CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to c	omplete this form.	1 Filer ID (Ethics Commis 00085706	ssion Filers)	2 Total pages fil 2	ed: 2
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		JSE ONLY
OFFICEHOLDER	Ms.	Erin B.				
NAME	-				Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
		Shank				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT / SUITE #; CI	ΓY;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
MAILING	P.O. Box 32672					
ADDRESS					Receipt #	Amount
Change of Address	Waco, TX 76703					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
		Scott				
NAME						
	NICKNAME	LAST		SUFFIX		
		Nix				
6 CAMPAIGN	STREET ADDRESS (N	O PO BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER	217 Fannin Dr.					
ADDRESS						
(Residence or Business)						
	Hewitt, TX 76643					
7 CAMPAIGN TREASURER		PHONE NUMBER	EXTENSION			
PHONE	(254) 722-5515					
8 REPORT						
TYPE	X January 15	30th day befor	e election	Runoff	15th day after car	
					appointment (offic	
	July 15	8th day before	election	Exceeded modified X reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD	Month Day Y	ear		Month Day	Year	
COVERED	10/27/2024	Т	HROUGH	01/13/202	5	
10 ELECTION	ELECTION DAT	E		ELECTION TYPE		
			Primary	Runoff	Other	
	11/05/2024					
		X	General	Special		
11 OFFICE	OFFICE HELD (if any)	1		12 OFFICE SOUGHT	(if known)	
				State Representa		
		сО.	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	ו www.e	thics.state.tx.us	5	Versio	on V4.1.0.5dd2ace2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 22

Shank, Erin B. (Ms.)		14 Filer ID (E 00085706	Ethics Commission Filers)
candidate / officeholder.	These expenditures may have been made without th	he candidate's or officel	holder's knowledge or
COMMITTEE TYPE	COMMITTEE NAME		
GENERAL			
_	COMMITTEE ADDRESS		
SPECIFIC			
	COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRES	S	
			\$ 0.00
)	\$ 2,740.00
3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
4. TOTAL POLITIC	AL EXPENDITURES		\$ 15,062.26
		AST DAY OF THE	\$ 0.00
		OF THE LAST DAY	\$ 0.00
	Ms	Frin B. Shank	
			ler
ARY STAMP / SEAL ABO	DVE		
ribed before me, by the sa	aid	, this the	day
, 20, to ce	ertify which, witness my hand and seal of office.		
er administering	Printed name of officer administering	Title of officer	administering oath
	This box is for notice of p candidate / officeholder. <i>consent</i> . Candidates and COMMITTEE TYPE GENERAL SPECIFIC 1. TOTAL UNITEMI OR GUARANTER 2. TOTAL POLITIC (OTHER THAN F 3. TOTAL UNITEMI 4. TOTAL POLITIC 5. TOTAL POLITIC 6. TOTAL POLITIC 6. TOTAL POLITIC 6. TOTAL PRINCIP 6. TOTAL PRINCIP OF THE REPOR	This box is for notice of political contributions accepted or political expenditu candidate / officeholder. These expenditures may have been made without it consent. Candidates and officeholders are required to report this information COMMITTEE TYPE GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRES COMMITTEE CAMPAIGN TREASURER ADDRES COMMITTEE CAMPAIGN TREASURER ADDRES (OTHER THAN PLEDGES, LOANS, OR CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELEC TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE L/ REPORTING PERIOD 6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE L/ REPORTING PERIOD I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code. Ms. Signature of ARY STAMP / SEAL ABOVE ibed before me, by the said	DO085706 This box is for notice of political contributions accepted or political expenditures made by political contributions accepted or political expenditures and by control by and by control by constant on the candidate's or office consent. Candidate of officeholder. These expenditures made without the candidate's or office consent. Candidates and officeholders are required to report this information only if they receive not consent. Candidate of committee NAME GENERAL GENERAL COMMITTEE NAME COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL POLITICAL EXPENDITURES TOTAL POLITICAL EXPENDITURES TOTAL POLITICAL EXPENDITURES TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD Iswear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code. <u>Ms. Erin B. Shank</u> Iswear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code. <u>Ms. Erin B. Shank</u> Signature of Candidate or Officehold ARY STAMP / SEAL ABOVE the debefore me, by the said, to certify which, witness my hand and seal of office.

SUBTOTALS - C/OH	CC	FORM C/OH OVER SHEET PG 3
18 FILER NAME Shank, Erin B. (Ms.)	19 Filer ID 00085706	3 of 22 (Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2,740.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 15,062.26
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/15 Rpt: 4/22
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Shank, Erin			00085706
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	11/02/2024	Abbruzzese, Laura		\$10.
		6 Contributor address; City; State; Zip Code		
		Waco, TX 76707		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Counseling	1	Self	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/05/2024	Ackie, Kwabena		\$15.
				4
		Austin, TX 78731		
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	1s)
	Managing Pa	· · · · · · · · · · · · · · · · · · ·	Cobalt Digital Marketing	
	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	12/05/2024	Ackie, Kwabena	/	\$15.
	12/03/202 .			· · ·
		Contributor address; City; State; Zip Code		
		Austin, TX 78731		
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>
	Managing Pa		Cobalt Digital Marketing	
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/12/2024	Allen, Bruce		\$25.
		Contributor address; City; State; Zip Code		
		Woodway, TX 76712		
┝	Dringinal occu		Employer (See Instruction)	
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions	5)
L	Reureu		None	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/27/2024	Betts, Bentley		\$100.
		Contributor address; City; State; Zip Code]
		Woodway, TX 76712		
		upation / Job title (See Instructions)	Employer (See Instructions	s)
	Not Employe	ed la	retired	

