; Zip Code				
_	Driveinel eest	Irving, TX 75039		Ĺ		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/13/2024	Vital, Carlos				\$1,000.00
		Contributor address; City; State; Zip Code				
		Friendswood, TX 77546				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Physician		Self			
	Date	Full name of contributor X out-of-state PAC (ID#:	C00093054)		Amount of Contribution (\$)	
	12/12/2024	WalPAC				\$1,000.00
		Contributor address; City; State; Zip Code				
∟	D i sizal essi	Bentonville, AR 72716		Ĺ		
	Principai occu	upation / Job title (See Instructions)	Employer (See Instructions))		
_	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/21/2024	Weekley, Richard				\$5,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77027				
\vdash	Principal occu	Lupation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Real Estate	Developer	Self Employed			
F	Date	Full name of contributor X out-of-state PAC (ID#:	 C00034595)		Amount of Contribution (\$)	
	11/21/2024	Wells Fargo & Co Employee PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Washington DC 12006				
⊢	Dringingl occu	Washington, DC 12006	Employer (Soo Instructions			
	Philicipai occu	upation / Job title (See Instructions)	Employer (See Instructions))		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/26 Rpt: 29/87	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Middleton II,	David M. (The Honorable)			00081727	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/27/2024	Wexler, Adam				\$1,500.00
		6 Contributor address; City; State; Zip Code		1		
		Miami, FL 33130				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	- 5)		
	Chairman of	the Board	PrizePicks			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/17/2024	William F Scott 1991 Trust)		/ouni of Continuation (+)	\$2,000.00
	12/11/2021	Contributor address; City; State; Zip Code				¢2,000.00
		Contributor address, City, State, Zip Code				
		Beaumont, TX 77705				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>լ</u> ։)		
				,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	<u> </u>	Amount of Contribution (\$)	
	12/12/2024	Wine and Spirits Wholesalers of Texas PAC)			\$5,000.00
	12/12/2024					φ3,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ټ)		
	·	· · · · · · · · · · · · · · · · · · ·		<i>,</i>		
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	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office States Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 1/52 Rpt: 30/87	Middleton II, David M. (The Honorable)	00081727					
4	Date 5 Payee name							
	10/03/2024	Alvin Community Food Pantry						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00	1212 S Durrant St						
		Alvin, TX 77511						
8	PURPOSE							
ľ	OF	· · · · · · · · · · · · · · · · · · ·	utside of Texas. Complete Schedule T.					
	EXPENDITURE		TX, officeholder living expense					
		Donation						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI							
	Date	Payee name						
	10/22/2024	American Legion						
_	Amount (\$)	Payee address; City; State; Zip Code						
	\$500.00 1402 FM 517							
		San Leon, TX 77539						
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		utside of Texas. Complete Schedule T.					
	-		TX, officeholder living expense					
	Event Spionsoship							
_		Constitute /Office helder name						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
⊨	Date	Payee name						
	10/08/2024	Bank Fee						
-	Amount (\$)	Payee address; City; State; Zip Code						
	\$146.02	1900 Sam Houston St						
	+= .0.0=							
	Liberty, TX 77575							
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		utside of Texas. Complete Schedule T.					
	EXPENDITORE	Check if Austin, T	TX, officeholder living expense					
		Bank Service (Charges					
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
-								
	Sch: 2/52 Rpt: 31/87	Middleton II, David M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081727					
4	Date	5 Payee name						
	09/19/2024	Bay Area Republican Women						
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 50.00 PO Box 58103 Webster, TX 77598						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Advertising Expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/31/2024	Baytown Professional Firefighters Foundation						
	Amount (\$) Payee address; City; State; Zip Code							
	\$650.00	318 W. Texas Ave Baytown, TX 77521						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Spionsoship								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/05/2024	Bennett, Kaleb						
	Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 1389 Quail Run Dr						
		Troy, TX 76579						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense or for Campaign Services					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Fees Office Ov Food/Beverage Expense Polling Ex By - Gift/Awards/Memorials Expense Printing E			e /Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)
	Sch: 3/52 Rpt: 32/87	2	2 FILER NAME 3 Filer ID (Ethics Commiss Middleton II, David M. (The Honorable) 00081727						
4	Date 5 Payee name 08/02/2024 Bennett, Kaleb								
		-		Zip Co	do				
ľ	Amount (\$) \$3,500.00	ľ	1389 Quail Run Dr	zip co	ue				
	\$3,500.00								
			Troy, TX 76579						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	EXPENDITURE		Salaries/Wages/Contract Labor					officeholder living	plete Schedule T.
						Contract Lab			
								or oumpuly	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ght			Office he	eld
	Date		Payee name						
	09/05/2024		Bennett, Kaleb						
_	Amount (\$)		·	Zip Co	do				
	.,			Zip Cu	ue				
	\$3,500.00 1389 Quail Run Dr								
			Troy, TX 76579						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor						plete Schedule T.
	Check if Austin, 1X, officeholder living expense								
	Contract Labor for Campaign Services						II Services		
_	Complete ONLY if direct		Candidate/Officeholder name) Dffice sou	abt			Office he	ald
	expenditure to benefit C/OF			JIIICE SOU	ynt			Once ne	ciu
	Date		Payee name						
	10/08/2024		Bennett, Kaleb						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$3,500.00		1389 Quail Run Dr	·					
	Troy, TX 76579								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	EXPENDITURE		Salaries/Wages/Contract Labor						iplete Schedule T.
						Contract Lab		officeholder living	
						Contract Lab		or campaiy	
	Complete ONILV if direct	Ľ	Condidate/Officeholder name)ffico com	abt			Office	ald
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ynt			Office he	eiu

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
-	Sch: 4/52 Rpt: 33/87	Middleton II, David M. (The Honorable)	00081727				
4	Date 11/04/2024	Payee name Bennett, Kaleb					
6	Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 1389 Quail Run Dr Troy, TX 76579					
8	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/09/2024	Bennett, Kaleb					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$3,500.00	1389 Quail Run Dr Troy, TX 76579					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, officeholder living expense r for Campaign Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/31/2024	Berry Communications					
	Amount (\$) \$36,000.00	Payee address;City;State;ZipCode1014 W Milton St					
		Austin, TX 78701					
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense IVICES				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)						
	Sch: 5/52 Rpt: 34/87	Middleton II, David M. (The Honorable)	00081727						
4	Date 10/23/2024	5 Payee name Camp Political							
6	Amount (\$) \$4,243.75	7 Payee address; City; State; Zip Code \$4,243.75 401 NE 46th Oklahoma City, OK 73105							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense John Scott Mailer							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/28/2024	Camp Political							
	Amount (\$) Payee address; City; State; Zip Code \$4,287.50 401 NE 46th								
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description 									
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/25/2024	Capitol Giftshop							
	Amount (\$) \$346.40	Payee address; City; State; Zip Code 1400 Congress Ave E1.006 Austin, TX 78701							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)						
	Sch: 6/52 Rpt: 35/87	Middleton II, David M. (The Honorable)	00081727						
4	Date 09/13/2024	5 Payee name Capitol Giftshop							
6	Amount (\$) \$86.60	7 Payee address; City; State; Zip Code 0 1400 Congress Ave E1.006 Austin, TX 78701							
8	PURPOSE OF EXPENDITURE	Contributions/Donations Made By							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date Payee name 10/02/2024 Capitol Giftshop								
	Amount (\$) \$346.40	Payee address; City; State; Zip Code \$346.40 Lagrand Congress Ave E1.006 Austin, TX 78701							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. (c) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. (c) Check if Austin, TX, officeholder living expense Donation Items									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/20/2024	Capitol Giftshop							
	Amount (\$)Payee address; City; State; Zip Code\$108.251400 Congress AveE1.006Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment						ntal Expense tract Labor		Travel in District Travel Out of Distri	ipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 7/52 Rpt: 36/87							00081727	
4	Date 07/16/2024		Payee name Caruso, Ryan						
6	Amount (\$) \$500.00		Payee address; City; State 14606 Sweetwater Dr Baytown, TX 77523	; Zip Co	le				
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services					xpense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	jht			Office held	3
	Date		Payee name						
	08/05/2024		Caruso, Ryan						
	Amount (\$) \$500.00		Payee address; City; State 14606 Sweetwater Dr	; Zip Co	le				
			Baytown, TX 77523						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	nedule)		Check if Austin,	TX,	le of Texas. Comple officeholder living e Dr Campaign	xpense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	jht			Office held	ł
	Date		Payee name						
	09/23/2024		Caruso, Ryan						
	Amount (\$) \$500.00		Payee address; City; State 14606 Sweetwater Dr	; Zip Co	le				
			Baytown, TX 77523						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	nedule)		Check if Austin,	TX,	le of Texas. Comple officeholder living e or Campaign	xpense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	jht			Office held	t

			EXPENDITURE CATEGO	ORIES FOR	R BO	DX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)							
	Sch: 8/52 Rpt: 37/87		Middleton II, David M. (The Honorable	00081727							
4	Date 10/02/2024		Payee name Caruso, Ryan								
6	6 Amount (\$) \$500.00 \$500.00 Baytown, TX 77523 7 Payee address; City; State; Zip Code Baytown, TX 77523										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held			
