CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction (| Guide explains how to compl | ete this form. | 1 Filer ID (Ethics Commi 00085786 | | 2 Total pages file 3! | |
|-------------------------|---|-------------------|---|--------------------|------------------------|------------------|
| 3 CANDIDATE / | MS / MRS / MR | FIRST | | MI | OFFICE U | ISE ONLY |
| OFFICEHOLDER NAME | The Honorable | Brian E. | | | Date Received | |
| | | | | | ELECTRONICA | J I Y FII FD |
| | NICKNAME | | | CUETIV | 01/15/2025 | |
| | NICKNAME | LAST Harrison | | SUFFIX | 01/13/2023 | |
| | | наттѕоп | | | | |
| 4 CANDIDATE / | ADDRESS / PO BOX; APT | / SUITE #; CIT | Υ; | ZIP CODE | Date Hand-delivered or | Date Postmarked |
| OFFICEHOLDER MAILING | 791 Hwy 77 N | | | | | _ |
| ADDRESS | STE 501-C Box 349 | | | | Receipt # | Amount |
| Change of Address | Waxahachie, TX 75165 | | | | | |
| | · | | | | Date Processed | |
| | | | | | Date Imaged | |
| | | | | | Date illiaged | |
| 5 CAMPAIGN | MS / MRS / MR | FIRST | | MI | | |
| TREASURER | Ms. | Catherine E. | | 1411 | | |
| NAME | IVIS. | Cauleline L. | | | | |
| | | | | | | |
| | NICKNAME | LAST | | SUFFIX | | |
| | | Bird | | | | |
| | | | | | | |
| 6 CAMPAIGN TREASURER | STREET ADDRESS (NO PO | BOX PLEASE); | AP ⁻ | T / SUITE #; CITY; | STA | TE; ZIP CODE |
| ADDRESS | 420 W. Franklin Apt 11 | | | | | |
| (Residence or Business) | | | | | | |
| | Waxahachie, TX 75165 | | | | | |
| | | | | | | |
| | 4554 0055 BUO | | | | | |
| 7 CAMPAIGN TREASURER | | IE NUMBER E | EXTENSION | | | |
| PHONE | (214) 499-5750 | | | | | |
| 9 DEDODT | | | | | | |
| 8 REPORT TYPE | X January 15 | 30th day before | election | Runoff | 15th day after can | nnaign treasurer |
| | | J Sour day Belore | | Tallon | appointment (offic | eholder only) |
| | July 15 | 8th day before | election | Exceeded modified | Final Report (Atta | ch C/OH-FR) |
| | | _ | | reporting limit | _ | |
| 9 PERIOD | Month Day Year | | | Month Day | Year | |
| COVERED | 10/27/2024 | T⊦ | IROUGH | 12/31/202 | 24 | |
| | | | | | | |
| 10 ELECTION | ELECTION DATE | | | ELECTION TYPE | | |
| | Month Day Year | P | rimary | Runoff | Other | |
| | | | eneral | Special | | |
| | | " | | | | |
| 11 OFFICE | OFFICE HELD (if any) | | | 12 OFFICE SOUGHT | (if known) | |
| II OFFICE | OFFICE HELD (if any) State Representative Distr | rict 10 Ellic | | State Represent | | |
| | State Representative Dist | ICC TO LIIIS | | State Represent | auve District 10 | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | GO T | O PAGE 2 | | | |
| I | | | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 35

| 13 C / OH NAME | 14 Filer ID 00085786 | (Ethics Commission Filers) | | |
|--|----------------------------------|---|---------------------------|------------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | political contributions accepted or political expenditual expenditual expenditures may have been made without distributed officeholders are required to report this information | the candidate's or office | eholder's knowledge or |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | |
| — | GENERAL | | | |
| | | COMMITTEE ADDRESS | | |
| | SPECIFIC | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRES | SS | |
| 16 CONTRIBUTION TOTALS | | I IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE | | \$ 0.00 |
| | | AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS | S) | \$ 75,753.01 |
| EXPENDITURE TOTALS | | \$ 0.00 | | |
| | 4. TOTAL POLITIC | AL EXPENDITURES | | \$ 5,458.35 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD | AST DAY OF THE | \$ 210,725.41 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIF OF THE REPOR | AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD | OF THE LAST DAY | \$ 50,000.00 |
| 17 AFFIDAVIT | | I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code. | | |
| | | The Hono | rable Brian E. Harris | on |
| | | Signature of | f Candidate or Officehol | der |
| AFFIX NO | TARY STAMP / SEAL AB | OVE | | |
| Sworn to and subso | cribed before me, by the s | aid | , this the | day |
| of | , 20, to co | ertify which, witness my hand and seal of office. | | |
| Signature of office | er administering | Printed name of officer administering | Title of office | r administering oath |

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

| | | | | , v = | 3 of 35 |
|--------------------|---|---|-----------------------------|------------|-------------------|
| 18 FILER Harris | | IE Brian E. (The Honorable) | 19 Filer ID 00085786 | (Ethics Co | ommission Filers) |
| | | E SUBTOTALS SCHEDULE | | SUB | TOTAL AMOUNT |
| 1. | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 75,753.01 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4. | | \$ | | | |
| 5. | X | \$ | 5,458.35 | | |
| 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 CONTRIBUTION | ONS | \$ | |
| 12. | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER | RETURNED | \$ | |
| | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | IS | | SCHEDUI | E A1 |
|---|--------------------------------|---|---|--|-----------------------------|---|------------|
| | The Instruc | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 1/21 Rpt: 4/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 11/23/2024 | 5 Full name of contributor Adams, Chad6 Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | 7 | Amount of Contribution (\$) | \$1,000.00 |
| 8 | Principal occu | Midlothian, TX 76065 pation / Job title (See Instructions) | l ₉ | Employer (See Instructions | .) | | |
| | Developer | pation / 300 title (300 matuctions) | | Henry Building | ') | | |
| | Date 11/24/2024 | Full name of contributor Aguilar, Teresa Contributor address; City; Sta | | | | Amount of Contribution (\$) | \$100.00 |
| | Dringing aggr | Midlothian, TX 76065 | | Employer (See Instructions | _ | | |
| | Campaign M | pation / Job title (See Instructions) lanager | | Employer (See Instructions Self |) | | |
| | Date 12/14/2024 | | | | Amount of Contribution (\$) | \$26.03 | |
| | | Lorena, TX 76655 | | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions retired | 5) | | |
| | Date 11/18/2024 | Full name of contributor Arnott, Dave Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu College Prof | pation / Job title (See Instructions) essor | | Employer (See Instructions Dallas Baptist University | | | |
| | Date 12/10/2024 | Full name of contributor BNSF RAILPAC Contributor address; City; Sta | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | () | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | IS . | | SCHEDUI | E A1 |
|---|--------------------------------|--|------------------------|--|----------|---|------------|
| | The Instruc | ction Guide explains how | to complete this for | n. | 1 | Total pages Schedule A1: Sch: 2/21 Rpt: 5/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 12/06/2024 | 5 Full name of contributor Backholm, Caleb | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | <u> </u> | Fort Worth, TX 76179 | la la | | | | |
| 8 | Principal occu Insurance Aç | pation / Job title (See Instructions) gent | 9 | Employer (See Instructions Backholm Insurance | 5) | | |
| | Date 12/12/2024 | Full name of contributor Barbara, McArthur Contributor address; City; Sta | |) | | Amount of Contribution (\$) | \$52.05 |
| | Principal occu | Arlington, TX 76017 pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | retired | panon, cos ano (cos monueno) | | retired | , | | |
| | Date 12/06/2024 | Full name of contributor Bellomy, Randy Contributor address; City; Sta | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$250.00 |
| | | Ovilla, TX 75154 | į | | <u> </u> | | |
| | Principal occu Business ow | pation / Job title (See Instructions) ners | | Employer (See Instructions Bellomy Heating and Air | • | | |
| | Date 11/15/2024 | Full name of contributor Beth Van Duyne for Congr Contributor address; City; Sta | | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 12/03/2024 | Full name of contributor Bielamowicz, John Contributor address; City; Sta | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Commercial | pation / Job title (See Instructions) Real Estate | | Employer (See Instructions Self Employed | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CON | TRIBUTION | S | | SCHEDUL | E A1 |
|---|-----------------------------|---|-------------------------------|--|----------|---|-------------|
| | The Instruc | ction Guide explains how to co | omplete this form | n. | 1 | Total pages Schedule A1: Sch: 3/21 Rpt: 6/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | n Filers) |
| 4 | Date 12/14/2024 | Bonnie, Wallace | of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$260.25 |
| _ | Deignaignal | Llano, TX 78643 | lo- | Faralousy (Co.s. In observations | | | |
| 8 | retired | pation / Job title (See Instructions) | | Employer (See Instructions retired | 5) | | |
| | Date 11/24/2024 | Full name of contributor out Bounds, Harlon Contributor address; City; State; Zip | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occur | Oak Leaf, TX 75154 pation / Job title (See Instructions) | | Employer (See Instructions | 7 | | |
| | Retired | pation 7 305 title (See instructions) | | Retired | ') | | |
| | Date 12/06/2024 | Full name of contributor out Brad, Norman Contributor address; City; State; Zip | -of-state PAC (ID#: o Code | | | Amount of Contribution (\$) | \$100.00 |
| | | Midlothian, TX 76065 | | | | | |
| | Principal occu Sheriff | pation / Job title (See Instructions) | | Employer (See Instructions Ellis County | () | | |
| | Date 12/14/2024 | Brady, Gray | | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu President | pation / Job title (See Instructions) | | Employer (See Instructions Texas Family Project | <u> </u> | | |
| | Date 12/14/2024 | Full name of contributor out Brian, Wakefield Contributor address; City; State; Zip Waxahachie, TX 75165 | o Code | | | Amount of Contribution (\$) | \$208.20 |
| | Principal occu President | pation / Job title (See Instructions) | | Employer (See Instructions B J Wakefield Services |) | | |
| | | | I | | | | |

| | MONEI | ARY POLITICAL C | ONTRIBUTION | NS | | SCHEDUL | E A1 |
|---|---|--|---|------------------------------------|-----------------------------|---|-------------|
| | The Instruc | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 4/21 Rpt: 7/35 | |
| 2 | FILER NAME | - (TI) | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | an E. (The Honorable) | _ | | | 00085786 | |
| 4 | Date 12/14/2024 | 5 Full name of contributorBryan, Johnson6 Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code |) | 7 | Amount of Contribution (\$) | \$104.10 |
| Q | Principal occur | Vadnais Heights, MN 5512 pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| 0 | tool designer | | ا | innovative tools |)) | | |
| | Date 12/05/2024 | Full name of contributor Buford, James Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code | | | Amount of Contribution (\$) | \$100.00 |
| | | Palmer, TX 75152 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Regional Maintenance Director Date Full name of contributor out-of-state PAC (ID#: | | American Landmark | | | | |
| | | |) | | Amount of Contribution (\$) | \$208.20 | |
| | | Arlington, TX 76005 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>L</u> 5) | | |
| | Rental mgmt | t | | Self | | | |
| | Date 11/21/2024 | Full name of contributor Carrasco, Marti Contributor address; City; Sta Midlothian, TX 76065 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired | <u>(</u> | | |
| | Date 12/14/2024 | Full name of contributor Caryn, Moore Contributor address; City; Sta Waxahachie, TX 75165 | out-of-state PAC (ID#: tte; Zip Code | | | Amount of Contribution (\$) | \$520.51 |
| | Principal occu retired | Pation / Job title (See Instructions) | | Employer (See Instructions retired | 5) | | |
| | | | | | | | |

| | MONET | NETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE | | | |
|---|-----------------------------|--|---|---|---|------------|--|--|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 5/21 Rpt: 8/35 | | | |
| 2 | FILER NAME Harrison, Bri | ian E. (The Honorable) | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) | | |
| 4 | Date 12/14/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$52.05 | | |
| _ | Daine in all account | San Diego, CA 92129 | O Farely (Control of the Control of | | | | | |
| 8 | Engineer | pation / Job title (See Instructions) | 9 Employer (See Instructions Qualcomm |) | | | | |
| | Date 11/20/2024 | Full name of contributor out-of-state PAC (ID#:_ Charter Schools Now PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$2,500.00 | | |
