DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE COVER SHEET PG 1

The DCE Instruction G	2 Total pages file	2 Total pages filed: 6				
3 FILER NAME	MS / MRS / MR	FIRST	00087063	MI	OFFICE U	SE ONLY
	NICKNAME	LAST Avow, Inc.		SUFFIX	Date Received ELECTRONICAL 01/14/2025	LLY FILED
4 FILER ADDRESS	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Y; STAT	E; ZIP COD	E	
	1101 W 34th St #679				Date Hand-delivered or D	Date Postmarked
Change of Address	Austin, TX 78705				Receipt #	Amount
5 FILER PHONE		ONE NUMBER	EXTENSION		Date Processed	
2 DEDODE TVD5	(512) 462-1661					
6 REPORT TYPE	X January 15	30	Oth day before ele	ction	Date Imaged	
	July 15	8t	h day before elec	ion		
		R	unoff			
7 PERIOD COVERED	Month Day Year 10/27/2024		HROUGH	Month D	ay Year 2024	
8 ELECTION	ELECTION DATE Month Day Year 11/05/2024		Primary General	ELECTIO Runoff Special	ON TYPE Other	
9 FILER ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported A	verie Bishop	State Representat	ive	
(Attach lists on plain paper to complete this report if		B. Opposed				
necessary.)	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		•				
GO TO PAGE 2						

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE COVER SHEET PG 2

Avow, Inc.		11 Filer ID 00087061	(Ethics Commission Filers)
	ICAL EVERNINITURES	00087001	
2 EXPENDITURE 1. TOTAL UNITEMIZED POLIT TOTALS	ICAL EXPENDITURES	\$	0.00
2. TOTAL POLITICAL EXPE	ENDITURES	\$	2,240.68
3 AFFIDAVIT	I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.	of perjury, that the ac information required	ccompanying report is to be reported by me
		gnature of Filer or	
	Signature of individual wi		n behalf of entity
	(Offity I	f Filer is an entity)	
Sworn to and subscribed before me, by the said		, this the	day
Signature of officer administering oath Printed	name of officer administering oath	Title of office	er administering oath

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE ADDENDUM

Page 3 of 6

10 FILED NAME				11 Filer ID (Ethics Commission Filers)
10 FILER NAME				11 Filer ID (Ethics Commission Filers) 00087061
Avow, Inc.	Ta on the	I. 0		
12 COMMITTEE ACTIVITY	1. Candidates (identify by name or, if applicable, classify by party)		Mihaela Plesa State Representa	ative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (describe by date and location of election and nature of issue)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)			
12 COMMITTEE ACTIVITY	Candidates (identify by name or, if applicable, classify by party)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (describe by date and location of election and nature of issue)	A. Supported	Ballot ID:null Election Date:2024	-11-05 Desc:Dallas City Proposition R
		B. Opposed		
	Officeholders Assisted (identify by name or, if applicable, classify by party)			
12 COMMITTEE ACTIVITY	Candidates (identify by name or, if applicable, classify by party)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (describe by date and location of election and nature of issue)	A. Supported		
		B. Opposed	Ballot ID:null Election Date:2024	-11-05 Desc:Amarillo City Proposition A
	3. Officeholders Assisted			
	(identify by name or, if applicable, classify by party)			
	1	ı		

S	UBT	OTALS - D	CE					FORM DCE
						C	OVER S	HEET PG 3 4 of 6
	ER NAM					15 Filer ID 00087061	(Ethics Co	ommission Filers)
		E SUBTOTALS SCHEDULE					SUB	TOTAL AMOUNT
1.	Х	SCHEDULE F1:	POLITICAL EXF	PENDITURES			\$	2,240.68
2.		SCHEDULE F2:	UNPAID INCUR	RED OBLIGAT	TIONS		\$	
3.		SCHEDULE F4:	EXPENDITURE	S MADE BY C	REDIT CARD		\$	

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 5/6	Avow, Inc. 00087061
4 Date	5 Payee name
11/05/2024	Peerly
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$295.64	2232 Dell Range Blvd
	#287
Expenditure from corporate funds	Cheyenne, WY 82009
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Texting
	. S. tanig
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
11/05/2024	Peerly
Amount (\$)	Payee address; City; State; Zip Code
\$324.95	2232 Dell Range Blvd
Expenditure from	#287
corporate funds	Cheyenne, WY 82009
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Texting
	i 6./mily
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
	Tiesa, Minaela State Representative District 70
Date	Payee name
11/05/2024	Peerly
Amount (\$)	Payee address; City; State; Zip Code
\$250.19	2232 Dell Range Blvd
- Cynonditure from	#287
Expenditure from corporate funds	Cheyenne, WY 82009
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LXI LINDITORE	Touting to Oppose Amerillo City Drep A
	Texting to Oppose Amarillo City Prop A
Organists ONII Wife discret	Our stide to 10 ff as health are nown.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	

POLITICAL EXPENDITURES SCHEDULE F1 **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) 00087061 Sch: 2/2 Rpt: 6/6 Avow, Inc. 4 Date Payee name 11/05/2024 Peerly 6 Amount (\$) Payee address; City; State; Zip Code \$1,369.90 2232 Dell Range Blvd #287 Expenditure from Cheyenne, WY 82009 corporate funds 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Texting to Support Dallas City Prop R Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH