CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Τł	ne C/OH Instruction (Guide explains how to comp	lete this form.	1 Filer ID (Ethics Comr 0008610	nission Filers) 8	2 Total pages	filed: 22
3	CANDIDATE /	MS / MRS / MR	FIRST		MI		USE ONLY
	OFFICEHOLDER	The Honorable	Nathaniel			OFFICE	
	NAME					Date Received	
						ELECTRONI	CALLY FILED
		NICKNAME	LAST		SUFFIX		
		Nate	Schatzline				
F				T \/.	710 0005	Data Hand delivered	d or Date Postmarked
4	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/SUITE#; CI	ΙΥ;	ZIP CODE	Date Hand-delivered	of Date Postillarked
	MAILING	P.O. Box 162564				Receipt #	Amount
	ADDRESS					Receipt #	Amount
	Change of Address	Fort Worth, TX 76161				Date Processed	
						Date Processed	
						Date Imaged	
						Date imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
ľ	TREASURER	Mrs.	Adrienne Brad	lloigh			
	NAME	WII 5.	Aunenne brau	lieigii			
		NICKNAME	LAST		SUFFIX		
			Schatzline				
6	CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AI	PT / SUITE #; CITY;	; S	TATE; ZIP CODE
	TREASURER ADDRESS	P.O. Box 162564					
	(Residence or Business)	Fort Worth, TX 76161					
7	CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
	TREASURER PHONE	(469) 337-9547					
	PHONE						
8	REPORT						
	TYPE	X January 15	30th day befor	e election	Runoff		campaign treasurer
			—			_	fficeholder only)
		July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	.ttach C/OH-FR)
9	PERIOD COVERED	Month Day Year			Month Day	Year	
	COVERED	10/27/2024	T	HROUGH	12/31/202	24	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
		Month Day Year		Primary	Runoff	Other	
		11/05/2024		General	Special		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	OFFICE	State Representative Dist	trict 02 Tarrant		State Represent)
		State Representative Dist			State Represent)
L							
1							
1							
1			GO	TO PAGE 2			
	rms provided by Te	exas Ethics Commission		thics.state.tx.			sion V4.1.0.5dd2ace2
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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 22

13 C / OH NAME	Schatzline, Nathanie	(The Honorable)	14 Filer ID (E 00086108	Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t d officeholders are required to report this information	he candidate's or officel	nolder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	X GENERAL	Texas Alliance for Life PAC					
		COMMITTEE ADDRESS					
	SPECIFIC	8000 Centre Park Drive Suite 380					
		Austin, TX 78754					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Shaw, James					
		COMMITTEE CAMPAIGN TREASURER ADDRES	ŝS				
	4505 Corazon Cv						
		Round Rock, TX 78681					
16 CONTRIBUTION TOTALS	\$ 0.00						
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 17,310.00			
EXPENDITURE TOTALS	\$ 0.00						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 14,223.63			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 111,872.36			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00			
17 AFFIDAVIT	•			•			
		l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.					
		The Honoral	ole Nathaniel Schatzl	ine			
		Signature of	Candidate or Officehold	er			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subso	ribed before me, by the s	aid	this the	day			
		ertify which, witness my hand and seal of office.	, and and	uuj			
Signature of offic	Signature of officer administeringPrinted name of officer administeringTitle of officer administering oath						
Forms provided by Tex	xas Ethics Commissior	www.ethics.state.tx.us	V	/ersion V4.1.0.5dd2ace2			

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 22 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Schatzline, Nathaniel (The Honorable) 00086108 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 17,310.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 14,223.63 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ TO FILER

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	The Instru	ction Guide explains how to comple	orm.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/22		
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)		
	Schatzline, ľ	Nathaniel (The Honorable)				00086108	-
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/04/2024	Brannan , Ryan	Brannan , Ryan				
		6 Contributor address; City; State; Zip Code					
		Austin , TX 78701					
		upation / Job title (See Instructions)	ļ	9 Employer (See Instructions)	5)		
	Attorney			Brannan & Associates			
	Date Full name of contributor out-of-state PAC (ID#:)					Amount of Contribution (\$)	
	12/13/2024	Brice, Al					\$100.00
		Contributor address; City; State; Zip Code					
		Fayetteville, NC 28306					
	Drincinal occu			Employor (See Instructions	<u> </u>		
	Phillipai occu	upation / Job title (See Instructions)	Employer (See Instructions)	9			
╞	D-1-		<u> </u>		t t - t (t)		
	Date Full name of contributor out-of-state PAC (ID#:)					Amount of Contribution (\$)	ኖድ ዐዐ
	10/30/2024						\$5.00
		Contributor address; City; State; Zip Code					
		Westland, MI 48185					
	Principal occu	I Ipation / Job title (See Instructions)	<u> </u>	Employer (See Instructions)			
	Climate Eng	ineering and Operator	ļ	One HVACR			
	Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	11/30/2024	Caldwell III, James					\$5.00