| | Principal occu | Austin, TX 78704 pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 12/14/2024 | Full name of contributor out-of-state PAC (ID#:_ Christian, Finnigan Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$100.00 | | |
| | Principal occu | Alexandria, VA 22309 pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Professor | | Patrick Henry College | | | | | |
| | Date 12/14/2024 | Full name of contributor out-of-state PAC (ID#: Christina, Cross Contributor address; City; State; Zip Code Montgomery, TX 77356 |) | | Amount of Contribution (\$) | \$52.05 | | |
| | Principal occu Librarian | pation / Job title (See Instructions) | Employer (See Instructions Mcmls |) | | | | |
| | Date 11/15/2024 | Full name of contributor out-of-state PAC (ID#:_ Coulson, Sylvia Contributor address; City; State; Zip Code Waxahachie, TX 75165 |) | | Amount of Contribution (\$) | \$100.00 | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions retired |) | | | | |
| | | | | | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDUI | LE A1 |
|---|--------------------|--|------------------------|-----|--|--------|---|------------------|
| | The Instru | ction Guide explains hov | v to complete this fo | orn | n. | 1 | Total pages Schedule A1: Sch: 6/21 Rpt: 9/35 | |
| 2 | FILER NAME | | | | | 3 | Filer ID (Ethics Commission | on Filers) |
| | Harrison, Bri | an E. (The Honorable) | | | | | 00085786 | |
| 4 | Date 12/04/2024 | 5 Full name of contributorDarwin, Deason6 Contributor address; City; S | out-of-state PAC (ID#: | |) | 7 | Amount of Contribution (\$) | \$4,000.00 |
| | | Dallas, TX 75219 | , . | | | | | |
| 8 | Principal occu | pation / Job title (See Instruction | s) | 9 | Employer (See Instructions | () | | |
| | Chairman | | | | Deason Capital Services | S | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | |
| | 12/14/2024 | Dorinda, Sims | out or state 1710 (IBM | | ······································ | | 7 undum di Gamundulan (4) | \$100.00 |
| | | Contributor address; City; S | tata: 7in Cada | | | | | +200.00 |
| | | Continuator address, City, S | tate, Zip Code | | | | | |
| | | | | | | | | |
| | | Midlothian, TX 76065 | | | | | | |
| | Principal occu | pation / Job title (See Instruction | s) | | Employer (See Instructions | :) | | |
| | retired | patient 7 000 title (000 metraction | 5) | | retired | , | | |
| | | Full pages of acceptable stars | | | | | Amount of Contribution (A) | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | Ф2 000 00 |
| | 12/04/2024 | Doug, Deason | | | | | | \$2,000.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | | |
| | | | | | | | | |
| | | Dallas, TX 75229 | | | | | | |
| | Dringing aggu | pation / Job title (See Instruction | ٥) | | Employer (See Instructions | ·/ | | |
| | Investor | pation / Job title (See Instruction | 5) | | DCS | ') | | |
| | IIIVESIOI | | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | |
| | 12/13/2024 | Dr. Reese, Tipton | | | | | | \$104.10 |
| | | Contributor address; City; S | tate; Zip Code | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | Waxahachie, TX 75167 | | | | Ļ | | |
| | | pation / Job title (See Instruction | S) | | Employer (See Instructions | 5) | | |
| | retired | | | | retired | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | |
| | 12/05/2024 | Foster, Jonathan ("JD") | | | | | | \$50.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | Ennis, TX 75119 | | | | L | | |
| | Principal occu | pation / Job title (See Instruction | s) | | Employer (See Instructions | () | | |
| | Attorney | | | | Foster Massengill, PLLC |) | | |
| | | | - | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | E A1 |
|---|---------------------------------|---|--|----------|--|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 7/21 Rpt: 10/35 | |
| 2 | FILER NAME Harrison, Bri | ian E. (The Honorable) | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 11/18/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Gardner, Ed 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$250.00 |
| 8 | Principal occu | Midlothian, TX 76065 pation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> | | |
| 0 | Owner | pation / Job title (See Instructions) | We Paint Guns | , | | |
| | Date 11/22/2024 | Full name of contributor out-of-state PAC (ID#:_ Garrett, Jon Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | Waxahachie, TX 75165 upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Owner | pation 7 sob title (See Instructions) | Apex Site Services |) | | |
| | Date 12/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Gary, Sanders Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$50.00 |
| | | Burleson, TX 76028 | | | | |
| | Principal occu retired | ipation / Job title (See Instructions) | Employer (See Instructions retired |) | | |
| | Date 11/27/2024 | Full name of contributor out-of-state PAC (ID#:_Gatlin, Beverly Contributor address; City; State; Zip Code Italy, TX 76651 |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired |) | | |
| | Date 11/15/2024 | Full name of contributor out-of-state PAC (ID#:_ Goerlich, Veronica Contributor address; City; State; Zip Code Waxahachie, TX 75165 |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Interior Desi | pation / Job title (See Instructions) gner | Employer (See Instructions Moore Design Group |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTION | S | | SCHEDUI | E A1 |
|---|------------------------------|---|------------------------------------|--|---|--|------------|
| | The Instruc | ction Guide explains how to | complete this form | 1. | 1 | Total pages Schedule A1: Sch: 8/21 Rpt: 11/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 12/06/2024 | Gonzalez, Eduardo | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$100.00 |
| 8 | Principal occu | Midlothian, TX 76065 pation / Job title (See Instructions) | l ₉ | Employer (See Instructions |) | | |
| Ü | Educator | pation / vob title (see mandellons) | | Irving ISD | , | | |
| | Date 12/06/2024 | Full name of contributor Gray, James Contributor address; City; State; | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Waxahachie, TX 75167 pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Retired | (| | Retired | , | | |
| | Date 12/04/2024 | Full name of contributor Grayson, Lane Contributor address; City; State; | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | | Ennis, TX 75119 | | | | | |
| | Principal occu Commission | pation / Job title (See Instructions) er | | Employer (See Instructions Ellis County |) | | |