	The Instru	ction Guide explains how	<i>i</i> to complete this f	iorm.	1	Total pages Schedule A1: Sch: 2/15 Rpt: 5/22	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Shank, Erin	B. (Ms.)				00085706	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/07/2024	Brickhouse, Mark					\$10.00
		6 Contributor address; City; St	tate; Zip Code		1		
Ļ	Dringing oog	Lorena, TX 76655			->		
ð	Principal occu Consultant	pation / Job title (See Instructions	')	9 Employer (See Instructions Self	5)		
╞					1		
	Date 11/14/2024	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$15.60
	11/14/2024	Brown, Caryn					ΦT2'00
		Contributor address; City; St	ate; Zip Code				
		Waco, TX 76712-9637					
⊢	Principal occu	I Ipation / Job title (See Instructions	;)	Employer (See Instructions	5)		
	Web Design	er		Self			
╞	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	11/22/2024	Brown, Caryn	—				\$15.60
		Contributor address; City; St			1		
		TV 70740 0007					
	<u></u>	Waco, TX 76712-9637			Ĺ		
	Principal occu Web Design	<pre>upation / Job title (See Instructions</pre>	<i>;</i>)	Employer (See Instructions Self	5)		
╞		1			1		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$20.24
	10/31/2024	Bullock, Karla					ΦΖ υ.Ζ4
		Contributor address; City; St	ate; Zip Code				
		Waco, TX 76712					
┢	Principal occu	I Ipation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Not Employe	ed .		Not Employed			
F	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/29/2024	Bulmahn, Lynn	_				\$56.00
		Contributor address; City; St	tate; Zip Code		1		
		Waco, TX 76710	<u>.</u>		Ļ		
		pation / Job title (See Instructions	<i>;</i>)	Employer (See Instructions	5)		
	cashier			Drug Emporium			

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/15 Rpt: 6/22
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Shank, Erin E	3. (Ms.)		00085706
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/31/2024	Carsrud, Alan		\$25.00
 	6 Contributor address; City; State; Zip Code		
	Spicewood, TX 78669		
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Not Employe	d	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/06/2024	Chandler, Sharon		\$10.00
	Contributor address; City; State; Zip Code		
	Hewitt, TX 76643		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	d	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/03/2024	Crew, Matt		\$20.24
	Contributor address; City; State; Zip Code		
	Waco, TX 76712		
	pation / Job title (See Instructions)	Employer (See Instructions	3)
Owner		HGS self storage	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/07/2024	Crowder, Richard		\$50.00
	Contributor address; City; State; Zip Code		
	West TX 76601		
Dringinglaggur	West, TX 76691	Employer (Cap Instructions	
Not Employe	bation / Job title (See Instructions)	Employer (See Instructions Not Employed	>)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/01/2024	Dell, Elizabeth		\$50.00
	Contributor address; City; State; Zip Code		
	Woodway, TX 76712		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
teacher		Baylor	<i>''</i>

SCHEDULE	A1
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The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1 Sch: 4/15 Rpt: 7/22 2 FILER NAME 3 Filer ID (Ethics Commi 00085706 4 Date 5 Full name of contributor 0 out-of-state PAC (ID#:) 11/14/2024 5 Full name of contributor 0 out-of-state PAC (ID#:) 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (interview)	
Shank, Erin B. (Ms.) 00085706 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 11/14/2024 Dill, Donna	sion Filers)
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (* 11/14/2024 Dill, Donna 7 Amount of Contribution (*	
11/14/2024 Dill, Donna	
	\$)
6 Contributor address; City; State; Zip Code	\$10.00
Waco, TX 76710	
 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 	
Banker Extraco banks	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (intercent contributit)))	
12/14/2024 Dill, Donna	\$10.00
Contributor address; City; State; Zip Code	
W/200 TV 76710	
Waco, TX 76710	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Banker Extraco banks	
	Amount of Contribution (\$) \$100.00
10/28/2024 Dow, David	\$100.00
Contributor address; City; State; Zip Code	
Waco, TX 76710	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed retired	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (s)
10/27/2024 Drew, Carol	\$200.00
Contributor address; City; State; Zip Code	
Waco, TX 76708	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed retired	
	s)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (interview)	\$20.00
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (inclusion)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (interpretent contribution contribution (interpretent contribution contributicontributicontributicontecnt contributicontecnt contributicontecnt	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (interpretent interpretent i	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (interpretent contribution (interpretent contribution contributor address; City; State; Zip Code 11/24/2024 Foster, Heidi Contributor address; City; State; Zip Code Amount of Contribution (interpretent contribution contribution contributor address; City; State; Zip Code McGregor, TX 76657 McGregor, TX 76657 McGregor, TX 76657	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (interpretent contribution (interpretent contributor address; City; State; Zip Code 11/24/2024 Foster, Heidi Contributor address; City; State; Zip Code McGregor, TX 76657 McGregor, TX 76657 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (not contribution (not contribution (not contributor address; City; State; Zip Code 11/24/2024 Foster, Heidi Contributor address; City; State; Zip Code Amount of Contribution (not contribution (not contribution (not contributor address; City; State; Zip Code McGregor, TX 76657 McGregor, TX 76657 McGregor, TX 76657	