		Contributor address; City; State; Zip Code					
L		Westland, MI 48185					
		upation / Job title (See Instructions)	ļ	Employer (See Instructions))		
L	Climate Eng	ineering and Operator		One HVACR			
	Date		e PAC (ID#:)		Amount of Contribution (\$)	
	11/20/2024 Garner, Hunter						\$50.00
	Contributor address; City; State; Zip Code						
		Keller, TX 76262			Ļ		
		upation / Job title (See Instructions)	ļ	Employer (See Instructions)	5)		
	Actor]	Merrit St. Media			

	The Instru	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/22			
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)		
	Schatzline, N	lathaniel (The Honorable)		00086108				
4	Date	5 Full name of contributor out-of-state PAC	: (ID#:)	7	Amount of Contribution (\$)			
	12/04/2024	Greenberg Traurig P.A. Political Action Co	mmittee			\$500.00		
		6 Contributor address; City; State; Zip Code						
		Albany , NY 12707						
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)				
	Date	Full name of contributor out-of-state PAC	: (ID#:)		Amount of Contribution (\$)			
	12/04/2024	Homepac of Texas				\$500.00		
		Contributor address; City; State; Zip Code		"				
		Austin, TX 78701						
	Principal occu	pation / Job title (See Instructions)	s)					
F	Date Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$)			
	12/11/2024 J. Ancira Strategies					\$400.00		
	Contributor address; City; State; Zip Code							
		Taylor, TX 76574						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Date	Full name of contributor 🔲 out-of-state PAC	: (ID#:)		Amount of Contribution (\$)			
	12/05/2024	Keel, Lara Laneri				\$500.00		
		Contributor address; City; State; Zip Code		"				
		Austin , TX 78703						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
	unknown		unknown					
	Date	Full name of contributor out-of-state PAC	: (ID#:)		Amount of Contribution (\$)			
	12/14/2024 Lopez, Kaden					\$100.00		
	Contributor address; City; State; Zip Code							
		Weatherford, TX 76086						
	Principal occupation / Job title (See Instructions) Employer (See Instruction							
	Executive Di	rector						
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/22	
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)	
		Nathaniel (The Honorable)			00086108	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/09/2024	Oncor Texas State PAC				\$2,500.00
	I	6 Contributor address; City; State; Zip Code				
	I					
	I	Dallas , TX 75202				
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 (\$)	
	10/30/2024	Schatzline, Patrick				\$25.00
	I	Contributor address; City; State; Zip Code				
	I					l
	I	Northport, AL 35476				
	Principal occu	upation / Job title (See Instructions)	. 5)			
	Bishop		FIF			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/30/2024	Schatzline, Patrick				\$25.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Northport, AL 35476				
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		
L	Bishop		FIF	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024	SerVaas, Curtis				\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Austin, TX 78757				
Γ	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	unemployed		unemployed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/05/2024 Texas Aggregates & Concrete Association					\$1,000.00
	Contributor address; City; State; Zip Code					
	I					
	I	Round Rock, TX 75661				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/22	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		Nathaniel (The Honorable)			00086108	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/05/2024	Texas Alliance for Life PAC				\$100.00
		6 Contributor address; City; State; Zip Code				
		Austin , TX 78754				
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 (\$)	
	12/14/2024)		Amount of Contribution (\$)	¢500.00
						\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78711				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	·			,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/02/2024	Texas Dental Association PAC				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78704				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
			·	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/05/2024	Texas Manufactured Housing Association Inc.				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 76753				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	لــــــــــــــــــــــــــــــــــــ		
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⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/05/2024 Texas Medical Association					\$250.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
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	The Instru	ction Guide explains how	orm.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/22		
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)		
	Schatzline, M	Nathaniel (The Honorable)				00086108	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/04/2024	Textron PAC					\$500.00
		6 Contributor address; City; S	State; Zip Code		1		
		Providence, RI 02903					
8	Principal occu	I upation / Job title (See Instruction	 IS)	9 Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
		· .					