| | Date 11/26/2024 | Full name of contributor Greenberg Traurig PAC Contributor address; City; State; Albany, NY 12207 | out-of-state PAC (ID#: Zip Code |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 11/26/2024 | Full name of contributor Griffin, Anne Contributor address; City; State; Red Oak, TX 75154 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$1,250.00 |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions retired |) | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDUI | E A1 |
|---|-----------------------------|--|-------------------------|-----|---|-------------|--|------------|
| | The Instruc | ction Guide explains hov | to complete this fo | orr | n. | 1 | Total pages Schedule A1: Sch: 9/21 Rpt: 12/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 11/22/2024 | 5 Full name of contributor HARRISON, Ed6 Contributor address; City; S | out-of-state PAC (ID#:_ | | | 7 | Amount of Contribution (\$) | \$1,000.00 |
| _ | Deinainal accu | Ovilla, TX 75154 | . I | _ | Frankrian (Coo Instructions | | | |
| 8 | Retired | pation / Job title (See Instructions | S) | 9 | Employer (See Instructions Retired | | | |
| | Date 12/02/2024 | Full name of contributor HOMEPAC Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$750.00 |
| | Principal occu | Austin, TX 78701 pation / Job title (See Instructions | s) | | Employer (See Instructions | ;) | | |
| | o.pa. 0000 | panerry cos ano (coo menacaon | , | | | , | | |
| | Date 11/19/2024 | Full name of contributor out-of-state PAC (ID#:) Hanson, Mark Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$250.00 | | |
| | | Arlington, TX 76012 | | | | | | |
| | Principal occu retired | pation / Job title (See Instructions | 5) | | Employer (See Instructions Retired | 5) | | |
| | Date 11/21/2024 | Full name of contributor Howard, Jay Contributor address; City; S Austin, TX 78701 | | | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu Partner | pation / Job title (See Instructions | 5) | | Employer (See Instructions HillCo Partners | 5) | | |
| | Date 12/01/2024 | Full name of contributor Hoyer, Richard Contributor address; City; S Midlothian, TX 76065 | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Retired | pation / Job title (See Instructions | s) | | Employer (See Instructions Retired | s) | | |
| | | | • | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | S | | SCHEDUI | E A1 |
|---|-----------------------------|---|---|--|---|---|------------|
| | The Instruc | ction Guide explains how | to complete this form | n. | 1 | Total pages Schedule A1: Sch: 10/21 Rpt: 13/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 12/04/2024 | 5 Full name of contributor Hunt, David6 Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | 7 | Amount of Contribution (\$) | \$1,000.00 |
| 8 | Principal occu | Lancaster, TX 75134 pation / Job title (See Instructions) | 9 | Employer (See Instructions |) | | |
| | Retired | , | | Retired | , | | |
| | Date 11/21/2024 | Full name of contributor Hunt, Douglas Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | | Amount of Contribution (\$) | \$1,000.00 |
| | | Lancaster, TX 75134 | | | | | |
| | Principal occu Developer | pation / Job title (See Instructions) | | Employer (See Instructions Access Self Storage |) | | |
| | Date 12/05/2024 | Full name of contributor Jake, Posey Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | | Amount of Contribution (\$) | \$750.00 |
| | Principal occu | Georgetown, TX 78633 pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Attorney | pation 7 300 title (See instructions) | | The Posey Law Firm, Po | | | |
| | Date 12/14/2024 | Full name of contributor John, Wood Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions retired |) | | |
| | Date 12/01/2024 | Full name of contributor Jones, Neal Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu Partner | pation / Job title (See Instructions) | | Employer (See Instructions HillCo Partners |) | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | | SCHEDUL | E A1 | | |
|---|--------------------------------|--|---------|---|----------------|---|-----------|
| | The Instruc | ction Guide explains how to complete this | s for | m. | 1 | Total pages Schedule A1: Sch: 11/21 Rpt: 14/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | n Filers) |
| 4 | Date 12/12/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$104.10 |
| 8 | Principal occur | Waxahachie, TX 75167 pation / Job title (See Instructions) | la la | Employer (See Instructions | | | |
| Ü | retired | pation / 300 title (See Instructions) | | retired | " | | |
| | Date 12/03/2024 | Full name of contributor out-of-state PAC (ID Justice, Kellye Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$250.00 |
| | | Waxahachie, TX 75165 | | | | | |
| | Principal occu Real Estate | pation / Job title (See Instructions) | | Employer (See Instructions Self employed | s) | | |
| | Date 12/14/2024 | Full name of contributor | D#: |) | • | Amount of Contribution (\$) | \$100.00 |
| | | Weatherford, TX 76086 | | | | | |
| | Principal occu Executive Di | pation / Job title (See Instructions) rector | | Employer (See Instructions Texas Family Project | s) | | |
| | Date 12/14/2024 | Full name of contributor out-of-state PAC (ID Kathy, Ponce Contributor address; City; State; Zip Code Maypearl, TX 76064 | | | • | Amount of Contribution (\$) | \$26.03 |
| | Principal occu Parks and Re | pation / Job title (See Instructions) | | Employer (See Instructions City of Mid | <u>l</u> s) | | |
| | Date 12/06/2024 | Full name of contributor out-of-state PAC (ID Langenheder, Ron and Marilyn Contributor address; City; State; Zip Code Midlothian, TX 76065 | D#: | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions retired | s) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | IS | | SCHEDUL | E A1 |
|---|-----------------------------|--|---|--|-----|---|-------------|
| | The Instruc | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 12/21 Rpt: 15/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | n Filers) |
| 4 | Date 12/06/2024 | 5 Full name of contributor Lebron, DV6 Contributor address; City; Sta | out-of-state PAC (ID#: ate; Zip Code | | 7 | Amount of Contribution (\$) | \$50.00 |
| • | Dringinal accu | Waxahachie, TX 75167 pation / Job title (See Instructions) | l a | Employer (See Instructions | ·/- | | |