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	The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 5/15 Rpt: 8/22	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Shank, Erin I				00085706	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/29/2024	Greeenlee Jr., Ralph				\$25.00
	I	6 Contributor address; City; State; Zip Code		1		
		Fredericksburg, TX 78624-3938				
8	B Principal occupation / Job title (See Instructions) 9 Employer (See Instruction)			s)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/28/2024	Hafertepe, Kenneth				\$25.00
	1	Contributor address; City; State; Zip Code		·		
		Waco, TX 76707				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	college profe	essor	Baylor University			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/28/2024	Hafertepe, Kenneth				\$25.00
	I	Contributor address; City; State; Zip Code		·		
		Waco, TX 76707				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	college profe	essor	Baylor University			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/28/2024	Hays, Mark				\$100.00
	I	Contributor address; City; State; Zip Code		·		
		Woodway, TX 76712				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Self		Music Teachet			
	Date	Full name of contributor Out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/29/2024	Hillier, Robert			• -	\$10.00
	I	Contributor address; City; State; Zip Code		·		
		Waco, TX 76711				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Pastor		FBC West	-		
i -						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/22
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Shank, Erin	B. (Ms.)	,	00085706
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	11/04/2024	Hudson, Melisa		\$100.00
		6 Contributor address; City; State; Zip Code		
		McGregor, TX 76657	!	
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Teacher		McGregor ISD	
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/03/2024	Huff, Sherrell		\$10.00
	TT/00/202			
		Contributor address; City; State; Zip Code	,	
			1	
		Howith TV 76640	!	
		Hewitt, TX 76643		<u> </u>
		upation / Job title (See Instructions)	Employer (See Instructions	s)
L	Not Employe	,d	Not Employed	
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/31/2024	Khoury, Stephen	,	\$50.00
		Contributor address; City; State; Zip Code		
		· ·	1	
			,	
		Dallas, TX 75229	!	
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
	Attorney	i i j	Kelsoe Khoury Rogers &	
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	·	Amount of Contribution (\$)
	Dale 10/31/2024	Full name of contributor out-of-state PAC (ID#: Lockhart, Bill		\$20.24
	10/31/2024			Ψ∠∪.∠¬
		Contributor address; City; State; Zip Code	1	
			1	
			1	
\vdash	- ' '!	Waco, TX 76710		
		upation / Job title (See Instructions)	Employer (See Instructions	
L	Professor		McLennan Community C	College
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/04/2024	Lockhart, Bill	,	\$20.24
		Contributor address; City; State; Zip Code		
			1	
			!	
		Waco, TX 76710	,	
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Professor	· · · · · · · · · · · · · · · · · · ·	McLennan Community C	
\vdash				

	The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 7/15 Rpt: 10/22	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Shank, Erin I	B. (Ms.)			00085706	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/02/2024	Macht, Katrina				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Waco, TX 76710	i			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	<u>بط</u>	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	11/26/2024	McCarthy, Maggie				\$50.00
		Contributor address; City; State; Zip Code]		
		Waco, TX 76710				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	grant writer		self	5)		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	10/28/2024	Full name of contributor out-of-state PAC (ID#: McClintock, Marilyn)			\$25.00
	IUILOILUL .	Contributor address; City; State; Zip Code		-		Ψ20.00
		Contributor address, City, State, 21, 5500				
		WacoWaco, TX 76708				
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/01/2024	Michaels, Jill				\$20.00
		Contributor address; City; State; Zip Code		1		
		Weee TV 76710				
<u> </u>	Bringinal occu	Waco, TX 76710 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	>)		
╞				<u> </u>	Amount of Contribution (f)	
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#: Michaels, Jill)		Amount of Contribution (\$)	\$20.00
						Ψ20.00
		Contributor address; City; State; Zip Code				
		Waco, TX 76710				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed .	Not Employed			