	Date		Payee name								
	10/04/2024		Caruso, Ryan								
	Amount (\$) \$500.00		Payee address; City; State 14606 Sweetwater Dr	e; Zip Cc	ode						
			Baytown, TX 77523		<i>a</i> ,						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	chedule)	(b)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense or Campaign Services			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						Office held			
	Date		Payee name								
	10/08/2024		Caruso, Ryan								
	Amount (\$) \$500.00		Payee address; City; State 14606 Sweetwater Dr	e; Zip Co	ode						
			Baytown, TX 77523		1						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	chedule)	(b)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense for Campaign Services			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held			

			EXPENDITURE CATEGOR	RIES FOR	вс	DX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	rhead lense pens ages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Tatal pages Cabadula F1.		· · ·	100 10 001	iipic	ete tins form.	-	Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 9/52 Rpt: 38/87	2	Middleton II, David M. (The Honorable))			3	Filer ID (Ethics Commission Filers) 00081727
4	Date	5	Payee name					
	11/06/2024		Caruso, Ryan					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$1,000.00		14606 Sweetwater Dr					
			Baytown, TX 77523					
8	PURPOSE	(a)	-		(h)	Description		
ľ	OF	(",	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)	(0)	-	outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Calance, Wages, Contrast Labor			Check if Austin	, TX,	, officeholder living expense
						Contract Lab	or f	or Campaign Services
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name C	Office sou	ght			Office held
	Date		Payee name					
	12/16/2024		Caruso, Ryan					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$750.00		14606 Sweetwater Dr					
			Baytown, TX 77523					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T. , officeholder living expense
								for Campaign Services
						Contract Lub		or ouripaign cervices
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	nht			Office held
	expenditure to benefit C/Oł				<i></i>			
-	Date	<u> </u>	Payee name					
	07/16/2024		Caruso, Ryan					
_			-	Zip Co	10			
	Amount (\$) \$286.09		Payee address; City; State; 14606 Sweetwater Dr		Je			
	\$200.09		14000 Sweetwater Di					
			Deuteure TV 77500					
			Baytown, TX 77523					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	,	(b)	Description		
	EXPENDITURE		Transportation Equipment And Related	ł				ide of Texas. Complete Schedule T. , officeholder living expense
			Expense			Mileage Rein		
-	Complete ONLY if direct	<u>_</u>	Candidate/Officeholder name C	Office sou	nht			Office held
	expenditure to benefit C/OI			2.1100 3000	,			
-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 10/52 Rpt: 39/87	Middleton II, David M. (The Honorable)	00081727								
4	Date 08/05/2024	5 Payee name Caruso, Ryan									
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$312.22 14606 Sweetwater Dr Baytown, TX 77523										
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	09/11/2024	Caruso, Ryan									
	Amount (\$) Payee address; City; State; Zip Code \$762.92 14606 Sweetwater Dr										
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense bursement								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	10/04/2024	Caruso, Ryan									
	Amount (\$) \$822.86	Payee address; City; State; Zip Code 14606 Sweetwater Dr									
	Baytown, TX 77523										
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense bursement								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment Fees Office Overhead/M Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/C The Instruction Guide explains how to complete	Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Contract Labor OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)								
ľ	Sch: 11/52 Rpt: 40/87	licer NAME Iiddleton II, David M. (The Honorable)	00081727								
4	Date	ayee name									
	11/13/2024	Caruso, Ryan									
6 Amount (\$) 7 Payee address; City; State; Zip Code											
	\$618.41	4606 Sweetwater Dr									
		aytown, TX 77523									
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b)	Description								
	OF EXPENDITURE	ransportation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.								
		xpense	Check if Austin, TX, officeholder living expense Aileage Reimbursement								
		· · · · · · · · · · · · · · · · · · ·	meage Reinbursement								
9	Complete ONLY if direct	ndidate/Officeholder name Office sought	Office held								
	expenditure to benefit C/OF										
	Date	ayee name									
	12/31/2024	Caruso, Ryan									
⊢	Amount (\$)	ayee address; City; State; Zip Code									
	\$28.14	4606 Sweetwater Dr									
		aytown, TX 77523									
	PURPOSE	Category (See Categories listed at the top of this schedule) (b)	Description								
	OF EXPENDITURE	ransportation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.								
	-	xpense	Check if Austin, TX, officeholder living expense Mileage Reimbursement								
			meage Rembursement								
_	Complete ONLY if direct	ndidate/Officeholder name Office sought	Office held								
	expenditure to benefit C/Oł										
	Date	ayee name									
	08/05/2024	clear Creek Republican Women									
-	Amount (\$)	ayee address; City; State; Zip Code									
	\$500.00	20 Box 2171									
	\$000.00	0 000 2111									
	League City, TX 77574										
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description											
	OF EXPENDITURE	dvertising Expense	Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITORE		Check if Austin, TX, officeholder living expense								
			Event Spionsoship								
L											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held								
L											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	· · · · · ·	3 Filer ID (Ethics Commission Filers)							
	Sch: 12/52 Rpt: 41/87	Middleton II, David M. (The Honorable)	00081727							
4	Date 12/04/2024	5 Payee name Clear Creek Republican Women								
6	6 Amount (\$) \$55.00 7 Payee address; City; State; Zip Code PO Box 2171 League City, TX 77574									
8										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	12/05/2024	Coastal Grill								
	Amount (\$) \$20.57	Payee address; City; State; Zip Code 1827 Strand St								
		Galveston, TX 77550								
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense eston Pachyderm							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/07/2024	Coastal Grill								
	Amount (\$) \$20.57	Payee address; City; State; Zip Code 1827 Strand St								
		Galveston, TX 77550								
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense Iston Pachyderm							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			ent Expense es od/Beverage Expense t/Awards/Memorials B gal Services ne Instruction Gu	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	rhead pense pense (ages/	e /Contract Labor		Travel in District Travel Out of Di	Equipme t strict	Expense nt & Related Expense ry not listed above)	
1	Total pages Schedule F1:	2									cs Commission Filers)	\neg	
-	Sch: 13/52 Rpt: 42/87		Middleton II, David M. (The Honorable) 00081727										
4	Date	5	Payee name										
	07/08/2024		FedEx										
6	Amount (\$)	7	Payee address;	City;	State;	; Zip Coo	de						
	\$51.99		936 South Sha	ady Grove Rd									
			Memphis, TN	38120									
8	PURPOSE	(a)	Category (See C	Cotogories listed at th	top of this sch	andula)	(b)	Description					٦
	OF		Office Overhe			leuule)			outsid	de of Texas. Com	nplete So	chedule T.	
	EXPENDITURE				0		İ			officeholder living	g expens	se	
								Mail/Shipping)				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officel	nolder name	C	Office soug	ght			Office h	eld		
	Date	Γ	Payee name										
	07/19/2024		FedEx										
	Amount (\$)		Payee address;	City;	State;	; Zip Coo	de						-
	\$32.97	I	936 South Sha	-	. ,	, <u>-</u>	20						
	402.0												
			Memphis, TN 38120										
	PURPOSE OF EXPENDITURE		Category _{(See C} Office Overhe			iedule)			, TX,	de of Texas. Com officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officel	older name	C	Office soug	ght			Office h	eld		_
F	Date		Payee name										7
	07/31/2024		FedEx										
	Amount (\$)		Payee address;	City;	State [.]	; Zip Coo	db						_
	\$61.54		936 South Sha		Suuc,	, <i>ב</i> וף כככ	эс						
	Ψ01.07		950 50utri Sri	auy Grove ria									
			Memphis, TN	38120									
	PURPOSE	(a)	Category (See C	ategories listed at th	e top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Office Overhe	ad/Rental Exp	ense					de of Texas. Com			
										officeholder living	g expens	se	
								Mail/Shipping	J				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officel	iolder name	C	Office soug	Jht			Office h	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			vent Expense bes bod/Beverage Expens ift/Awards/Memorials begal Services he Instruction Gu	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense ages/Contrac	Expense ct Labor		Transportation E Travel in District Travel Out of Dis		
1	Total pages Schedule F1:	2									ssion Filers)	
-	Sch: 14/52 Rpt: 43/87	2	Middleton II, David M. (The Honorable) 00081727								3310111 11013)	
4	Date	5	Payee name									
	08/07/2024		FedEx									
6	Amount (\$)	7	Payee address	; City;	State;	; Zip Coo	le					
	\$52.11		936 South Sh	ady Grove Rd								
			Memphis, TN	38120								
8	PURPOSE	(a)	-	Categories listed at th			b) Descr	rintion				
Ũ	OF	(,		ead/Rental Exp		iedule)			outsic	de of Texas. Com	plete Schedule T.	
	EXPENDITURE							eck if Austin,	, тх,	officeholder living	expense	
							Mail/	Shipping)			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	eholder name	C	Office soug	ht			Office he	eld	
	Date		Payee name									
	08/09/2024		FedEx									
	Amount (\$)		Payee address	; City;	State:	; Zip Coo	le					
	\$50.76		2	ady Grove Rd	,	, 1						
	++++++++++++++++++++++++++++++++++++++		·									
			Memphis, TN 38120									
	PURPOSE OF EXPENDITURE	(a)		Categories listed at th ead/Rental Exp		edule)	Ch	eck if travel o	, TX,	de of Texas. Com officeholder living	plete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Office	holder name	C	Dffice soug	ht			Office he	eld	
	Date	ĺ	Payee name									
	08/15/2024		FedEx									
	Amount (\$)		Payee address	; City;	State	; Zip Coo	le					
	\$9.75		-	, ady Grove Rd	Otato,	, בוף סטנ						
	¢0110											
			Memphis, TN	38120								
	PURPOSE	(a)	Category (See	Categories listed at th	e top of this sch	edule)	b) Descr	ription				
	OF EXPENDITURE		Office Overhe	ead/Rental Exp	ense						plete Schedule T.	