| 0 | Federal office | | 9 | Federal government |) | | |
| | Date 12/14/2024 | Full name of contributor MARCUS, HENRY Contributor address; City; Sta | |) | | Amount of Contribution (\$) | \$52.05 |
| | | WAXAHACHIE, TX 75165 | | | | | |
| | Principal occu RSA | pation / Job title (See Instructions) | | Employer (See Instructions Databricks, Inc. | 5) | | |
| | Date 12/12/2024 | Full name of contributor Mack, POWERS Contributor address; City; Sta | out-of-state PAC (ID#:atte; Zip Code |) | | Amount of Contribution (\$) | \$260.25 |
| | | Dallas, TX 75248 | | | | | |
| | Principal occu Engineer | pation / Job title (See Instructions) | | Employer (See Instructions self | 5) | | |
| | Date 12/06/2024 | Full name of contributor McCool, Krystal Contributor address; City; Sta Midlothian, TX 76065 | out-of-state PAC (ID#:ate; Zip Code |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | | Employer (See Instructions Waddell Serafino PC | 5) | | |
| | Date 12/02/2024 | Full name of contributor McKay, Richard Contributor address; City; Sta | out-of-state PAC (ID#: ate; Zip Code | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Pastor | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL CONTRIBU | JTION | S | | SCHEDU | LE A1 |
|---|-------------------------------|--|-----------|---|-----------------|---|--------------|
| | The Instruc | ction Guide explains how to complete t | this forr | n. | 1 | Total pages Schedule A1: Sch: 13/21 Rpt: 16/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 11/22/2024 | Full name of contributor out-of-state PAC McNutt, Thomas Contributor address; City; State; Zip Code | , |) | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | | Corsicana, TX 75110 | | | Ĺ | | |
| 8 | Principal occu Business Ex | pation / Job title (See Instructions) ecutive | 9 | Employer (See Instructions Collin Street Bakery | s) | | |
| | Date 11/25/2024 | Full name of contributor | | | | Amount of Contribution (\$) | \$250.00 |
| | Dringing agg | Kennedale, TX 76060 | | Employer (See Instructions | <u></u> | | |
| | Loan Closer | pation / Job title (See Instructions) | | Gulf Coast Bank | ·) | | |
| | Date 11/26/2024 | Full name of contributor out-of-state PAC Nealy, Tobey and Karen Contributor address; City; State; Zip Code | C (ID#: | | | Amount of Contribution (\$) | \$250.00 |
| | Delicalization | Waxahachie, TX 75167 | | Formula van (Oa a la atmostica a | <u></u> | | |
| | Retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired | 5) | | |
| | Date 12/04/2024 | Full name of contributor out-of-state PAC North Texas automobile Dealers PAC Contributor address; City; State; Zip Code Irving, TX 75062 | , |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 12/04/2024 | Full name of contributor out-of-state PAC ONCOR Texas State PAC Contributor address; City; State; Zip Code Dallas, TX 75201 | C (ID#: |) | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | . (5) | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL C | CONTRIBUTION | IS | | SCHEDUL | E A1 |
|---|-----------------------------|---|------------------------|--|----------|---|------------|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 14/21 Rpt: 17/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 11/25/2024 | 6 Contributor address; City; Sta | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$250.00 |
| 8 | Principal occu | Midlothian, TX 76065 pation / Job title (See Instructions) | 19 | Employer (See Instructions | :\ | | |
| Ĭ | District Direc | | | Texas House of Repres | | atives | |
| | Date 12/12/2024 | Full name of contributor Paul, Mango Contributor address; City; Sta | |) | | Amount of Contribution (\$) | \$1,000.00 |
| | | Jacksonckson, WY 83001 | • | | <u> </u> | | |
| | Principal occu Executive | pation / Job title (See Instructions) | | Employer (See Instructions Jackson Hole Strategic | | visors | |
| | Date 11/21/2024 | Full name of contributor Peggy, Allen Contributor address; City; Sta | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$52.05 |
| | Principal occu | Cedar Hill, TX 75104 pation / Job title (See Instructions) | , | Employer (See Instructions | :) | | |
| | retired | panem, cos uno (coe mondonomo, | | retired | , | | |
| | Date 12/12/2024 | Full name of contributor PharmPAC Contributor address; City; Sta | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) |) | Employer (See Instructions | 5) | | |
| | Date 12/10/2024 | Full name of contributor Poinsett PLLC Contributor address; City; Sta | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDUI | E A1 |
|---|------------------------------|---|-------------------------|----|--|---------|---|------------|
| | The Instruc | ction Guide explains hov | to complete this fo | rr | n. | 1 | Total pages Schedule A1: Sch: 15/21 Rpt: 18/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 12/01/2024 | 5 Full name of contributor Pollard, Robert6 Contributor address; City; S | out-of-state PAC (ID#:_ | |) | 7 | Amount of Contribution (\$) | \$100.00 |
| 8 | Dringing coou | Waxahachie, TX 75165 | I | _ | Employer (See Instructions | <u></u> | | |
| • | Retired | pation / Job title (See Instructions | 5) | 9 | Employer (See Instructions Retired | ·) | | |
| | Date 12/14/2024 | Full name of contributor Ralph, Fite Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | Houston, TX 77057 pation / Job title (See Instructions | 5) | | Employer (See Instructions | ;) | | |
| | SVP-Finance | | , | | Welcome Group, LLC | ,, | | |
| | Date 12/13/2024 | Full name of contributor Rebecca, Johnson Contributor address; City; S | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$26.03 |
| | | Mansfield, TX 76063 | | | | | | |
| | Principal occu retired | pation / Job title (See Instructions | 5) | | Employer (See Instructions retired | s) | | |
| | Date 12/13/2024 | Full name of contributor Rebekah, Lentz Contributor address; City; S Fort Worth, TX 76107 | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Consultant | pation / Job title (See Instructions | 5) | | Employer (See Instructions Consultant | 5) | | |
| | Date 11/25/2024 | Full name of contributor Ricks, Linda Contributor address; City; S Midlothian, TX 76065 | out-of-state PAC (ID#:_ | |) | • | Amount of Contribution (\$) | \$1,250.00 |
| | Principal occu retired | pation / Job title (See Instructions | 5) | | Employer (See Instructions retired | 5) | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDUL | E A1 |