	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 8/15 Rpt: 11/22	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Shank, Erin I	B. (Ms.)			00085706	
4	Date 10/31/2024	5 Full name of contributor out-of-state PAC (ID#: Miller, B)	7	Amount of Contribution (\$)	\$25.00
		6 Contributor address; City; State; Zip Code		ł		* -
		Waco, TX 76710				
8			9 Employer (See Instructions	5)		
	Administratio	un	WCA			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/30/2024	Moore, Richard				\$10.00
		Contributor address; City; State; Zip Code				
		WACO, TX 76710				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	11/20/2024	Moore, Richard	/		, unount of 2211114111 (1)	\$10.00
		Contributor address; City; State; Zip Code		ł		+
		Waco, TX 76710				
┝	Dringingl occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	s) 		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/27/2024	Peek, Gail				\$300.00
	Contributor address; City; State; Zip Code Temple, TX 76504					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	attorney		Beard, Kultgen law firm			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/04/2024	Peek, Gail				\$250.00
		Contributor address; City; State; Zip Code Temple, TX 76504				
\vdash	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Lawyer		Beard Kultgen et al	5)		
┝	Lavvyci		Deard Rungen et al			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/15 Rpt: 12/22	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Shank, Erin I	B. (Ms.)			00085706	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/09/2024	Phillips, Donna				\$15.60
		6 Contributor address; City; State; Zip Code		1		
	ļ					
	1					
		Valley Mills, TX 76689				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Not Employe	.d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/22/2024	Phillips, Donna				\$15.60
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Valley Mills, TX 76689				
_	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Not Employe		Not Employed	5)		
╞				1	Amount of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#:))		Amount of Contribution (\$)	\$15.60
	11/23/2024	Phillips, Donna				Φ10.00
		Contributor address; City; State; Zip Code				
	1					
		Valley Mills, TX 76689-2637				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/09/2024	Phillips, Donna				\$15.60
	1	Contributor address; City; State; Zip Code		1		
	ļ					
		Valley Mills, TX 76689				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷= 00
	10/30/2024	Pounders, Steven				\$5.00
		Contributor address; City; State; Zip Code				
	ļ					
	ł	Waco, TX 76798-5490				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Professor		Baylor University)		
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	The Instru	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 10/15 Rpt: 13/22	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Shank, Erin					00085706	,
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	11/30/2024	Pounders, Steven					\$5.00
		6 Contributor address; City; State; Zip Code					
		Waco, TX 76798-5490					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Professor			Baylor University			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	10/29/2024	Raymond, Miner					\$100.00
		Contributor address; City; State; Zip Code					
		Waco, TX 76710					
		pation / Job title (See Instructions)		Employer (See Instructions			
	Executive			Curves International Inc			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	10/30/2024						\$15.60
		Contributor address; City; State; Zip Code					
		Waco, TX 76708					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Not Employe			Not Employed	,		
	Date	Full name of contributor out-of-state PA	AC (ID# [.])		Amount of Contribution (\$)	
	11/30/2024	Richards, Cynthia	(ID#:	/			\$15.60
		Contributor address; City; State; Zip Code					
		Waco, TX 76708					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	11/06/2024	Robinson, Stephen					\$56.00
		Contributor address; City; State; Zip Code					
	Drive sized, oppu	Louisville, KY 40218		Translavary (Care Instructions	<u> </u>		
	Principal occu Sales	ipation / Job title (See Instructions)		Employer (See Instructions)		
<u> </u>	Sales			Self			
1							

				4	Total as man Oak a dula A4.	
	The Instru	ction Guide explains how to complete thi	is form.		Total pages Schedule A1: Sch: 11/15 Rpt: 14/22	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Shank, Erin	B. (Ms.)			00085706	
4	Date	5 Full name of contributor out-of-state PAC (II	D#:)	7	Amount of Contribution (\$)	
	12/06/2024	Robinson, Stephen				\$56.00
		6 Contributor address; City; State; Zip Code		"		
		Louisville, KY 40218				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Sales		Self			
	Date	Full name of contributor out-of-state PAC (II	D#:)	Τ	Amount of Contribution (\$)	
	10/30/2024	Rodabough, Carolyn				\$15.60
		Contributor address; City; State; Zip Code				
		Waco, TX 76710				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed and a second s	Not Employed			
	Date	Full name of contributor out-of-state PAC (I	D#:)		Amount of Contribution (\$)	
	11/30/2024	Rodabough, Carolyn				\$15.60
		Contributor address; City; State; Zip Code		"		
		Waco, TX 76710				
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (II	D#:)		Amount of Contribution (\$)	
	10/31/2024	Rolf, Keith				\$20.24
		Contributor address; City; State; Zip Code				
		Waco, TX 76708				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	?d	Not Employed			
	Date	Full name of contributor out-of-state PAC (II	D#:)		Amount of Contribution (\$)	
	10/31/2024	Sanders, Maggie				\$5.00
		Contributor address; City; State; Zip Code		"		
		Waco, TX 76710				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	}d	Not Employed			
			·			