_	Date Full name of contributor out-of-state PAC (ID#:)					Amount of Contribution (\$)	
	12/14/2024 Waste Management Employees Better Government Fund						\$1,500.00
		Contributor address; City; S	State; Zip Code		1		
			-				
		Washington D.C., DC 20					
Principal occupation / Job title (See Instructions) Employer (See Instruction							
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/04/2024	Wine and Spirits Wholes	alers of Texas PAC				\$2,500.00
		Contributor address; City; S			1		
		Austin , TX 78701					
	Principal occu	upation / Job title (See Instruction	IS)	Employer (See Instructions	;)		
_	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/02/2024	charter schools now pac					\$1,000.00
		Contributor address; City; S	State; Zip Code		ł		
			· •				
		Austin , TX 78704					
	Principal occu	upation / Job title (See Instruction	IS)	Employer (See Instructions	;)		
	Date	Full name of contributor	X out-of-state PAC (ID#: (0900 <u>35005</u>)	Γ	Amount of Contribution (\$)	
	11/12/2024 chevron employees pac						\$500.00
	Contributor address; City; State; Zip Code						
		San Francisco , CA 2458	33				
	Principal occu	upation / Job title (See Instruction	IS)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
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	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/22		
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
	Schatzline, N	Nathaniel (The Honorable)			00086108	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2024	gray, brady			\$250.00	
		6 Contributor address; City; State; Zip Code				
		Brock, TX 76087				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	President	, , , , , , , , , , , , , , , , , , ,	Texas Family Project			
⊨	Data	Full name of contributor Out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (¢)	
	Date)		Amount of Contribution (\$)	¢500.00
	12/04/2024	matz and company llc				\$500.00
		Contributor address; City; State; Zip Code				
		Austin , TX 76703	Employer (See Instructions	Ļ		
	Principal occu	pation / Job title (See Instructions)	5)			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#:		Amount of Contribution (\$)		
	12/04/2024	texas oil and gas association good government (\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains I	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor s 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: 1/13 Rpt: 10/22		Schatzline, Nathaniel (The Honorable)	00086108			
4	Date 11/13/2024		Payee name Amazon				
6	Amount (\$) \$12.12		Payee address; City; State; 410 Terry Ave. N Seattle, WA 98109	Zip Co	le		
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Event Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held
	Date		Payee name				
	12/03/2024		Amazon				
	Amount (\$) \$77.55		410 Terry Ave. N	; Zip Co	le		
	PURPOSE OF EXPENDITURE	(a)	Seattle, WA 98109 Category (See Categories listed at the top of this sche Event Expense	edule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held
	Date		Payee name				
	12/04/2024	.	Amazon				
	Amount (\$) \$30.31		Payee address; City; State; 410 Terry Ave. N	; Zip Co	le		
			Seattle, WA 98109				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Event Expense	edule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	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	Event Expense Loan Repayment/Reimbu Fees Office Overhead/Rental E Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract The Instruction Guide explains how to complete this f	xpense Transportation Equipment & Related Expense Travel in District Travel Out of District Labor OTHER (enter a category not listed above)			
1	Total pages Sabadula E1	· · · · ·				
1	Total pages Schedule F1: Sch: 2/13 Rpt: 11/22	Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108			
4	Date	Payee name	•			
	12/17/2024	Amazon				
6	Amount (\$) \$139.43	Payee address; City; State; Zip Code 410 Terry Ave. N				
		Seattle, WA 98109				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/18/2024	Amazon				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$75.75	410 Terry Ave. N Seattle, WA 98109				
	PURPOSE OF EXPENDITURE		otion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense Expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/18/2024	Amazon				
	Amount (\$) \$132.04	Payee address; City; State; Zip Code 410 Terry Ave. N				
		Seattle, WA 98109				
	PURPOSE OF EXPENDITURE		otion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense 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/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	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	FILER NAME		-	3	Filer ID (Ethics Commission Filers)
	Sch: 3/13 Rpt: 12/22		Schatzline, Nathaniel (The Honorable)				00086108
4	Date 12/18/2024		Payee name Amazon				
6	Amount (\$) \$43.17		Payee address; City; State; 410 Terry Ave. N Seattle, WA 98109	Zip Co	le		
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (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 Event Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	ht		Office held
	Date		Payee name				
	12/19/2024		Amazon				
	Amount (\$) \$93.01		Payee address; City; State; 410 Terry Ave. N	Zip Co	le		
			Seattle, WA 98109				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Event Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	ht		Office held
	Date		Payee name				
	11/08/2024		Axiom Strategies				
	Amount (\$) \$3,349.92		Payee address; City; State; 800 W. 47th St. Ste. 200 Kansas City, MO 64112	Zip Co	le		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Consulting Expense	edule)		, TX	de of Texas. Complete Schedule T. , officeholder living expense CES
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	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	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense ummittee 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:	· · · · ·	3 Filer ID (Ethics Commission Filers)					
	Sch: 4/13 Rpt: 13/22	Schatzline, Nathaniel (The Honorable)	00086108					
4	Date	Payee name						
	10/30/2024	Ben Bumgarner Campaign						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$250.00	5150 Kensington Court						
		Flower Mound , TX 75022						
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By	utside of Texas. Complete Schedule T.					