|---|--------------------------------|---|------------------------|------|--|--------|---|------------|
| | The Instruc | ction Guide explains hov | v to complete this fo | rn | n. | 1 | Total pages Schedule A1: Sch: 16/21 Rpt: 19/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 12/05/2024 | 5 Full name of contributor Rozier, Richard6 Contributor address; City; S | out-of-state PAC (ID#: | | | 7 | Amount of Contribution (\$) | \$50.00 |
| _ | Deinainal accu | Midlothian, TX 76065 | | | Francisco (Con Instructions | | | |
| 8 | Tax Assesso | pation / Job title (See Instructions or/Collector | 5) | 9 | Employer (See Instructions Ellis Couny | 5) | | |
| | Date 11/16/2024 | Full name of contributor Severson, Randolph Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | Ennis, TX 75119 pation / Job title (See Instructions | 5) | | Employer (See Instructions | s) | | |
| | Retired | | | | Retired | | | |
| | Date 12/05/2024 | Full name of contributor Shannen, Mattingly Contributor address; City; S | out-of-state PAC (ID#: | •••• | | | Amount of Contribution (\$) | \$3,000.00 |
| | | Grapevine, TX 76051 | | | | | | |
| | Principal occu Events Mana | pation / Job title (See Instructions ager | 5) | | Employer (See Instructions Patriot Mobile | s) | | |
| | Date 12/05/2024 | Full name of contributor Sipes, Ricky Contributor address; City; S Waxahachie, TX 75165 | out-of-state PAC (ID#: | |) | • | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Attorney | pation / Job title (See Instructions | 5) | | Employer (See Instructions Self | 5) | | |
| | Date 12/04/2024 | Full name of contributor Stephens, Claude Contributor address; City; S Midlothian, TX 76065 | out-of-state PAC (ID#: | |) | • | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Orthodontist | pation / Job title (See Instructions | 5) | | Employer (See Instructions Duncanville Family Orth | | ontics | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE A1 |
|---|-----------------------------|--|-------------------------------|---|---|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 17/21 Rpt: 20/35 |
| 2 | FILER NAME Harrison, Bri | ian E. (The Honorable) | | 3 | Filer ID (Ethics Commission Filers) 00085786 |
| 4 | Date 11/18/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ TBA Bank PAC State 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$1,000.00 |
| _ | | Austin, TX 78701 | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | |
| | Date 12/14/2024 | Full name of contributor out-of-state PAC (ID#:_ TOWAPAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$200.00 |
| | Principal occu | Bridge City, TX 77611 pation / Job title (See Instructions) | Employer (See Instructions |) | |
| | Date 11/22/2024 | Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) \$17,500.00 |
| | Principal occu | Austin, TX 78701 pation / Job title (See Instructions) | Employer (See Instructions) |) | |
| | Date 12/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Aggregates and Concrete Association Contributor address; City; State; Zip Code Round Rock, TX 78681 | | | Amount of Contribution (\$) \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) |) | |
| | Date 12/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans PAC Contributor address; City; State; Zip Code Austin, TX 78701 |) | | Amount of Contribution (\$) \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) |) | |
| | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | LE A1 |
|---|-----------------------------|---|------------------------------|---|---|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 18/21 Rpt: 21/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 12/13/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$500.00 |
| | | Austin, TX 78711 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 11/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Dental Association PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | Austin, TX 78704 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 12/09/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Impact a CRH PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | Austin, TX 78726 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 11/25/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Assn PAC Contributor address; City; State; Zip Code Austin, TX 78703 | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 11/19/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) | \$1,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CO | ONTRIBUTION | IS . | | SCHEDUL | E A1 |
|---|-----------------------------|---|---|---|---------|---|-------------|
| | The Instruc | ction Guide explains how t | o complete this for | n. | 1 | Total pages Schedule A1: Sch: 19/21 Rpt: 22/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 12/10/2024 | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$1,394.96 |
| _ | Deignaignal | Sherman, TX 75090 | lo. | Franks on (Cook batturations | <u></u> | | |
| 8 | Musician | pation / Job title (See Instructions) | 9 | Employer (See Instructions Self | 5) | | |
| | Date 12/14/2024 | Full name of contributor Todd, Little Contributor address; City; Stat | |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | Red Oak, TX 75154 pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | County Judg | | | County of Ellis | , | | |
| | Date 11/14/2024 | Full name of contributor Tutt, Jennifer Contributor address; City; Stat | out-of-state PAC (ID#: e; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | | Saginaw, TX 76179 | | | | | |
| | · | pation / Job title (See Instructions) cience Teacher | | Employer (See Instructions Eagle Mountain Saginar | • | ndependent School Distric | t |
| | Date 11/15/2024 | Full name of contributor TxANA PAC Contributor address; City; Stat Austin, TX 78701 | out-of-state PAC (ID#: e; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 11/21/2024 | Full name of contributor Valliant, Susan Contributor address; City; Stat Arlington, TX 76015 | out-of-state PAC (ID#: e; Zip Code |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu RN | pation / Job title (See Instructions) | | Employer (See Instructions JSP Health Network | 5) | | |
| | | | <u>, </u> | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|-----------------------------|---|---|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 20/21 Rpt: 23/35 | |