	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 12/15 Rpt: 15/22	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Shank, Erin I	B. (Ms.)			00085706	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/30/2024	Sanders, Maggie				\$5.00
		6 Contributor address; City; State; Zip Code		1		
	I					
	l					
_		Waco, TX 76710		Ĺ		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	3)		
<u> </u>	Not Employe		Not Employed	—		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	±0.00
	11/18/2024					\$8.00
	I	Contributor address; City; State; Zip Code				
	I					
	l	KYLE, TX 78640				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ج)		
	Attorney		Barron and Newburger	.,		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/29/2024	Smallwood, Pamela	/		Allount of Contribution (+,	\$5.00
		Contributor address; City; State; Zip Code		ł		Ŧ
	l					
	l					
		Waco, TX 76708				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	:)	Γ	Amount of Contribution (\$)	
	10/29/2024	Sowder, Robert				\$25.00
	I	Contributor address; City; State; Zip Code		1		
	l					
		Lowitt TV 76642				
	Drincinal occu	Hewitt, TX 76643 Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Pharmacist		Doris Miller VAMC	"		
				—	Amount of Contribution (¢)	
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#: Sprayberry, Sharon)		Amount of Contribution (\$)	\$50.00
	TT/0T/202-1	Contributor address; City; State; Zip Code		•		ΨΟ0.00
	l	Continuation address, Gity, State, Zip Code				
	l					
		McGregor, TX 76657				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d.	Not employed			
			-			