										officeholder living	l expense	
							Mail/	Shipping	J			
	-											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office soug	ht			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide		Office Overh Polling Expe Printing Expe Salaries/Wag	ense jes/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:									
-	Sch: 15/52 Rpt: 44/87	Middleton II, David M. (The Honorable) 00081727								
4	Date 09/06/2024	Payee FedEx								
6				Ctoto	Zip Code					
6 Amount (\$) 7 Payee address; City; State; Zip Code \$12.25 936 South Shady Grove Rd Memphis, TN 38120										
		-				-				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Mail/Shipping										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidat	e/Officeholder name	0	Office sough	nt		Office held		
	Date	Payee	name							
	09/09/2024	FedEx								
	Amount (\$)	Pavee	address; City;	State:	Zip Code	2				
	\$51.88	936 So	buth Shady Grove Rd	,	P					
		Memphis, TN 38120								
	PURPOSE OF EXPENDITURE		ry (See Categories listed at the t Overhead/Rental Exper		edule) (I		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidat	e/Officeholder name	0	Office sough	it		Office held		
	Date	Payee	name							
	09/12/2024	FedEx								
	Amount (\$)	Pavee	address; City;	State:	Zip Code	2				
	\$51.88	-	buth Shady Grove Rd	olulo,	210 000					
		Memp	his, TN 38120							
	PURPOSE OF EXPENDITURE		ry (See Categories listed at the t Overhead/Rental Expe		edule) (l		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidat	e/Officeholder name	0	Office sough	it		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards nmittee Legal Servi	age Expense /Memorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2		Filer ID (Ethics Commission Filers)							
-	Sch: 16/52 Rpt: 45/87	2	Middleton II, David	M. (The Honorable))		3	00081727			
4	Date	5	Payee name								
	10/07/2024		FedEx								
6	Amount (\$)	7	Payee address; C	ity; State;	Zip Cod	е					
	\$65.02		936 South Shady G	rove Rd							
			Memphis, TN 38120)							
8	PURPOSE	(a)	-			b) Description					
ľ	OF	(()	Category (See Categorie Office Overhead/Re		edule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Once Overneau/Re	iniai Expense				, officeholder living expense			
						Mail/Shipping	a				
							-				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Dffice soug	ht		Office held			
	Date		Payee name								
	10/11/2024		FedEx								
				ity; State;	Zip Cod	0					
	Amount (\$)				Zip Cou	e					
	\$24.50		936 South Shady Grove Rd								
			Memphis, TN 38120								
	PURPOSE OF EXPENDITURE	(a)	Category _{(See Categorie} Office Overhead/Re		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Dffice soug	ht		Office held			
	Date		Payee name								
	10/15/2024		FedEx								
				it Ctata	Zin Cad	-					
	Amount (\$)		•		Zip Cod	e					
	\$51.66		936 South Shady G	rove Ra							
			Memphis, TN 3812)							
	PURPOSE	(2)				b) Description					
	OF	(()	Category (See Categorie		edule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE						, officeholder living expense				
						Mail/Shipping					
						· · · - · · · · · · · · · · · · · · · ·					
	Complete ONLY if direct		andidate/Officeholder	name C	Office soug	ht		Office held			
	expenditure to benefit C/OF										
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead, Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Travel in District Travel Out of District Contract Labor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:									
-	Sch: 17/52 Rpt: 46/87	Middleton II, David M. (The Honorable)	00081727							
4	Date	Payee name								
	10/24/2024	FedEx								
6 Amount (\$) 7 Payee address; City; State; Zip Code \$12.25 936 South Shady Grove Rd Memphis, TN 38120										
8	PURPOSE	Category (a. a. the state of th	Description							
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mail/Shipping										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/07/2024	FedEx								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$51.59	936 South Shady Grove Rd Memphis, TN 38120								
	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mail/Shipping							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/14/2024	FedEx								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$52.93	936 South Shady Grove Rd								
		Memphis, TN 38120								
	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mail/Shipping							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held							

			EXPENDITURE	CATEGOF	RIES FOR I	3OX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guid		Office Overh Polling Exper Printing Expe Salaries/Wag	ense Jes/Contract Labor		Travel in District Travel Out of Distri	upment & Related Expense
1	Total pages Sabadula E1:	The Instruction Guide explains how to complete this form.							(Ethics Commission Eilors)
1	Total pages Schedule F1: Sch: 18/52 Rpt: 47/87		NAME eton II, David M. (The H	onorable))		3	Filer ID 00081727	(Ethics Commission Filers)
4	Date	5 Payee	name						
	11/25/2024	FedE	ĸ						
6 Amount (\$) \$81.25 7 Payee address; City; State; Zip Code \$81.25 936 South Shady Grove Rd Memphis, TN 38120									
8	PURPOSE	a) Cateo	NV (Cas Catagorias listed at the t	on of this och	adula) (t) Description			
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Office Overhead/Rental Expense Check if travel outside of Texas. C Office Overhead/Rental Expense Check if Austin, TX, officeholder li Mail/Shipping									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	C	Office sough	t		Office held	d
	Date	Payee	name						
	11/25/2024	FedE	ĸ						
	Amount (\$)	Payee	address; City;	State;	Zip Code	9			
	\$50.53		outh Shady Grove Rd ohis, TN 38120		·				
	PURPOSE OF EXPENDITURE		ory (See Categories listed at the t Overhead/Rental Expe		edule) (t		ı, TX,	de of Texas. Comple officeholder living e	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate/Officeholder name	C	Office sough	t		Office held	b
	Date	Payee	name						
	11/29/2024	FedE							
	Amount (\$)	Payee	address; City;	State;	Zip Code)			
	\$41.20		outh Shady Grove Rd						
		Memp	ohis, TN 38120		i				
	PURPOSE OF EXPENDITURE		Dry (See Categories listed at the t Overhead/Rental Expe		edule) (k		ı, ТХ,	de of Texas. Comple officeholder living e	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	C	Office sough	it		Office held	t

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper Imittee Legal Services The Instruction Guide e		Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)									
-	Sch: 19/52 Rpt: 48/87		Middleton II, David M. (The Honorable) 00081727										
4	Date	5	Payee name										
	12/11/2024		FedEx										
6	Amount (\$)	7	Payee address; City;	State;	; Zip Cod	e							
	\$54.09		936 South Shady Grove Rd										
			-										
			Momphie TN 29120										
			Memphis, TN 38120		r								
8	PURPOSE OF	(a)	Category (See Categories listed at the top		edule)	b) Description							
	EXPENDITURE		Office Overhead/Rental Expens	e				ide of Texas. Complete Schedule T. , officeholder living expense					
						Mail/Shipping		, uncertoider inving expense					
						Mailenipping	9						
_	Complete ONIL V if direct		and data (Office held on none					Office held					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	nt		Onice held					
_	Date		Device nome										
			Payee name										
	12/20/2024		FedEx										
	Amount (\$)		Payee address; City;	State;	; Zip Cod	e							
	\$45.85		936 South Shady Grove Rd										
			Memphis, TN 38120										
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule) (b) Description							
	OF EXPENDITURE							rel outside of Texas. Complete Schedule T.					
	EXPENDITORE						k if Austin, TX, officeholder living expense						
						Mail/Shipping	g						
	Complete ONLY if direct		Candidate/Officeholder name	C	Office soug	ht		Office held					
	expenditure to benefit C/OI	Н											
	Date		Payee name										
	12/23/2024		FedEx										
	Amount (\$)		Payee address; City;	Stato	Zip Cod	0							
				Sidle,	, zip cou	e							
	\$54.09		936 South Shady Grove Rd										
			Memphis, TN 38120										
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule)	b) Description							
	OF		Office Overhead/Rental Expens		,	Check if travel	outs	ide of Texas. Complete Schedule T.					
	EXPENDITURE					Check if Austir	n, TX	, officeholder living expense					
						Mail/Shipping	g						
	Complete ONLY if direct		Candidate/Officeholder name	C	Office soug	ht		Office held					
	expenditure to benefit C/OI	Н											
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	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		e Gift/Awar Legal Sei	erage Expense ds/Memorials Expens	o P Se P S	Office Overh Polling Exper Printing Expe Galaries/Wag	ense Jes/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2 FIL						3	Filer ID	(Ethics Commission Filers)	
-	Sch: 20/52 Rpt: 49/87		Idleton II, David	M. (The Hone	orable)			1	00081727		
4	Date 08/12/2024	5 Pay Fec	ee name IEx								
6 Amount (\$) 7 Payee address; City; State; Zip Code \$9.75 936 South Shady Grove Rd Memphis, TN 38120											
8	PURPOSE OF EXPENDITURE		egory _{(See Catego} ce Overhead/F			_{ile)} (t		η, TX,	de of Texas. Com officeholder living	plete Schedule T. g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholde	r name	Offi	ce sough	it		Office he	eld	
	Date	Pay	ee name								
	08/06/2024	Frie	ends of Dr. Gre	g Bonnen							
Amount (\$) Payee address; City; State; Zip Code \$408.00 PO Box 1183 FO Box 1183 FO Box 1183											
		Frie	endswood, TX 7	7549							
	PURPOSE OF EXPENDITURE	Cor	egory _{(See Catego} ntributions/Don ndidate/Officeh	ations Made B	У	,		n, TX,	officeholder living	plete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held OH							eld		
	Date	Pav	ee name								
	10/04/2024	Frie	ends of Dr. Gre	g Bonnen							
	Amount (\$) \$204.00	,	ee address; Box 1183	City;	State; Z	Zip Code)				
		Frie	endswood, TX 7	7549							
	PURPOSE OF EXPENDITURE	Cor	egory _{(See Catego} ntributions/Don ndidate/Officeh	ations Made B	y			η, TX,	officeholder living	plete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholde	r name	Offi	ce sough	it		Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 21/52 Rpt: 50/87	Middleton II, David M. (The Honorable)	00081727								
4	Date	Payee name									
	10/11/2024	Galveston Republican Women									
6	Amount (\$)	Payee address; City; State; Zip Code									
	\$30.00	908 Layfair Place									
	Friendswood, TX 77546										
8	PURPOSE) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Fees Check if travel o	outside of Texas. Complete Schedule T.								