			TX, officeholder living expense					
		Campaign Co	ntribution					
	-							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/30/2024	Caroline Harris Davilla Campaign						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00 P.O. Box 700							
		Round Rock, TX 78680						
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	with of Truck Consults Colorida T					
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
		Campaign Co						
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held					
⊨	Date	Payee name						
	10/30/2024	Don Mclaughlin Campaign						
-	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00	P.O. Box 1707						
	φ200.00							
		Uvalde , TX 78802						
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		utside of Texas. Complete Schedule T.					
		Candidate/Officeholder/Political Committee	TX, officeholder living expense					
		Campaign Co	nuisaion					
_	Complete ONUV if direct	Candidate/Officeholder.neme Office.courtet	Office held					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

				EXPENDITU	JRE CATEGOR	RIES FOR	вох	(8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			nmittee	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/Fundr Transportation Ed Travel in District Travel Out of Dist OTHER (enter a d	quipment & Rela	
1	Total pages Schedule F1:	12			Guide explaine	11000 10 00.	Inproce		2		(Ethics Com	mission Eilers)
T	Sch: 5/13 Rpt: 14/22			Giller NAME3 Filer ID(Ethics Commission Filers)Schatzline, Nathaniel (The Honorable)00086108								
4	Date		Payee name									
	11/04/2024		Donor Box									
6	Amount (\$) \$17.00		Suite 900	ss; City; Building, 53rc sco, CA 94103	l St.	; Zip Co	de					
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offi	ceholder name	C	Office sou	ght			Office he	ld	
	Date		Payee name									
	12/04/2024		Donor Box									
	Amount (\$)		Payee addre	ss; City;	State;	; Zip Co	de					
	\$17.00		The Hearst	Building, 53rc	l St.							
			Suite 900 San Francis	sco, CA 94103	3							
	PURPOSE OF EXPENDITURE	(a)	Category _{(Si} Fees	ee Categories listed a	at the top of this sch	edule)			TX,	de of Texas. Comp officeholder living Services		
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offi	ceholder name	C	Dffice sou	ght			Office he	ld	
	Date		Payee name									
	12/20/2024		For Liberty	And Justice								
	Amount (\$) \$2,600.00		Payee addre 1701 Oakhu	ss; City; urst Scenic Dr		; Zip Co	de					
			Fort Worth	TX 76111								
	PURPOSE OF EXPENDITURE		Category (Si Event Expe		at the top of this sch	edule)			TX,	de of Texas. Comp officeholder living nip		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Dffice sou	ght			Office he	ld	

	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 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)			
L.	Sch: 6/13 Rpt: 15/22	2	2 FILER NAME 3 Filer ID (Ethics Commonstance) Schatzline, Nathaniel (The Honorable) 00086108							
4	Date	5	Payee name							
	11/07/2024		Gaylord Texan							
6	Amount (\$) \$60.01									
			Grapevine, TX 76051							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expense Check if Austin, TX, officeholder living expense Event Expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held			
	Date		Payee name							
	11/12/2024		Gillaspie, Asher							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$250.00		1512 Daisy Ln. Burleson, TX 76028							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ager Salary			
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name Office sought Office held							
	Date		Payee name							
	11/22/2024		Gillaspie, Asher							
	Amount (\$) \$250.00		Payee address; City; State; 1512 Daisy Ln.	Zip Co	le					
			Burleson, TX 76028							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)		I, TX	ide of Texas. Complete Schedule T. , officeholder living expense ager Salary			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		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/Beverage Expense Gift/Awards/Memorials Expense	Office Overh 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			3	Filer ID (Ethics Commission Filers)	
	Sch: 7/13 Rpt: 16/22		Schatzline, Nathaniel (The Honorable)	00086108				
4	Date 11/04/2024		Payee name Home Depot					
6	Amount (\$) \$119.82		Payee address; City; State; 7100 N Freeway Fort Worth, TX 76137	Zip Cod	9			