| 2 | FILER NAME Harrison, Bri | ian E. (The Honorable) | | 3 | Filer ID (Ethics Commission 00085786 | n Filers) |
| 4 | Date 12/06/2024 | 5 Full name of contributor out-of-state PAC (ID#:_Vikkie, Dillow 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | | WAXAHACHIE, TX 75167 | <u> </u> | | | |
| 8 | retired | pation / Job title (See Instructions) | 9 Employer (See Instructions retired |) | | |
| | Date 11/14/2024 | Full name of contributor out-of-state PAC (ID#:_Vines, Cheryl Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | Ovilla, TX 75154 spation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Retired | , , | Retired | | | |
| | Date 12/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Wallace, Billie Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$250.00 |
| | | Waxahachie, TX 75168 | | | | |
| | Principal occu Mayor | pation / Job title (See Instructions) | Employer (See Instructions City of Waxahachie |) | | |
| | Date 11/14/2024 | Full name of contributor out-of-state PAC (ID#:_ Ward, Kevin Contributor address; City; State; Zip Code Midlothian, TX 76065 | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions self |) | | |
| | Date 11/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Westerfeld, Andrea Contributor address; City; State; Zip Code Midlothian, TX 76065 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Ellis County |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | ION | IS | | SCHEDUI | E A1 |
|---|-----------------------------|---|-------|---|--------|---|------------|
| | The Instru | ction Guide explains how to complete this | s for | m. | 1 | Total pages Schedule A1: Sch: 21/21 Rpt: 24/35 | |
| 2 | FILER NAME Harrison, Bri | an E. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00085786 | on Filers) |
| 4 | Date 11/29/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Streetman, TX 75859 | | | Ĺ | | |
| 8 | Principal occu retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions retired | 5) | | |
| | Date 11/01/2024 | Full name of contributor out-of-state PAC (ID William, Carson Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$25.00 |
| | Drincinal occu | Streetman, TX 75859 pation / Job title (See Instructions) | _ | Employer (See Instructions | -, | | |
| | retired | pation / Job title (See Instituctions) | | retired | ·) | | |
| | Date 12/10/2024 | Full name of contributor out-of-state PAC (ID Wine and Spirits Wholesalers of Texas PC Contributor address; City; State; Zip Code | D#: |) | | Amount of Contribution (\$) | \$2,500.00 |
| | | Austin, TX 78701 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 12/02/2024 | Full name of contributor out-of-state PAC (ID Woolsey, Chris Contributor address; City; State; Zip Code Corsicana, TX 75110 | |) | • | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Executive | pation / Job title (See Instructions) | | Employer (See Instructions Casita Travel Trailers | 5) | | |
| | Date 12/06/2024 | Full name of contributor out-of-state PAC (ID Zarate, Jennifer Contributor address; City; State; Zip Code Maypearl, TX 76064 | |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions retired | 5) | | |
| | | | • | | | | |

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 (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|--|
| 1 | Total pages Schedule F1: | |
| | Sch: 1/11 Rpt: 25/35 | Harrison, Brian E. (The Honorable) 00085786 |
| 4 | Date | 5 Payee name |
| | 12/05/2024 | American Airlines |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$24.00 | 1 Skyview Drive |
| | | |
| | | Fort Worth, TX 76155 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense |
| | EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | | WiFi |
| _ | Opening the ONLY if allowed | One distance (Office health as a second seco |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 12/04/2024 | American Airlines |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$15.00 | 1 Skyview Drive |
| | | |
| | | Fort Worth, TX 76155 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel Out of District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense WiFi |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 12/31/2024 | Payee name Brown, Carson |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$75.00 | 827 West 12th St |
| | Ψ13.00 | Apt #409 |
| | | |
| | | Austin, TX 78701 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Work |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | | |
| | | |
| | | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|--|
| 1 | Total pages Schedule F1: Sch: 2/11 Rpt: 26/35 | 2 FILER NAME Harrison, Brian E. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00085786 |
| 4 | Date | 5 Payee name |
| | 12/30/2024 | CONSTANT CONTACT |
| 6 | Amount (\$) \$173.76 | 7 Payee address; City; State; Zip Code 1601 Trapelo Road |
| | | Waltham, MA 02451 |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Emailing |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 12/02/2024 | CONSTANT CONTACT |
| | Amount (\$) \$173.76 | Payee address; City; State; Zip Code 1601 Trapelo Road |
| | | Waltham, MA 02451 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Emailing |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date 11/15/2024 | Payee name CONSTANT CONTACT |
| | Amount (\$) \$173.76 | Payee address; City; State; Zip Code 1601 Trapelo Road |
| | | Waltham, MA 02451 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Emailing |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | | |

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

| | Credit Card Payment | The Instruction Guide explains how to comple | ete this form. |
|----------|---|---|--|
| 1 | . • | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 3/11 Rpt: 27/35 | Harrison, Brian E. (The Honorable) | 00085786 |
| 4 | Date | 5 Payee name | |
| Ļ | 12/03/2024 | Capitol Caf | |
| 6 | Amount (\$) \$2.23 | 7 Payee address; City; State; Zip Code 1001 Congress Ave | |
| | | #180 Austin, TX 78701 | |
| 8 | PURPOSE | | Description |
| ľ | OF | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | | Check if Austin, TX, officeholder living expense |
| | | | Coffee Meeting |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| ľ | expenditure to benefit C/OI | | Since Held |
| H | Date | Payee name | |
| | 12/23/2024 | Chick-fil-a | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$24.23 | 114 N 31st St | |
| | | | |