			TX, officeholder living expense								
	Event Ticket										
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held								
expenditure to benefit C/OH											
	Date	Payee name									
07/02/2024 Google											
	Amount (\$)	Payee address; City; State; Zip Code									
	\$75.89	1600 Amphitheatre Parkway									
		Mountain View, CA 94303									
	PURPOSE OF	(b) Description	i i i Trucci Comulato Cobadula T								
	EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense								
			Dues & Subscriptions								
	Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	ght Office held								
	expenditure to benefit C/OF										
	Date	Payee name									
	08/02/2024	Google									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$75.89	1600 Amphitheatre Parkway									
		Mountain View, CA 94303									
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE		outside of Texas. Complete Schedule T.								
		Check if Austin, Dues & Subsc	TX, officeholder living expense								
			criptions								
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held								
	expenditure to benefit C/OF	Candidate/Onicenolder name Onice Sought	Once neid								
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			EX	(PENDITURE CA	TEGOR	RIES FOR	BOX 8(a	a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/B Gift/Aw nmittee Legal S	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising I Fees Office Overhead/Rental Expense Transportation Equipment Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a categor							quipment & F	Related Expense	
1	Total pages Schedule F1:	12			·			-	3	Filer ID	(Ethics Co	ommission Filers)	
±	Sch: 22/52 Rpt: 51/87		Middleton II, Dav	id M. (The Hon	orable))				00081727	(Ethios C.		
4	Date	5	Payee name										
	10/03/2024		Google										
6 Amount (\$) 7 Payee address; City; State; Zip Code													
\$151.78 1600 Amphitheatre Parkway													
Mountain View, CA 94303													
8	PURPOSE	(a)	Category (See Cate	gories listed at the top	of this sche	edule)		escription Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE		Office Overhead									le T.	
										officeholder living	expense		
							Due	s & Subs	scup	tions			
_							• .			0// k	••		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholo	Jer name		Office soug	iht			Office he	eld		
	Date		Payee name										
	11/01/2024		Google										
	Amount (\$)		Payee address;	City;	State;	Zip Coo	le						
\$75.88 1600 Amphitheatre Parkway													
			•										
			Mountain View, C	CA 94303									
	PURPOSE OF	(a)	Category (See Cate	gories listed at the top	of this sche	edule)	(b) Desc	•					
	EXPENDITURE	Fees					Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
							Dues & Subscriptions						
								o a com					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H						Office he	eld				
_	Date												
	12/09/2024		Payee name Google										
					Chata	7: 0.00							
	Amount (\$)		Payee address;	City;	State,	Zip Coo	le						
	\$75.89		1600 Amphitheat	re Parkway									
			Mountain View, C	CA 94303									
	PURPOSE	(a)	Category (See Categ	gories listed at the top	of this sche	edule)	(b) Desc	cription					
	OF EXPENDITURE		Fees							le of Texas. Com		le T.	
										officeholder living	expense		
							Due	s & Subs	crip	tions			
	0 1.1 0 0 0 0 0	<u> </u>								~ ~ ~ ~			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	ler name	0	Office soug	Iht			Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee	Legal Services	Expense morials Expense ion Guide expl a	Office Ove Polling Ex Printing E Salaries/V	erhea pense xpens Vages	se s/Contract Labor		Transportatio Travel in Dist Travel Out of	n Equ rict Distr	ising Expense uipment & Related Expense ict ategory not listed above)	
1	Total pages Schedule F1:	2							3	Filer ID		(Ethics Commission Filers)
1	Sch: 23/52 Rpt: 52/87	2			(The Honora	ble)				0008172		
4	Date	5	Payee name									
	11/12/2024		Gracie's									
6	Amount (\$)	7	Payee addre	ss; City;	Si	tate; Zip Co	ode					
	\$85.16											
Galveston, TX 77550												
8	PURPOSE	(a)	Category (s)	on Catogorios lis	ted at the top of thi	s schodulo)	(b)	Description				
-	OF		Food/Bever			s schedule)		Check if travel	outsi	de of Texas. C	omple	ete Schedule T.
	EXPENDITURE			ugo <u>n</u> ipon				Check if Austin	ı, ТХ,	officeholder liv	ving e	xpense
								Event Ticket				
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office he expenditure to benefit C/OH									hel	d		
	Date		Payee name									
	08/28/2024			uston Cour	icil of Federa	tion of Repu	ublio	can Women				
Amount (\$) Payee address; City; State; Zip Code												
	.,				3	iale, Zip Cu	Jue					
	\$1,000.00		7941 Katy F	-reeway								
			#272									
			Houston, T	X 77024								
	PURPOSE	(a)	Category (S	e Categories lis	ted at the top of thi	s schedule)	(b)	Description				
	OF		Advertising			e concadio)		·	outsi	de of Texas. C	omple	ete Schedule T.
	EXPENDITURE						Check if Austin, TX, officeholder living expense					
								Event Spions	sosł	nip		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder na	me	Office sou	ight			Office	hel	d
-	Date		Davee name									
	10/04/2024		Payee name HEB									
	Amount (\$)		Payee addre		Si	tate; Zip Co	bde					
	\$66.08		6430 Garth	Rd								
Baytown, TX 77521												
	PURPOSE	(a)	Category (S	ee Categories lis	ted at the top of thi	s schedule)	(b)	Description				
			Contribution			,		Check if travel	outsi	de of Texas. C	omple	ete Schedule T.
	EXPENDITURE				r/Political Ćo	mmittee		Check if Austin	ı, ТХ,	officeholder liv	ving e	xpense
								Donation Iter	ns			
	Complete ONLY if direct		Candidate/Offi	ceholder na	me	Office sou	ight			Office	hel	d
	expenditure to benefit C/OI	Н										
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 24/52 Rpt: 53/87		Middleton II, David M. (The Honorable))			00081727				
4	Date 11/14/2024		Payee name HEB								
6 Amount (\$) \$109.29 Payee address; City; State; Zip Code 6430 Garth Rd Baytown, TX 77521											
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Donation Items											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name C	Office sou	ght		Office held				
	Date		Payee name								
08/01/2024 Herrell, Andrew											
	Amount (\$) Payee address; City; State; Zip Code \$500.00 1912 Whitaker Dr										
			Austin, TX 78754								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)	Check if Austin	ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense for Campaign Services				
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name C	Dffice soug	ght		Office held				
	Date		Payee name								
	08/06/2024		Herrell, Andrew								
	Amount (\$) \$500.00		Payee address; City; State; 1912 Whitaker Dr	Zip Co	de						
			Austin, TX 78754								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)	Check if Austin	ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense for Campaign Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name C	Dffice sou	ght		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Fees Office Overhead/Rental Expense Transmitter Food/Beverage Expense Polling Expense Transmitter Gift/Awards/Memorials Expense Printing Expense Transmitter							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 25/52 Rpt: 54/87		Middleton II, David M. (The Honorable))			00081727				
4	Date 10/03/2024		Payee name Herrell, Andrew								
6 Amount (\$) 7 Payee address; City; State; Zip Code \$500.00 1912 Whitaker Dr Austin, TX 78754											
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description 											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name C	Office sou	ght		Office held				
	Date		Payee name								
	10/03/2024		Herrell, Andrew								
	Amount (\$) Payee address; City; State; Zip Code \$500.00 1912 Whitaker Dr										
			Austin, TX 78754								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	iedule)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense or Campaign Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held OH									
	Date		Payee name								
	11/26/2024		Herrell, Andrew								
	Amount (\$) \$500.00		Payee address; City; State 1912 Whitaker Dr	; Zip Co	de						
			Austin, TX 78754								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	iedule)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense or Campaign Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		candidate/Officeholder name C	Office sou	ght		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursem Office Overhead/Rental Expense Sift/Awards/Memorials Expense Salaries/Wages/Contract Labo	Se Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 26/52 Rpt: 55/87	Middleton II, David M. (The Honorable)	00081727								
4	Date	Payee name									
	08/01/2024	Herrell, Andrew									
6	Amount (\$)	Payee address; City; State; Zip Code									
	\$146.58	1912 Whitaker Dr									
Austin, TX 78754											
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	1								
	OF EXPENDITURE		avel outside of Texas. Complete Schedule T.								
			ustin, TX, officeholder living expense								
		Wineage 1									
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held								
expenditure to benefit C/OH											
	Date	Payee name									
	11/04/2024										
	Amount (\$)	Payee address; City; State; Zip Code									
\$3,247.50 5010 Broadway											
		Pearland, TX 77581									
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE		avel outside of Texas. Complete Schedule T. Justin, TX, officeholder living expense								
		veerais	Veterans Day Food Sponsorship								
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held								
	expenditure to benefit C/OI										
	Date	Payee name									
	12/18/2024	Inspira Resource Center									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$350.00	347-B E Parkwood Dr									
		Suite B									
Friendswood, TX 77546											
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description											
	OF EXPENDITURE		avel outside of Texas. Complete Schedule T.								
		Candidate/Officeholder/Political Committee	ustin, TX, officeholder living expense								
		Donation									
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held								
	expenditure to benefit C/OI	Cinco oodgin									
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)									
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)									
	Sch: 27/52 Rpt: 56/87	Middleton II, David M. (The Honorable)	00081727									
4	Date	Payee name										
	07/03/2024	Jones, Ryan										
6	Amount (\$)	Payee address; City; State; Zip Code										
\$500.00 6001 S Congress Ave												
Apt #2313												
		Austin, TX 78745										
8	PURPOSE											
	OF EXPENDITURE		outside of Texas. Complete Schedule T.									
	EXPENDITORE		TX, officeholder living expense									
		Contract Labo	or for Campaign Services									
_												
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date	Payee name										
08/12/2024 Jones, Ryan												
Amount (\$) Payee address; City; State; Zip Code												
\$500.00 6001 S Congress Ave												
		Apt #2313										
		Austin, TX 78745										
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T.									
			Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	09/16/2024	Jones, Ryan										
	Amount (\$)	Payee address; City; State; Zip Code										
	\$500.00	6001 S Congress Ave										
		Apt #2313										
Austin, TX 78745												
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description										
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.									
			TX, officeholder living expense or for Campaign Services									
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held									
	expenditure to benefit C/OI											

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							Transportation E Travel in District Travel Out of Di				
1	Total pages Schedule F1:					·	3	Filer ID	(Ethics Commission Filers)			
	Sch: 28/52 Rpt: 57/87		David M. (The Ho	norable)				00081727				
4	Date	Payee name										
	11/04/2024	Jones, Ryan										
6	Amount (\$)	Payee address	; City;	State; Z	Zip Cod	е						
\$500.00 6001 S Congress Ave												
Apt #2313												
Austin, TX 78745												
8	PURPOSE	Category (See	Categories listed at the to	n of this schedul	le) (b) Description						
	OF EXPENDITURE		es/Contract Labo			Check if travel			nplete Schedule T.			
	EXPENDITORE							, officeholder livin				
						Contract Lab	or 1	for Campaig	in Services			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office	holder name	Offic	ce soug	nt		Office h	eld			
	Date	Payee name										
12/09/2024 Jones, Ryan												
Amount (\$) Payee address; City; State; Zip Code												
\$500.00 6001 S Congress Ave												
	\$000.00	Apt #2313										
		•	745									
		Austin, TX 78										
	PURPOSE OF		Categories listed at the to		le) (b) Description	outsi	ide of Texas. Con	nnlete Schedule T			
	EXPENDITURE	Salaries/Wag		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
				Contract Labor for Campaign Services								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						eld				
-	Date	Payee name										
	12/05/2024	La Brisa										
	Amount (\$)	Payee address	; City;	State; Z	7in Cod	٩						
	\$27.51	501 N Wesley		State, 2		C						
	\$21.01		, 01									
League City, TX 77573												
	PURPOSE OF		Categories listed at the to	p of this schedul	ile) (b) Description			adata Oshaduda T			
	EXPENDITURE	Food/Bevera	ge Expense					ide of Texas. Con , officeholder livin	nplete Schedule T.			
						Meal at CCR			gexpense			
						-						
	Complete ONLY if direct	Candidate/Office	holder name	Offic	ce soug	nt		Office h	eld			
	expenditure to benefit C/OI											

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp mittee Legal Services The Instruction Guide		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 29/52 Rpt: 58/87		Middleton II, David M. (The Ho	onorable))			00081727			
4	Date 11/21/2024		Payee name La Brisa								
6	Amount (\$)		Payee address; City;	Stato	; Zip Cod						
\$29.75 501 N Wesley Dr League City, TX 77573											
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description 											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	ht		Office held			
	Date		Payee name								
	11/20/2024		Larry M Hicks CPA								
	\$372.00		4145 Gessner Suite B-415 Houston, TX 77080								
	PURPOSE OF EXPENDITURE						ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense Compliance Services			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held			
	Date	<u> </u>	Payee name								
	11/26/2024		Larry M Hicks CPA								
	Amount (\$)		Payee address; City;	State:	; Zip Cod	e					
	\$615.00		4145 Gessner Suite B-415	,	, 1						
			Houston, TX 77080								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the tr Accounting/Banking	op of this sch	nedule)	Check if Austin	ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense Compliance Services			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food Gift/A mittee Lega	Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel in Dis Gift/Awards/Memorials Expense Printing Expense Travel out o							Equipr t istrict	ng Expense ment & Related Expense gory not listed above)
	Tatal same Oshadula Et.				e explains l		npie	te this form.		Files ID	(=	
1	Total pages Schedule F1: Sch: 30/52 Rpt: 59/87		FILER NAME Middleton II, Da	vid M. (The H	onorable))				Filer ID 00081727	(Et	thics Commission Filers)
4	Date	5	Payee name									
	07/10/2024		Little, Briana									
6	Amount (\$) \$500.00											
8	PURPOSE						(h)	Description				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services									ense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehc	lder name	C	Office soug	ght			Office h	eld	
	Date		Payee name									
08/06/2024 Little, Briana												
Amount (\$) Payee address; City; State; Zip Code												
	\$500.00		211 Cinnabar B League City, T≻	-								
	PURPOSE OF EXPENDITURE		Category _{(See Cat} Salaries/Wages			edule)	(b)		, TX,	de of Texas. Con officeholder livin or Campaig	ig expe	ense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeho	lder name	C	Office soug	ght			Office h	eld	
	Date		Payee name									
	09/10/2024		Little, Briana									
	Amount (\$) \$500.00		Payee address; 211 Cinnabar B	City; ay Dr	State;	; Zip Coo	de					
			League City, TX	77573								
	PURPOSE OF EXPENDITURE		Category _{(See Cat} Salaries/Wages			edule)	(b)		, TX,	de of Texas. Con officeholder livin or Campaig	ig expe	ense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehc	lder name	C	Office soug	ght			Office h	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fe Fo Gir nittee Le	od/Beverage Expen t/Awards/Memorials gal Services	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	head ense pense ages/	e 'Contract Labor		Travel in Distric Travel Out of D	Equip ct Distric	oment & Related Expense
1	Tatal pages Cabadula F1	The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Fit								/Г	thing Commission Filoro	
1	Total pages Schedule F1: Sch: 31/52 Rpt: 60/87			David M. (The	Honorable))			3	Filer ID 00081727	(E	Ethics Commission Filers)
4	Date	5 P	ayee name									
	10/04/2024	L	ittle, Briana									
6	Amount (\$) \$500.00 To Payee address; City; State; Zip Code 211 Cinnabar Bay Dr League City, TX 77573											
8	PURPOSE						(h)	Decoription				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services									pense			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office he expenditure to benefit C/OH									neld			
	Date	F	ayee name									
	11/07/2024	L	ittle, Briana									
	Amount (\$)	F	ayee address;	City;	State;	; Zip Coo	le					
	\$500.00		11 Cinnabar eague City, ⁻	-								
	PURPOSE OF EXPENDITURE						, TX,	side of Texas. Complete Schedule T. X, officeholder living expense for Campaign Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Indidate/Office	holder name	C	Office soug	jht			Office h	neld	
	Date	F	ayee name									
	12/10/2024	L	ittle, Briana									
	Amount (\$) \$500.00		ayee address; 11 Cinnabar		State;	; Zip Coo	le					
		L	eague City, ⁻	FX 77573								
	PURPOSE OF EXPENDITURE			Categories listed at t PS/Contract L		iedule)			, TX,	de of Texas. Cor officeholder livin or Campaiç	ng exp	pense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Indidate/Office	holder name	С	Office soug	jht			Office h	neld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	┥						
-	Sch: 32/52 Rpt: 61/87	Middleton II, David M. (The Honorable) 00081727							
4	Date 07/10/2024	5 Payee name Little, Briana							
6	Amount (\$) \$927.24	7 Payee address; City; State; Zip Code 211 Cinnabar Bay Dr League City, TX 77573							
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date	Payee name	7						
	08/08/2024	Little, Briana							
	Amount (\$) \$492.45	Payee address; City; State; Zip Code 211 Cinnabar Bay Dr	_						
		League City, TX 77573							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date	Payee name	╡						
	09/13/2024	Little, Briana							
	Amount (\$) \$768.40	Payee address; City; State; Zip Code 211 Cinnabar Bay Dr							
		League City, TX 77573							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)						
-	Sch: 33/52 Rpt: 62/87	Middleton II, David M. (The Honorable)	00081727						
4	Date 10/15/2024	5 Payee name Little, Briana							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$948.59 211 Cinnabar Bay Dr League City, TX 77573								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Transportation Equipment And Related	utside of Texas. Complete Schedule T. TX, officeholder living expense bursement						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/13/2024	Little, Briana							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,037.42	211 Cinnabar Bay Dr League City, TX 77573							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense bursement						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/23/2024	Little, Briana							
	Amount (\$) \$501.27	Payee address; City; State; Zip Code 211 Cinnabar Bay Dr							
		League City, TX 77573							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense bursement						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)						
	Sch: 34/52 Rpt: 63/87	Middleton II, David M. (The Honorable)	00081727						
4	Date 12/31/2024	5 Payee name Little, Briana							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$798.24								
_	BUBBAAF								
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense ursement						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/11/2024	Lyrock, Josh							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	8006 Dogwood Court Mont Belvieu, TX 77523							
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense for Campaign Services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/06/2024	Lyrock, Josh							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	8006 Dogwood Court							
		Mont Belvieu, TX 77523							
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense for Campaign Services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Fees Office Overhead/Rental Expense Trans Food/Beverage Expense Polling Expense Trave Gift/Awards/Memorials Expense Printing Expense Trave					Transportation E Travel in District Travel Out of Dis		
1	Tatal pages Caledula F1			explains		ihiere			Filer ID	(Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 35/52 Rpt: 64/87	2	Middleton II, David M. (The Ho	norable)				Filer ID 00081727	(Ethics Commission Filers)
4	Date	5	Payee name							
	09/10/2024		Lyrock, Josh							
6	Amount (\$)	7	Payee address; City;	State	; Zip Coo	le				
	\$500.00		8006 Dogwood Court							
			Mont Belvieu, TX 77523							
8	PURPOSE	(a)				(h) p	ocorintion			
0	OF	(a)	Category (See Categories listed at the top Salaries/Wages/Contract Labo		nedule)	U) U T	escription Check if travel o	outsio	de of Texas. Com	nplete Schedule T.