8	B PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Campaign Supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Supplies							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Of	fice soug	nt		Office held	
	Date		Payee name					
	10/30/2024		Janie Lopez Campaign					
	Amount (\$) \$100.00		Payee address; City; State; P.O. Box 2073	Zip Cod	5			
			San Benito, TX 78586					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Contributions/Donations Made By Candidate/Officeholder/Political Commit			, TX,	de of Texas. Complete Schedule T. officeholder living expense ribution	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	fice soug	nt		Office held	
	Date		Payee name					
	10/30/2024		John Luhan Campaign					
	Amount (\$) \$100.00		Payee address; City; State; P.O. Box 14479	Zip Cod	ē			
			San Antonio , TX 78214					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Contributions/Donations Made By Candidate/Officeholder/Political Commit	-		, TX,	de of Texas. Complete Schedule T. , officeholder living expense ribution	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Off	fice soug	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	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:		-		•	3	Filer ID (Ethics Commission Filers)		
-	Sch: 8/13 Rpt: 17/22		tzline, Nathaniel (The Honora	able)			00086108		
4	Date	Payee	name						
	10/31/2024	Marc	Lahood Campaign						
6	Amount (\$)	Payee	address; City; S	state; Zip Co	le				
	\$250.00	4014	McCullough Avenue						
		San A	Antonio , TX 78212						
-	PURPOSE								
8	OF		Ory (See Categories listed at the top of th	is schedule)	(b) Description	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		ibutions/Donations Made By idate/Officeholder/Political Co	ommittee			, officeholder living expense		
		Cana			Campaign C				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candida	ate/Officeholder name	Office sou	ht		Office held		
	Date	Pavee	name						
	12/10/2024	-	e, Joshua						
⊢	Amount (\$)			tate; Zip Co	10				
	.,	-		otate, Zip Cu					
	\$25.00	-	leadow Place Dr.						
		Apt. 5	5210						
		Willo	w Park, TX 76087						
	PURPOSE	a) Categ	Ory (See Categories listed at the top of th	is schedule)	(b) Description				
	OF EXPENDITURE		ies/Wages/Contract Labor				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Campaign se	ervi	ces		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	Office sou	lht		Office held		
	Date	Payee	name						
	10/31/2024		e Tees						
_	Amount (\$)	Pavee	address; City; S	itate; Zip Co	le				
	\$832.52		Park Vista Cir #308	iaio, 2ip 00					
	\$002.0Z	0010							
		Fort V	Vorth, TX 76244						
	PURPOSE	a) Caten	Ory (See Categories listed at the top of th	is schedule)	(b) Description				
	OF		ng Expense	is seriedule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austir	n, TX,	, officeholder living expense		
					T Shirts				
	Complete ONLY if direct	Candida	ate/Officeholder name	Office sou	lht		Office held		
	expenditure to benefit C/OH								

	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	Office Ove 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				2	Filer ID (Ethics Commission Filers)		
-	Sch: 9/13 Rpt: 18/22	2	00086108						
4	Date	5	Payee name						
	11/18/2024		Rameno, Elias						
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	le				
	\$470.00		3237 Acoma Trail						
			Apt. 3321						
			Fort Worth , TX 76177						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE	OF Salaries/Wages/Contract Labor							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held		
	Date		Payee name						
	11/18/2024		Rameno, Elias						
	Amount (\$)		Payee address; City; State;	; Zip Co	le				
	\$3,200.00		3237 Acoma Trail						
			Apt. 3321						
			Fort Worth , TX 76177						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Salaries/Wages/Contract Labor	,			ide of Texas. Complete Schedule T.		
	EXPENDITORE						, officeholder living expense		
					Comms Sup	oor	t		
	Complete ONLY if direct		andidate/Officeholder name	Office sou	ht		Office held		
	expenditure to benefit C/OF				hu		Once neid		
	Date		Pavao namo						
	11/05/2024		Payee name Shell Service Station						
				; Zip Co	10				
	Amount (\$) \$15.00		Payee address; City; State; 1908 Yucca Ave.	, zip co	ie				
	φ <u>1</u> 0.00		1300 Tuccu / We.						