The Instru	ction Guide explains how to complete this f	form	1 Total pages Schedule A1:
			Sch: 13/15 Rpt: 16/22
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Shank, Erin	B. (Ms.)		00085706
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/29/2024	St Clair, Amy		\$25.0
	6 Contributor address; City; State; Zip Code		
	Hico, TX 76457		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/31/2024	Stevenson, Cecilia		\$10.0
	Contributor address; City; State; Zip Code		1
- · · ·	Waco, TX 76707	1 _ · · · · ·	
Principal occu Sales Admin	upation / Job title (See Instructions)	Employer (See Instructions	5)
		Time Manufacturing	1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/15/2024	Turner-Pearson, Katherine		\$25.0
	Contributor address; City; State; Zip Code		
	Woodway, TX 76712		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Archaeologis	st	Central Texas Archaeol	ogical Resources
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/15/2024	Turner-Pearson, Katherine		\$25.0
	Contributor address; City; State; Zip Code		1
	Woodway, TX 76712		<u> </u>
	upation / Job title (See Instructions)	Employer (See Instructions Central Texas Archaeol	
Archaeologis			-
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/28/2024	Tweed, Jeffrey		\$10.0
	Contributor address; City; State; Zip Code		
	Hewitt, TX 76643		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	1s)
Not Employe		Not Employed	
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The Instruction Guide explains how to complete this form. 1 Total pages Statellel A1: Sch: 14/15 Rpt: 17/22 2 FiLER NAME Shark, Erin B. (Ms.) 9 Enter D. (Ethics Commission Filers) 00085706 4 Date 10/29/2024 5 Full name of contributor I out-ot-state PAC (DDF Carroliton, TX 75007 7 Amount of Contribution (\$) Vaughtin, Dana. 8 Principal occupation / Job the (See Instructions) Finance Director 9 Employer (See Instructions) City of Carroliton 7 Amount of Contribution (\$) S10.00 Date 11/01/2024 Full name of contributor I out-ot-state PAC (DDF Woodway, TX 76712 Amount of Contribution (\$) S10.00 Principal occupation / Job the (See Instructions) Finance Director Employer (See Instructions) Midway ISD Amount of Contribution (\$) S10.00 Date 12/01/2024 Full name of contributor I out-ot-state PAC (DDF Woodway, TX 76712 Amount of Contribution (\$) S10.00 Date 12/01/2024 Full name of contributor I out-ot-state PAC (DDF Woodway, TX 76712 Amount of Contribution (\$) S10.00 Date 12/01/2024 Full name of contributor I out-ot-state PAC (DDF Woodway, TX 76712 Amount of Contribution (\$) S10.00 Date 10/28/2024 Full name of contributor I out-ot-state PAC (DDF Woodway, TX 76712 Amount of Contribution (\$) S10.00 Date 10/28/2024 Full name of contributor I out-ot-state PAC (DDF Woodway, TX 76712 Amount of Contribution (\$) S10.00 Date 11/23/224							
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10/29/2024 Vaughn, Diana			B. (Ms.)		-		
6 Contributor address; City, State; Zip Code 6 Contributor address; City, State; Zip Code 7 Principal occupation / Job title (See Instructions) 7 Employer (See Instructions) 7 Employer (See Instructions) 7 Full name of contributor 10/28/2024 Full name of contributor 9 Contributor address; City; State; Zip Code 10/28/2024 Full name of contributor 9 Employer (See Instructions) 11/23/2024 Full name of contributor 11/23/2024 Full n	4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
Image: Carroliton, TX 75007 Image: Carroliton / Job tille (See Instructions) Image: Carroliton / Job tille (See Instructions) Image: Carroliton / Job tille (See Instructions) Image: City of Carroliton Amount of Contribution (\$) Date Full name of contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job tille (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Teacher Full name of contributor or out-of-state PAC (Dei: Amount of Contribution (\$) \$10.00 Date Full name of contributor or out-of-state PAC (Dei: Amount of Contribution (\$) \$10.00 12/01/2024 Warren, Rebecca Contributor address; City: State; Zip Code Amount of Contribution (\$) \$10.00 12/01/2024 Warren, Rebecca Employer (See Instructions) \$10.00 Teacher Woodway, TX 76712 Employer (See Instructions) \$10.00 Principal occupation / Job tille (See Instructions) Employer (See Instructions) \$10.00 Teacher Full name of contributor or out-of-state PAC (Dei: Amount of Contribution (\$) \$50.00 Date Full name of contributor or out-of-state PAC (Dei: Amount of Contribution (\$) \$50.00 10/28/2024 <t< td=""><td></td><td>10/29/2024</td><td>Vaughn, Diana</td><td></td><td></td><td></td><td>\$25.00</td></t<>		10/29/2024	Vaughn, Diana				\$25.00
8 Principal occupation / Job title (See Instructions) Finance Director 9 Employer (See Instructions) City of Carrollton Date Full name of contributor inderess; City; State; Zip Code Amount of Contribution (\$) \$10.00 11/01/2024 Warren, Rebecca St0.00 \$10.00 Warren, Rebecca Contributor address; City; State; Zip Code Amount of Contribution (\$) \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$10.00 Date Full name of contributor inderes; City; State; Zip Code Midway ISD Amount of Contribution (\$) \$10.00 Date Full name of contributor inderes; City; State; Zip Code Mount of Contribution (\$) \$10.00 Voodway, TX 76712 Mount of Contribution (\$) Employer (See Instructions) \$10.00 Teacher Contributor address; City; State; Zip Code Amount of Contribution (\$) \$10.00 10/28/2024 Full name of contributor induces; City; State; Zip Code Amount of Contribution (\$) \$50.00 Date Full name of contributor inderes; City; State; Zip Code Amount of Contribution (\$) \$50.00 10/28/2024 Full name of contributor inderes; City; State; Zip Code Amount of			6 Contributor address; City; State; Zip Code		1		
8 Principal occupation / Job title (See Instructions) Finance Director 9 Employer (See Instructions) City of Carrollton Date Full name of contributor inderess; City; State; Zip Code Amount of Contribution (\$) \$10.00 11/01/2024 Warren, Rebecca St0.00 \$10.00 Warren, Rebecca Contributor address; City; State; Zip Code Amount of Contribution (\$) \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$10.00 Date Full name of contributor inderes; City; State; Zip Code Midway ISD Amount of Contribution (\$) \$10.00 Date Full name of contributor inderes; City; State; Zip Code Mount of Contribution (\$) \$10.00 Voodway, TX 76712 Mount of Contribution (\$) Employer (See Instructions) \$10.00 Teacher Contributor address; City; State; Zip Code Amount of Contribution (\$) \$10.00 10/28/2024 Full name of contributor induces; City; State; Zip Code Amount of Contribution (\$) \$50.00 Date Full name of contributor inderes; City; State; Zip Code Amount of Contribution (\$) \$50.00 10/28/2024 Full name of contributor inderes; City; State; Zip Code Amount of							
8 Principal occupation / Job title (See Instructions) Finance Director 9 Employer (See Instructions) City of Carrollton Date Full name of contributor inderess; City; State; Zip Code Amount of Contribution (\$) \$10.00 11/01/2024 Warren, Rebecca St0.00 \$10.00 Warren, Rebecca Contributor address; City; State; Zip Code Amount of Contribution (\$) \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$10.00 Date Full name of contributor inderes; City; State; Zip Code Midway ISD Amount of Contribution (\$) \$10.00 Date Full name of contributor inderes; City; State; Zip Code Mount of Contribution (\$) \$10.00 Voodway, TX 76712 Mount of Contribution (\$) Employer (See Instructions) \$10.00 Teacher Contributor address; City; State; Zip Code Amount of Contribution (\$) \$10.00 10/28/2024 Full name of contributor induces; City; State; Zip Code Amount of Contribution (\$) \$50.00 Date Full name of contributor inderes; City; State; Zip Code Amount of Contribution (\$) \$50.00 10/28/2024 Full name of contributor inderes; City; State; Zip Code Amount of			Carrollton, TX 75007				
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Contributor address; City, State; Zip Code Woodway, TX 76712 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher Amount of Contributor Date Full name of contributor out-of-state PAC (ID#						, another of contraction (,	\$10.00
Woodway, TX 76712 Employer (See Instructions) Midway ISD Date 12/01/2024 Full name of contributor out-of-state PAC (Du:) Warren, Rebecca Amount of Contribution (\$) S10.00 12/01/2024 Full name of contributor out-of-state PAC (Du:) Woodway, TX 76712 Amount of Contribution (\$) S10.00 Principal occupation / Job title (See Instructions) Teacher Employer (See Instructions) Midway ISD Amount of Contribution (\$) S50.00 Date 10/28/2024 Full name of contributor out-of-state PAC (Du:) Watson, Greta Amount of Contribution (\$) S50.00 Contributor address; City, State; Zip Code Amount of Contribution (\$) Mart, TX 76664 Amount of Contribution (\$) S50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) S10.00 Date 11/23/2024 Full name of contributor out-of-state PAC (ID#:) Mart, TX 76664 Amount of Contribution (\$) S10.00 Date 11/23/2024 Full name of contributor out-of-state PAC (ID#:) Wilkins, Ken Contributor address; City; State; Zip Code Amount of Contribution (\$) S10.00 Date 11/23/2024 Full name of contributor out-of-state PAC (ID#:) Vilkins, Ken Contributor address; City; State; Zip Code Amount of Contribution (\$) S10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) S10.00 Principal occup					•		Ŧ -
Principal occupation / Job title (See Instructions) Teacher Employer (See Instructions) Midway ISD Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution address; City; State; Zip Code Amount of Contribution (\$) \$10.00 Ortripial occupation / Job title (See Instructions) Teacher Employer (See Instructions) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Teacher Employer (See Instructions) Midway ISD Date Full name of contributor out-of-state PAC (ID#:) Midway ISD Date Full name of contributor out-of-state PAC (ID#:) Midway ISD Amount of Contribution (\$) \$50.00 10/28/2024 Watson, Greta Amount of Contribution (\$) \$50.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) \$11/23/2024 Amount of Contributor Date Full name of contributor out-of-state PAC (ID#:							
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12/01/2024 Warren, Rebecca \$10.00 Contributor address; City; State; Zip Code \$10.00 Woodway, TX 76712 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher Midway ISD Date Full name of contributor out-of-state PAC (ID#:		Teacher		Midway ISD			
12/01/2024 Warren, Rebecca \$10.00 Contributor address; City; State; Zip Code \$10.00 Woodway, TX 76712 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher Midway ISD Date Full name of contributor out-of-state PAC (ID#:	⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
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Contributor address; City; State; Zip Code Mart, TX 76664 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/23/2024 Wilkins, Ken Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Crawford, TX 76638 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Mart, TX 76664 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/23/2024 Wilkins, Ken Amount of Contribution (\$) Contributor address; City; State; Zip Code S10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions)		10/28/2024					\$50.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/23/2024 Wilkins, Ken \$10.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)					1		
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/23/2024 Wilkins, Ken \$10.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)							
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/23/2024 Wilkins, Ken \$10.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$10.00 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 (\$) 11/23/2024 Wilkins, Ken \$10.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$10.00 Crawford, TX 76638 Employer (See Instructions) Employer (See Instructions)		D 1			Ĺ		
11/23/2024 Wilkins, Ken \$10.00 Contributor address; City; State; Zip Code \$10.00 Crawford, TX 76638 Employer (See Instructions)		Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
11/23/2024 Wilkins, Ken \$10.00 Contributor address; City; State; Zip Code \$10.00 Crawford, TX 76638 Employer (See Instructions)							
Contributor address; City; State; Zip Code Crawford, TX 76638 Principal occupation / Job title (See Instructions) Employer (See Instructions))		Amount of Contribution (\$)	
Crawford, TX 76638 Principal occupation / Job title (See Instructions) Employer (See Instructions)		11/23/2024					\$10.00
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)			Crowford TV 76628				
	\vdash	Dringing occu		Employer (See Instructions	<u> </u>		
					5)		