	EXPENDITURE		Salaries/Wayes/Contract Labo	I		F	_		officeholder living	
						Ċ	_ Contract Labo			
									1 3	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	(Dffice soug	ht			Office he	eld
	Date		Payee name							
	10/03/2024		Lyrock, Josh							
		<u> </u>		Ctoto	, Zin Cor					
	Amount (\$)		Payee address; City;	State	; Zip Coo	ie				
	\$500.00		8006 Dogwood Court							
			Mont Belvieu, TX 77523							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Salaries/Wages/Contract Labo		nedule)		_	TX,	officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	(Office soug	ht			Office he	eld
	Date		Payee name							
	11/05/2024		Lyrock, Josh							
_			-	Stata	; Zip Coo					
	Amount (\$)		Payee address; City;	State,	, zip cot	ie				
	\$500.00		8006 Dogwood Court							
			Mont Belvieu, TX 77523							
	PURPOSE	(a)	Category (See Categories listed at the top	p of this sch	nedule)	(b) D	escription			
	OF EXPENDITURE		Salaries/Wages/Contract Labo	r			Check if travel o	outsic	de of Texas. Com	nplete Schedule T.
	EXPENDITORE								officeholder living	
						C	Contract Labo	or fo	or Campaig	n Services
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Credit Card Payment			Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District						Equipment & Related Expense t strict	
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)
1	Sch: 36/52 Rpt: 65/87	2	Middleton II, David M. (The Hor	norable)			3	00081727	
4	Date	5	Payee name							
	12/09/2024		Lyrock, Josh							
6	Amount (\$)	7	Payee address; City;	State	; Zip Coc	le				
	\$500.00		8006 Dogwood Court							
			Mont Belvieu, TX 77523							
8	PURPOSE	(0)				(h)	Description			
ð	OF	(a)	Category (See Categories listed at the top		nedule)	(u)	Description	outei	de of Texas Com	nplete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor						officeholder living	
							Contract Lab			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	(Dffice soug	jht			Office h	eld
	Date		Payee name							
	08/06/2024		Lyrock, Josh							
				State	· Zin Cor	10				
	Amount (\$)		Payee address; City;	State	; Zip Coc	je				
	\$141.37		8006 Dogwood Court							
			Mont Belvieu, TX 77523							
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Transportation Equipment And	Related	d					nplete Schedule T.
	-		Expense						officeholder living	g expense
							Mileage Rein	nbu	rsement	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office soug	ht			Office h	eld
	Date		Payee name							
	09/11/2024		Lyrock, Josh							
-	Amount (\$)	-	Payee address; City;	State	; Zip Coc	1e				
	\$156.78		8006 Dogwood Court	Sidle	, zip cou	JE				
	φ100.70									
			Mont Belvieu, TX 77523							
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b)	Description			
	OF		Transportation Equipment And				Check if travel	outsi	de of Texas. Com	nplete Schedule T.
	EXPENDITURE		Expense				Check if Austin	, TX,	officeholder living	g expense
							Mileage Rein	nbu	rsement	
	Complete ONLY if direct	<u> </u>	andidate/Officeholder name	(Office soug	jht			Office h	eld
	expenditure to benefit C/OI	Η			Ū					
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Overh Polling Expe Printing Expe Salaries/Wag	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Ex Travel in District Travel Out of District OTHER (enter a category not listed abo		
1	Total pages Schedule F1:	2	FILER NAME		·	3	Filer ID (Ethics Commissi	on Filers)	
-	Sch: 37/52 Rpt: 66/87		Middleton II, David M. (The Honorable)				00081727	,	
4	Date	5	Payee name						
	10/11/2024		Lyrock, Josh						
6	Amount (\$)	7	Payee address; City; State;	Zip Code	e				
	\$276.04		8006 Dogwood Court						
			Mont Belvieu, TX 77523						
8	PURPOSE				Decorintion				
ľ	OF		Category (See Categories listed at the top of this sche Transportation Equipment And Related		Description Check if travel	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Expense				, officeholder living expense		
			•		Mileage Rein	nbu	ursement		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sough	nt		Office held		
	Date		Payee name						
	11/05/2024		Lyrock, Josh						
_	Amount (\$)	-	Payee address; City; State;	Zip Code	9				
	\$262.64		8006 Dogwood Court	2.p 000	-				
	\$202.04								
			Mont Belvieu, TX 77523						
	PURPOSE OF		Category (See Categories listed at the top of this sche		Description				
	EXPENDITURE		Transportation Equipment And Related Expense				ide of Texas. Complete Schedule T.		
			Expense		Mileage Rein				
_	Complete ONLY if direct		andidate/Officeholder name O	office sough	nt		Office held		
	expenditure to benefit C/Oł			mee eeug.					
-	Data								
	Date 12/31/2024		Payee name Lyrock, Josh						
			-						
	Amount (\$)			Zip Code	9				
	\$289.44		8006 Dogwood Court						
			Mont Belvieu, TX 77523						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule) (I	b) Description				
	OF EXPENDITURE		Transportation Equipment And Related				ide of Texas. Complete Schedule T.		
			Expense				, officeholder living expense		
					Mileage Rein	טמוו	a sement		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sough	nt		Office held		
		•							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	5)						
-	Sch: 38/52 Rpt: 67/87	Middleton II, David M. (The Honorable) 00081727	,						
4	Date 07/12/2024	5 Payee name MailChimp							
6	Amount (\$) 7 Payee address; City; State; Zip Code \$437.06 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Dues & Subscriptions									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	08/12/2024	MailChimp							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$437.06	675 Ponce de Leon Ave NE							
		Suite 5000							
		Atlanta, GA 30308							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues & Subscriptions 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H							
	Date	Payee name							
	09/13/2024	MailChimp							
	Amount (\$) \$437.06	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues & Subscriptions							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
_	Sch: 39/52 Rpt: 68/87		Middleton II, David M. (The Honorable) 00081727								
4	Date 10/15/2024		Payee name MailChimp								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de						
	\$437.06		675 Ponce de Leon Ave NE	•							
			Suite 5000								
			Atlanta, GA 30308								
8	PURPOSE		Category (See Categories listed at the top of this sch		(b) Description						
ľ	OF		Office Overhead/Rental Expense	edule)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE						officeholder living expense				
					Dues & Subs	crip	ptions				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	jht		Office held				
	Date		Payee name								
	11/13/2024		MailChimp								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
\$437.06 675 Ponce de Leon Ave NE											
			Suite 5000								
			Atlanta, GA 30308								
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description						
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T.				
					Dues & Subs		officeholder living expense				
					Dues & Subs	спр	50015				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Dffice sou	nt Office held						
	Date		Payee name								
	12/12/2024		MailChimp								
	Amount (\$)			Zip Co	de						
	\$437.06		675 Ponce de Leon Ave NE								
			Suite 5000								
			Atlanta, GA 30308								
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description						
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T.				
					Dues & Subs		officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	yht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 40/52 Rpt: 69/87	Middleton II, David M. (The Honorable)	00081727						
4	Date	Payee name							
	09/03/2024	Matt Patterson, Matt							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	7900 Tecoma Cir							
		#12208							
		Austin, TX 78735							
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
			or for Campaign Services						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/06/2024	Minor, Mathew							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00 507 Fern Ct								
		Cedar Park, TX 78613							
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense or for Campaign Services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/04/2024	Minor, Matthew							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$565.00	507 Fern Ct							
		Cedar Park, TX 78613							
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense or for Campaign Services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)						
-	Sch: 41/52 Rpt: 70/87	Middleton II, David M. (The Honorable)	00081727						
4	Date 07/03/2024	5 Payee name Patterson, Matt							
6	Amount (\$) 7 Payee address; City; State; Zip Code \$500.00 7900 Tecoma Cir #12208 Austin, TX 78735								
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/02/2024	Patterson, Matt							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 7900 Tecoma Cir #12208 Austin, TX 78735							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense r for Campaign Services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/01/2024	Patterson, Matt							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 7900 Tecoma Cir #12208 Austin, TX 78735							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense r for Campaign Services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · · ·			2	Filer ID (Ethics Commission Filers)		
1	Sch: 42/52 Rpt: 71/87		Middleton II, David M. (The Honorable)	00081727					
4	Date	5	Payee name						
	12/03/2024		Patterson, Matt						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$500.00		7900 Tecoma Cir						
			#12208						
			Austin, TX 78735						
8	PURPOSE			I	(b) Description				
ľ	OF	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Salanes/Wages/Contract Labor				, officeholder living expense		
					Contract Lab	or f	for Campaign Services		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ght		Office held		
	Date		Payee name						
	08/06/2024		Patterson, Matt						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$263.98		7900 Tecoma Cir	•					
			#12208						
			Austin, TX 78735						
	DUDDOCE				(h)				
	PURPOSE OF		Category (See Categories listed at the top of this sche Transportation Equipment And Related		(b) Description	outs	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Expense				, officeholder living expense		
			F		Mileage Rein	nbu	irsement		
	Complete ONLY if direct		Candidate/Officeholder name O	office sou	ght		Office held		
	expenditure to benefit C/OI	H							
	Date		Payee name						
	12/04/2024		Pearland Area Republican Club						
-	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$26.94		PO Box 711						
			Pearland, TX 77588						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Fees				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Event Tifcket				
	Complete ONUV 5 diversit	Ļ	Condidate/Office k-lder rest	fiere	vh+		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office soug	Jur		Office held		
_	-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food/ Gift/A nmittee Legal	Expense Beverage Expense wards/Memorials Expense Services Instruction Guide explain	Office Overh Polling Expe Printing Expe Salaries/Wag	ense jes/Contract Labor	Transportation Travel in Distric Travel Out of D			
1	Total pages Schedule F1:	FILER NAME				3 Filer ID	(Ethics Commission Filers)		
_	Sch: 43/52 Rpt: 72/87		vid M. (The Honorab	le)		00081727	, , , , , , , , , , , , , , , , , , ,		
4	Date	Payee name							
	10/16/2024	Rotary of La Po	rte						
6	Amount (\$)	Payee address;	City; Sta	te; Zip Code	9				
	\$500.00	3620 Miramar D	r						
		La Dorta TV 77	E71						
		La Porte, TX 77			-				
8	PURPOSE OF		egories listed at the top of this	schedule) (I) Description				
	EXPENDITURE	Fees				outside of Texas. Con n, TX, officeholder livir			
					Dues & Subs		ig expense		
						Scriptions			
0	Complete ONIL V if direct	Candidata/Officaba	Idar nama	Office course	.+	Office k	add		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeho	luer name	Office sough	IL	Office h	leiu		
	Date	Payee name							
	08/29/2024	South Belt Elling	aton Leader						
				to: Zin Code	<u></u>				
	Amount (\$)	Payee address;	City; Sta	te; Zip Code	2				
	\$1,800.00	11555 Beamer							
		Houston, TX 77	089						
	PURPOSE		egories listed at the top of this) Description				
	OF	Advertising Exp		schedule)		outside of Texas. Co	mplete Schedule T.		