			Fort Worth, TX 76111						
	PURPOSE OF		Category (See Categories listed at the top of this sch	<i>'</i>	(b) Description				
	EXPENDITURE		Transportation Equipment And Related Expense	t			ide of Texas. Complete Schedule T. , officeholder living expense		
			слропос		Sign Transpo				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held		
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commit 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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 10/13 Rpt: 19/22		Schatzline, Nathaniel (The Honorable)				00086108	
4	Date	5	Payee name			I		
	11/07/2024		Shell Service Station					
6	Amount (\$)	7	Payee address; City; State; Z	Zip Cod	е			
	\$20.00		1908 Yucca Ave.					
			Fort Worth, TX 76111					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedul	ule) (b) Description			
	OF EXPENDITURE		Transportation Equipment And Related	-,			de of Texas. Complete Schedule T.	
	EXPENDITORE		Expense				officeholder living expense	
					Transportatio	n e	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offic	ce soug	nt		Office held	
	Date		Payee name					
	11/12/2024		Squarespace Inc.					
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e			
	\$294.22		225 Varick St.	P				
	<i>420 1122</i>							
			New York , NY 10014					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Fees	ıle) (, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offic	ce soug	nt		Office held	
_	Date	<u> </u>						
	11/19/2024		Payee name Squarespace Inc.					
				Zin Cad	-			
	Amount (\$) \$77.94		Payee address; City; State; Z	zip Coa	е			
	\$77.94		225 Varick St.					
			New York , NY 10014					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedul	ıle) (b) Description			
	OF EXPENDITURE		Fees				de of Texas. Complete Schedule T.	
							officeholder living expense	
					Campaign Ex	khe	1150	
	0 1 1 0 1 1 1 1							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Office	ce soug	าt		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							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: 11/13 Rpt: 20/22		Schatzline, Nathaniel (The Honorable)				00086108			
4	Date	5	Payee name							
	10/31/2024		Steve Kinard Campaign							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
	\$100.00		P.O. Box 260464							
			Plano , TX 75026							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description					
	OF	Ľ	Contributions/Donations Made By	uule)		outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee	Check if Austir	n, TX	, officeholder living expense			
					Campaign C	ont	ribution			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held			
_	Data	_								
	Date		Payee name							
	12/11/2024		Tim O'Hare Campaign							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$25.00	\$25.00 1961 E. Highland Street								
			Southlake , TX 76092							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.			
							, officeholder living expense			
					Campaign E	ven	ll.			
					1-4					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	m		Office held			
-	Date	<u> </u>	Payee name							
	11/06/2024		UHaul							
				Zip Co						
	Amount (\$) \$94.00		Payee address; City; State; 3736 Basswood Blvd	Zip Co	ie					
	\$94.00		S750 Basswood Bivu							
			Fort Worth, TX 76137	i						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	,	(b) Description					
	EXPENDITURE		Transportation Equipment And Related				ide of Texas. Complete Schedule T.			
			Expense		Transportatio		, officeholder living expense			
					ransportant					
	Complete ONLV if direct	Ļ	Candidate/Officeholder name O	ffice soug	ht		Office held			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			mue 200(in nu					

	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 Gitl/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: 12/13 Rpt: 21/22	Schatzline, Nathaniel (The Honorable) 00086108								
4	Date 11/08/2024	Payee name UHaul								
6	Amount (\$) \$104.89	7 Payee address; City; State; Zip Code 3736 Basswood Blvd Fort Worth, TX 76137								
8	PURPOSE OF EXPENDITURE	F Transportation Equipment And Related								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/08/2024	USPS								
	Amount (\$) \$128.00	Payee address; City; State; Zip Code 4600 Mark IV Pkwy								
		Fort Worth , TX 76161								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense PE							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/13/2024	Walmart Supercenter								
	Amount (\$) \$38.71	Payee address;City;State; Zip Code8520 N Beach St								
		Fort Worth, TX 76111								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense S e							
	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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/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:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)							
1	Sch: 13/13 Rpt: 22/22	2 FILER NAME 3 Filer ID (Ethics Commis 00086108 2 FILER NAME 00086108								
4	Date 11/05/2024	Payee name amaris, brooke								
6	Amount (\$)									
Ū	\$150.00	50.00 1701 Oakhurst Scenic Drive								
		Fort Worth, TX 76111								
8	PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/15/2024	mailchimp								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$90.61	405 N Angier Ave. Atlanta, GA 30308								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. 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								
	12/16/2024	mailchimp								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$90.61	405 N Angier Ave.								
		Atlanta, GA 30308								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense S							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							