	The Instrue	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/15 Rpt: 18/22	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Shank, Erin I	B. (Ms.)			00085706	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/30/2024	Wilson, Bo				\$10.00
		6 Contributor address; City; State; Zip Code				
Ļ		Austin, TX 78749				
8		· · ·	9 Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/27/2024	Woodson, Angelia				\$50.00
		Contributor address; City; State; Zip Code				
		Mass TV 76712				
\vdash	Dringinal occu	Waco, TX 76712 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		retired	9		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:))		Amount of Contribution (\$)	¢20.00
	10/30/2024	Wright, Donna & Don				\$20.00
		Contributor address; City; State; Zip Code				
		Valley Mills, TX 76689				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) ;)		
	Pastor		St. Paul Lutheran Churc			
⊢	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/30/2024	karney, anita				\$15.60
		Contributor address; City; State; Zip Code				
		waco, TX 76712				
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/31/2024	sheaks, Robert				\$5.00
		Contributor address; City; State; Zip Code				
		Irving, TX 75060				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Lab tech		Electro Plate Circuitry			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/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: 1/3 Rpt: 19/22	Shank, Erin B. (Ms.)	00085706				
4	Date 10/28/2024	Payee name APH Digital LLC					
6							
6	Amount (\$)7Payee address;City;State;Zip Code\$2,000.0018710 Rogers Glen						
		San Antonio, TX 78258					
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense IG				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/21/2024	Bumperactive					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$129.56	1045 Reinli St. #A Austin, TX 78723					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/27/2024	Chase Bank					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$3,396.36	P.O.Box 15123					
		Wilmington, DE 19850					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense RD PAYMENT				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide	Office Over Polling Expe ense 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:	ILER NAME			3 Filer ID (Ethics Commission Filers)		
	Sch: 2/3 Rpt: 20/22	ihank, Erin B. (Ms.)			00085706		
4	Date	ayee name			I		
	11/29/2024	ROUP SALES					
6	Amount (\$)	ayee address; City;	State; Zip Cod	e			
	\$1,898.13	12 S. Cooper Avenue	<i>·</i> •				
		·					
		CINCINNATI, OH 45202					
8	PURPOSE	ategory (See Categories listed at the to	n of this schodulo)	b) Description			
	OF	dvertising Expense			outside of Texas. Complete Schedule T.		
	EXPENDITURE	5 5 5 7 5			n, TX, officeholder living expense		
				ADVERTISE			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	ht	Office held		
	Date	ayee name					
	12/05/2024	ROUP SALES					
	Amount (\$)	ayee address; City;	State; Zip Cod	e			
	\$4,480.00	12 S. Cooper Avenue					
		CINCINNATI, OH 45202					
	PURPOSE	ategory (See Categories listed at the to	p of this schedule)	b) Description			
	OF EXPENDITURE	dvertising Expense			outside of Texas. Complete Schedule T.		
					ı, TX, officeholder living expense		
				, BVENNOL			
	Complete ONLY if direct	ndidate/Officeholder name	Office soug	ht	Office held		
	expenditure to benefit C/OF		Office Soug				
	Data						
	Date 11/18/2024	ayee name IcGregor MIrror					
		-					
	Amount (\$)	ayee address; City;	State; Zip Cod	e			
	\$300.00	11 S. Main St.					
		IcGregor, TX 76657					
-	PURPOSE	-		b) Description			
	OF	ategory (See Categories listed at the top dvertising Expense	p of this schedule)		outside of Texas. Complete Schedule T.		
	EXPENDITURE	averability Expense			, TX, officeholder living expense		
				ADVERTISE			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	ht	Office held		
	experience to benefit C/Of						