	EXPENDITURE	, at et all ing _/p			Check if Austin	n, TX, officeholder livir	ng expense		
					Campaign A	d			
	Complete ONLY if direct	Candidate/Officeho	lder name	Office sough	nt	Office h	neld		
	expenditure to benefit C/OI								
⊨	Date	Payee name							
	08/26/2024	TDCJ							
	Amount (\$)	Payee address;	City; Sta	te; Zip Code					
	\$883.32	861 I-45	City, Sta		5				
	\$00 3 .32								
		Unit B							
		Huntsville, TX 7	7320						
	PURPOSE	Category (See Cat	egories listed at the top of this	schedule) (I) Description				
	OF EXPENDITURE		onations Made By			outside of Texas. Co			
	LAFENDITORE	Candidate/Office	eholder/Political Corr	nmittee		n, TX, officeholder livir	ng expense		
					Donation Iter	ns			
	Complete ONLY if direct	Candidate/Officeho	lder name	Office sough	nt	Office h	neld		
	expenditure to benefit C/OI								

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 44/52 Rpt: 73/87	Middleton II, David M. (The Honorable) 00081727					
4	Date 09/18/2024	5 Payee name TDCJ					
6	Amount (\$) \$883.32	7 Payee address; City; State; Zip Code \$883.32 861 I-45 Unit B Huntsville, TX 77320					
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation Items 					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/07/2024	TDCJ					
	Amount (\$) \$883.32	Payee address; City; State; Zip Code 861 I-45 Unit B Huntsville, TX 77320					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Image: Contribution of the schedule of the s							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/05/2024	TDCJ					
	Amount (\$) \$883.32	Payee address; City; State; Zip Code 861 I-45 Unit B Huntsville, TX 77320					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense 1S				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)				
	Sch: 45/52 Rpt: 74/87						
4	Date 07/12/2024	5 Payee name Tanner, Stephanie					
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 0 3101 Patricia Lane Pearland, TX 77581					
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services 					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	08/15/2024	Tanner, Stephanie					
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 3101 Patricia Lane					
	PURPOSE OF EXPENDITURE	Pearland, TX 77581 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H					
	Date	Payee name					
	09/11/2024	Tanner, Stephanie					
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 3101 Patricia Lane					
		Pearland, TX 77581					
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services 					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	Filer ID (Ethics Commission Filers)				
1	Sch: 46/52 Rpt: 75/87						
4	Date	5 Payee name					
	10/11/2024	Tanner, Stephanie					
6	Amount (\$) \$500.00	 7 Payee address; City; State; Zip Code 3101 Patricia Lane Pearland, TX 77581 					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
-	OF EXPENDITURE	Salaries/Wages/Contract Labor	le of Texas. Complete Schedule T. officeholder living expense or Campaign Services				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held				
	Date	Payee name					
	10/25/2024	Tanner, Stephanie					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$856.39	3101 Patricia Lane Pearland, TX 77581					
	PURPOSE OF EXPENDITURE		de of Texas. Complete Schedule T. officeholder living expense Dr Campaign Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held				
	Date	Payee name					
	11/20/2024	Tanner, Stephanie					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$500.00	3101 Patricia Lane					
		Pearland, TX 77581					
	PURPOSE OF EXPENDITURE		de of Texas. Complete Schedule T. officeholder living expense or Campaign Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2				3	Filer ID (Ethics Commission Filers)	<u> </u>
-	Sch: 47/52 Rpt: 76/87		Middleton II, David M. (The Honorable)			00081727	'
4	Date	5	Payee name					
	12/18/2024	-	Tanner, Stephanie					
6	Amount (\$)	7	Payee address; City; State	; Zip Coo	le			
	\$500.00	:	3101 Patricia Lane					
			Pearland, TX 77581					
8	PURPOSE				b) Description			—
ľ	OF		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	nedule)		outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Salaries, Wages, Contrast Eabor		Check if Austir	, тх	, officeholder living expense	
					Contract Lab	or f	for Campaign Services	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ht		Office held	
	Date		Payee name					
	07/12/2024	-	Tanner, Stephanie					
	Amount (\$)		Payee address; City; State	; Zip Coo	le			\neg
	\$361.87		3101 Patricia Lane	· •				
			Pearland, TX 77581					
	PURPOSE OF		Category (See Categories listed at the top of this sch		b) Description	outo	ide of Toyon, Complete Schoolule T	
	EXPENDITURE		Transportation Equipment And Related Expense	d			ide of Texas. Complete Schedule T. 4. officeholder living expense	
			Lybense		Mileage Reir		- ·	
	Complete ONLY if direct	L C	andidate/Officeholder name	 Office soug	ht		Office held	\neg
	expenditure to benefit C/OI							
-	Date		Payee name					=
	08/15/2024		Tanner, Stephanie					
				· Zin Cor				_
	Amount (\$) \$324.55		Payee address; City; State 3101 Patricia Lane	; Zip Coo	le			
	<i>ф</i> 524.00	'	STOT Fallicia Lalle					
			Pearland, TX 77581	i				
	PURPOSE OF		Category (See Categories listed at the top of this sch		b) Description			
	EXPENDITURE		Transportation Equipment And Related	d			ide of Texas. Complete Schedule T. C, officeholder living expense	
			Expense		Mileage Reir			
					mileage iteli			
	Complete ONLV if direct		andidate/Officeholder name	Office sou	ht		Office held	-
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Surce Soul	i it			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
	Sch: 48/52 Rpt: 77/87	Middleton II, David M. (The Honorable)	00081727				
4	Date 09/23/2024	5 Payee name Tanner, Stephanie					
6	Amount (\$) \$535.23	 Payee address; City; State; Zip Code 3101 Patricia Lane Pearland, TX 77581 					
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement 					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/13/2024	Tanner, Stephanie					
	Amount (\$) \$391.68	Payee address; City; State; Zip Code 3101 Patricia Lane					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense hbursement				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/31/2024	Tanner, Stephanie					
	Amount (\$) \$580.00	Payee address; City; State; Zip Code					
		Pearland, TX 77581					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense hbursement				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Committee Eugal Services Event Expense Food/Beverage Expense Legal Services Event Expense Forinting Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 49/52 Rpt: 78/87	Middleton II, David M. (The Honorable)	00081727					
4	Date 08/19/2024	5 Payee name Texas Senate						
6	Amount (\$) \$445.00							
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation Items 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/26/2024	USPS						
	Amount (\$) \$216.00	Payee address; City; State; Zip Code 601 Tremont St						
		Galveston, TX 77550						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense rriptions					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	12/09/2024	USPS						
	Amount (\$) \$73.00	Payee address; City; State; Zip Code 601 Tremont St						
		Galveston, TX 77550						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gift/Awards, Imittee Legal Servio	ige Expense Memorials Expense	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Distri	ipment & Related Expense
1	Total pages Schedule F1:	2					3	Filer ID ((Ethics Commission Filers)
-	Sch: 50/52 Rpt: 79/87		Middleton II, David N	1. (The Honorable))			00081727	
4	Date	5	Payee name						
	08/15/2024		VistaPrint						
6	Amount (\$)	7	Payee address; Ci	ty; State;	Zip Cod	9			
	\$1,071.68		95 Hayden Ave						
			,						
			Lexington, MA 1242	1					
_	DUDDOCE	<u> </u>	_			-			
8	PURPOSE OF		Category (See Categorie		edule)	Description	outei	ide of Texas. Comple	ata Schodula T
	EXPENDITURE		Advertising Expense					, officeholder living ex	
						Promotional			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder	name C	Office soug	nt		Office held	1
	Date		Payee name						
	12/04/2024		VistaPrint						
_	Amount (\$)	-	Payee address; C	ty; State;	Zip Cod	2			
	\$97.55		95 Hayden Ave	iy, Sidic,	210 000	2			
	ψ97.35		55 Hayden Ave						
			Lexington, MA 1242	1					
	PURPOSE OF EXPENDITURE		Category (See Categorie Advertising Expense		edule) (n, TX	ide of Texas. Comple , officeholder living e: pducts	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder	name C	Office soug	nt		Office held	ł
	Date		Payee name						
	12/31/2024		Walmart						
	Amount (\$)		Payee address; Ci	ty; State;	Zip Cod	<u>م</u>			
	\$278.01		1710 Broadway St	iy, otato,	2.0 000	5			
	\$210101								
			Pearland, TX 77581						
	PURPOSE	(a)	Category (See Categorie	listed at the top of this sche	edule) (Description			
	OF EXPENDITURE		Contributions/Donat					ide of Texas. Comple	
			Candidate/Officehol	der/Political Comm	ittee			, officeholder living ex	xpense
						Donation Iter	ns		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office soug	nt		Office held	1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 51/52 Rpt: 80/87	Middleton II, David M. (The Honorable) 00081727					
4 Date	5 Payee name					
10/17/2024	West Pearland Republican Women					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$40.00	8325 Broadway					
	Suite 202					
	Pearland, TX 77581					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense					
	Dues & Subscriptions					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI	4					
Date	Payee name					
07/01/2024	WinRed					
Amount (\$)	Payee address; City; State; Zip Code					
\$582.22	1776 Wilson					
	Arlington, MA 22209					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	Credit Card Processing Fees 07/01/2024 thru					
	12/31/2024					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI						
Date	Payee name					
07/09/2024	Xero					
Amount (\$)	Payee address; City; State; Zip Code					
\$42.00	1615 Platte St					
	Suite 400					
	Denver, CO 80202					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
	Dues & Subscriptions					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	1					

tising Expense unting/Banking ulting Expense ibutions/ Donations Made By undidate/Officeholder/Political t Card Payment	- I Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayme Office Overhea Polling Expens Printing Expen Salaries/Wage	ent/Reimbursement ad/Rental Expense se se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