POLITICAL EX	(PENDITURES FROM POLITICAL DNS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Pol Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimburs Fees Office Overhead/Rental Exp Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense ical Committee Legal Services The Instruction Guide explains how to complete this for	bense Transportation Equipment & Related Expense Travel in District Travel Out of District abor OTHER (enter a category not listed above)
1 Total pages Schedule F Sch: 3/3 Rpt: 21/22	: 2 FILER NAME Shank, Erin B. (Ms.)	3 Filer ID (Ethics Commission Filers) 00085706
4 Date 10/28/2024	5 Payee name Scripps Media	
6 Amount (\$) \$2,091.3	 7 Payee address; City; State; Zip Code 312 Walnut St. Suite 2800 Cincinnati, OH 45202 	
8 PURPOSE OF EXPENDITURE		if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C.	Candidate/Officeholder name Office sought OH	Office held
Date 11/15/2024	Payee name West News	
Amount (\$) \$766.9	Payee address; City; State; Zip Code 214 W. Oak St. West, TX 76691	
PURPOSE OF EXPENDITURE		if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C.		Office held

		FO	ORM C/OH - FR
	The Instruction Guide explains how to complete this form. ** Complete only if "Report Type" on page 1 is marked "Final Report" **		Page 22 of 22
1	C/OH NAME	2 Filer ID	(Ethics Commission Filers)
	Shank, Erin B. (Ms.)	00085706	
3	SIGNATURE		
	I do not expect any further political contributions or political expenditures in connection with my candid as a final report terminates my campaign treasurer appointment. I also understand that I may not acc campaign expenditures without a campaign treasurer appointment on file.		
	Ms Fri	in B. Shank	
		ndidate / Officehol	der
Ļ	, ,		
4	FILER WHO IS NOT AN OFFICEHOLDER ** Complete A & B below only if you are not an officeholder **		
	A CAMPAIGN FUNDS		
	Check only one:		
	X I do not have unexpended contributions or unexpended interest or income earned from politic	cal contributions.	
	I have unexpended contributions or unexpended interest or income earned from political con convert unexpended political contributions or unexpended interest or income earned on politi understand that I must file an annual report of unexpended contributions and that I may not r unexpended interest or income earned on political contributions longer than six years after fil must dispose of unexpended political contributions and unexpended interest or income earned with the requirements of Election Code 254.204.	ical contributions t etain unexpended ling this report. Fu	o personal use. I also contributions or Irther, I understand that I
	B ASSETS		
	Check only one:		
	X I do not retain assets purchased with political contributions or interest or other income from p	oolitical contribution	ns.
	I do retain assets purchased with political contributions or interest or other income from political convert assets purchased with political contributions or interest or other income from political understand that I must dispose of assets purchased with political contributions in accordance 254.204.	l contributions to p	ersonal use. I also
		in B. Shank	
	Signature	e of Candidate	
5	OFFICEHOLDER ** Complete this section only if you are an officeholder **		
	I am aware that I remain subject to filing requirements applicable to an officeholder who does also aware that I will be required to file reports of unexpended contributions if, after filing the retain political contributions, interest or other income from politicial contributions, or assets pu interest or other income from political contributions.	last required report	rt as an officeholder, I
	Signature	of Officeholder	
1			

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