pages Schedule F1:	2 FILER NAM	E			3	Filer ID	(Ethics Commission Filers)
-			e)				, , , , , , , , , , , , , , , , , , ,
						00001121	
9/2024	5 Payee name Xero	2					
int (\$) \$42.00	1615 Platte Suite 400	e St	e; Zip Code				
JRPOSE OF ENDITURE	(a) Category (s Fees	See Categories listed at the top of this s	chedule) (b)	Check if travel	ι, TX,	officeholder living	
blete <u>ONLY</u> if direct Inditure to benefit C/OF		ficeholder name	Office sought			Office he	eld
	Initing/Banking Ulting Expense Ibiotions/ Donations Made By Indidate/Officeholder/Politica i: Card Payment pages Schedule F1: 52/52 Rpt: 81/87 0/2024 Int (\$) \$42.00 JRPOSE OF ENDITURE	Initing/Banking Jiting Expense Ibutions/ Donations Made By - Indidate/Officeholder/Political Committee 2 Grad Payment pages Schedule F1: 2 FILER NAM Middleton 1 5 Payee name Xero 7 Payee addre 1615 Platte Suite 400 Denver, CO JRPOSE OF ENDITURE (a) Category (s) Fees	tising Expense initing/Banking Liting Expense buttons/ Donations Made By - indidate/Officeholder/Political Committee : card Payment pages Schedule F1: 52/52 Rpt: 81/87 pages Schedule F1: 52/52 Rpt: 81/87 S Payee name D/2024 Xero 1615 Platte St Suite 400 Denver, CO 80202 JRPOSE OF ENDITURE (a) Category (See Categories listed at the top of this se Fees	tising Expense initing/Banking Liting Expense liting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Gift/Awards/Memorials Expense Polling Expense Po	unting/Banking uiting Expense buttons/ Donations Made By- indidate/Officeholder/Political Committee : Card Payment Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Office Overhead/Rental Expense Poling Expense Salaries/Wages/Contract Labor pages Schedule F1: 2 FILER NAME 2 FILER NAME Office Overhead/Rental Expense Salaries/Wages/Contract Labor 5 Pagee name Xero Middleton II, David M. (The Honorable) 5 6/2024 7 Payee address; City; State; Zip Code 1615 Platte St Suite 400 Denver, CO 80202 Suite 400 Denver, CO 80202 JRPOSE OF ENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if Austir Dues & Subs	tising Expense unting/Banking tilting Expense buttions/Donations Made By - . Card Payment Event Expense Fees Git/Awards/Memorials Expense Git/Awards/Memorials Expense Card Payment Loan Repayment/Reimbursement Office Overhead/Rental Expense Printing Expense Salaries/Wages/Contract Labor pages Schedule F1: Card Payment 2 FILER NAME Middleton II, David M. (The Honorable) 3 p/2024 5 Payee name Xero 3 p/2024 7 Payee address; Suite 400 Denver, CO 80202 City; State; Zip Code State; Zip Code JRPOSE ENDITURE (a) Category Fees (See Categories listed at the top of this schedule) (b) Description Check if ravel outsi Check if Austin, TX, Dues & Subscript Wete ONLY if direct Candidate/Officeholder name Office Sought	tising Expense unting/Barking tiling Expense buttors/Donations Made By - indidate/Officeholder/Political Committee Event Expense Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Poling Expense Salaries/Wages/Contract Labor Solicitation/Fund Transportation E Travel Out of Dis OTHER (enter al 2 FILER NAME Middleton II, David M. (The Honorable) Solicitation/Fund Travel Out of Dis OTHER (enter al 2 Filer ID 00081727 pages Schedule F1: 2 Card Payment 2 FILER NAME Middleton II, David M. (The Honorable) 3 Filer ID 00081727 5 Payee name Xero Middleton II, David M. (The Honorable) 3 Filer ID 00081727 5 Payee name Xero Suite 400 Denver, CO 80202 Int (\$) JRPOSE OF ENDITURE (a) Category (see Categories listed at the top of this schedule) Fees (b) Description Check if Austin, TX, officeholder living Dues & Subscriptions

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex / - Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense spense Travel in District xpes/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 1/6 Rpt: 82/87	2 FILER NAME Middleton II, David M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081727			
4 Date 12/16/2024	5 Payee name Alvin Sun & Advertiser				
6 Amount (\$) \$101.50 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 570 Dula St Alvin, TX 77511				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Ad			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 12/05/2024	Payee name Alvin-Manvel Chamber of Commerce				
Amount (\$) \$1,200.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 105 Willis St Alvin, TX 77511	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Dues			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 12/05/2024	Payee name Alvin-Manvel Chamber of Commerce				
Amount (\$) \$40.00	Payee address; City; State; Zip Co 105 Willis St	ode			
X Reimbursement from political contributions intended	Alvin, TX 77511				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma Candidate/Officeholder/Po Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Ide By - Glft/Awards/Memorials Expense Travel out of District				
1 Total pages Schedule Sch: 2/6 Rpt: 83/87	G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Middleton II, David M. (The Honorable) 00081727				
4 Date 09/20/2024	5 Payee name Clear Lake Area Chamber of Commerce				
6 Amount (\$) \$735. Reimbursement from political contributions	7 Payee address; City; State; Zip Code 00 1201 E NASA Pkwy				
X political contributions intended	Houston, TX 77058				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Event Sponsorship				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	t Candidate/Officeholder name Office sought Office held				
Date	Payee name				
10/24/2024	Clear Lake Area Chamber of Commerce				
Amount (\$) \$1,050. Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1201 E NASA Pkwy Houston, TX 77058				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	t Candidate/Officeholder name Office sought Office held				
Date	Payee name				
11/21/2024	Clear Lake Area Chamber of Commerce				
Amount (\$) \$35.	Payee address; City; State; Zip Code 00 1201 E NASA Pkwy				
X Reimbursement from political contributions intended	Houston, TX 77058				
PURPOSE OF	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Fees Check if Austin, TX, officeholder living expense Event Ticket				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	t Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule G: Sch: 3/6 Rpt: 84/87	2 FILER NAME Middleton II, David M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081727				
4 Date 12/17/2024	5 Payee name Clear Lake Area Chamber of Commerce					
6 Amount (\$) \$35.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1201 E NASA Pkwy Houston, TX 77058					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Ticket				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
12/17/2024	Friendswood Chamber of Commerce					
Amount (\$) \$380.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 1100 S Friendswood Dr Friendswood, TX 77546	ode				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Ticket				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
07/22/2024	Galveston Regional Chamber of Commerce					
Amount (\$) \$6,865.00	Payee address; City; State; Zip C 2228 Mechanic St	ode				
X Reimbursement from political contributions intended	Suite 101 Galveston, TX 77550					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Sponsorship				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held				

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule G: Sch: 4/6 Rpt: 85/87	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Middleton II, David M. (The Honorable) 00081727					
4	Date 09/11/2024	5 Payee name Galveston Regional Chamber of Commerce					
6	Amount (\$) \$175.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2228 Mechanic St Suite 101 Galveston, TX 77550					
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Ticket 					
9	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held						
	Date	Payee name					
	07/17/2024	Galveston Republican Party					
	Amount (\$) \$5,000.00 Reimbursement from political contributions						
L	intended	League City, TX 77574					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Description Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Sponsorship					
	Candidate/Officeholder name Office sought Office held						
F	Date	Payee name					
	10/11/2024	Resource and Crisis Center of Galveston County					
	Amount (\$) Payee address; City; State; Zip Code \$1,500.00 1204 45th Street 1204 45th Street						
	X Reimbursement from political contributions intended	al contributions					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Event Sponsorship					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					
F							

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule G: Sch: 5/6 Rpt: 86/87	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Middleton II, David M. (The Honorable) 00081727					
4	Date 09/30/2024	5 Payee name Ryan Data and Research					
6	Amount (\$) \$3,900.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 202675 Austin, TX 78720					
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Data Production 					
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
F	Date	Payee name					
	12/04/2024	San Jacinto Conservatives					
	Amount (\$) Payee address; City; State; Zip Code \$1,000.00 405 Wafer St.						
	PURPOSE OF EXPENDITURE	Pasadena, TX 77506 Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Sponsorship					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held							
	Date 07/24/2024	Payee name Texas City La Marque Chamber of Commerce					
	Amount (\$) Payee address; City; State; Zip Code \$500.00 \$702 Emmett F Lowry Expy						
	Reimbursement from political contributions intended Texas City, TX 77591						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Event Sponsorship					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex- Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 6/6 Rpt: 87/87	2 FILER NAME Middleton II, David M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081727		
4	Date 07/25/2024	5 Payee name Unbound Now Houston				
6	Amount (\$) \$5,710.16 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4300 W Waco Dr Ste 2 Bldg B-244 Waco, TX 76710				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
F	Date 09/11/2024	Payee name University of Clear Lake Alumni				
	Amount (\$) \$1,000.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2700 Bay Area Blvd Houston , TX 77058				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		