| | | Temple, TX 76504 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description |
| | OF EXPENDITURE | Food/Beverage Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | Staff meal |
| | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/OI | 1 | |
| | Date | Payee name | |
| | 10/29/2024 | Chicken Express | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$31.36 | 1161 George Hopper Rd | |
| | | Midlethian TV 76065 | |
| | PURPOSE | Midlothian, TX 76065 | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Food/Beverage Expense | Check if Austin, TX, officeholder living expense |
| | | | Staff meal |
| | Complete ONLY if direct | Candidate/Officeholder name Office cought | Office held |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | Office neid |
| \vdash | | | |
| | | | |
| l | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Candidate/Officeholder/Politica | | | ∍iit/Awards/Memoriai ∟egal Services | s Expense | Salaries/W | | e /Contract Labor | | OTHER (enter | a category not listed | above) |
|---|---|----------|-----------------------|--|---------------------|------------|--------------|------------------------------|----------|--------------------|-----------------------|---------------|
| | Credit Card Payment | | | The Instruction G | Guide explains | how to co | mple | ete this form. | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commi | ssion Filers) |
| | Sch: 4/11 Rpt: 28/35 | | Harrison, Bri | an E. (The Ho | norable) | | | | | 00085786 | | |
| 4 | Date | 5 | Payee name | | | | | | <u> </u> | | | |
| | 12/30/2024 | | Costco | | | | | | | | | |
| - | | 7 | | City: | Ctata | ; Zip Co | do | | | | | |
| 6 | Amount (\$) \$126.73 | ' | Payee addres | s; City; | Sidle | , Zip Co | ue | | | | | |
| | Φ120.73 | | 250 Hwy 67 | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Duncanville, | TX 75137 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | e Categories listed at | the top of this sch | iedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Food/Bevera | ige Expense | | | | 브 | | | mplete Schedule T. | |
| | - | | | | | | | Staff dinner | , TX, | officeholder livin | ig expense | |
| | | | | | | | | Stall ullilei | | | | |
| _ | Operation ONLY if direct | <u> </u> | 2 11 - 1 - 1 - 1 Offi | -11-1 | | D#: | 14 | | | O#: I- | -1-1 | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Offic | enolder name | (| Office sou | gnt | | | Office h | ieia | |
| | | _ | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 11/18/2024 | | Doubletree H | Hotel | | | | | | | | |
| | Amount (\$) | | Payee addres | s; City; | State | ; Zip Co | de | | | | | |
| | \$207.31 | | 303 W 15th | ST | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 7 | 8701 | | | | | | | | |
| | PURPOSE | (a) | Category (6- | e Categories listed at | 41 | | (b) | Description | | | | |
| | OF | " | Travel Out o | | the top of this sch | ledule) | (-, | _ · | outsi | de of Texas. Cor | nplete Schedule T. | |
| | EXPENDITURE | | mavor out o | Diotriot | | | | Check if Austin | , TX, | officeholder livin | ng expense | |
| | | | | | | | | Travel Hotel | | | | |
| | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offic | eholder name | (| Office sou | ght | | | Office h | neld | |
| | expenditure to benefit C/OI | Н | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 12/11/2024 | | El Mexicano | Grill | | | | | | | | |
| | Amount (\$) | | Payee addres | s; City; | State | ; Zip Co | de | | | | | |
| | \$47.00 | | 114 E Frank | lin St | | · | | | | | | |
| | | | | | | | | | | | | |
| | | | Waxahachie | TX 75165 | | | | | | | | |
| | DUDDOCE | (-) | | | | | (b .) | 5 | | | | |
| | PURPOSE OF | (a) | | e Categories listed at | the top of this sch | iedule) | (D) | Description Check if travel | nutsi | de of Texas Cor | nplete Schedule T. | |
| | EXPENDITURE | | Food/Bevera | ige ⊑xperise | | | | <u></u> | | officeholder livin | | |
| | | | | | | | | Staff meal | | | | |
| | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offic | eholder name | (| Office sou | ght | | | Office h | neld | |
| | expenditure to benefit C/OH | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | 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: 5/11 Rpt: 29/35 | Harrison, Brian E. (The Honorable) 00085786 |
| 4 | Date | 5 Payee name |
| | 12/31/2024 | Frost Bank |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$5.00 | 1000 N Walnut Creek Dr |
| | | |
| | | Mansfield, TX 76063 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Bank Fee |
| | | Bankitee |
| 9 | Complete ONL V if direct | Candidate/Officeholder name Office sought Office held |
| 9 | Complete ONLY if direct expenditure to benefit C/O | |
| | | |
| | Date | Payee name |
| | 11/29/2024 | Frost Bank |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5.00 | 1000 N Walnut Creek Dr |
| | | |
| | | Mansfield, TX 76063 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Bank Fee |
| | | Danki ee |
| _ | Compulate ONLY if direct | Condidate/Officeholder name Office sought Office hold |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | • | |
| | Date | Payee name |
| | 10/31/2024 | Frost Bank |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5.00 | 1000 N Walnut Creek Dr |
| | | |
| | | Mansfield, TX 76063 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Bank Fee |
| | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held |
| | experience to beliefit 6/01 | • |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prin Committee Legal Services Sal | n Repayment/Reimbursement ce Overhead/Rental Expense ing Expense iting Expense aries/Wages/Contract Labor | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) |
|---|--|--|---|----------|---|
| | | The Instruction Guide explains how | to complete this form. | _ | |
| 1 | Total pages Schedule F1: Sch: 6/11 Rpt: 30/35 | 2 FILER NAME Harrison, Brian E. (The Honorable) | | 3 | Filer ID (Ethics Commission Filers) 00085786 |
| 4 | Date | 5 Dayloo nama | | <u> </u> | |
| 4 | 12/27/2024 | 5 Payee name GOOGLEOne | | | |
| 6 | Amount (\$) \$3.19 | 7 Payee address; City; State; Zi 600 Amphitheatre Parkway Mountain View, CA 94043 | o Code | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense | Check if trave | n, TX | side of Texas. Complete Schedule T. K, officeholder living expense |
| 9 | Complete ONLY if direct expenditure to benefit C/Oh | | e sought | | Office held |
| | Date | Payee name | | | |
| | 11/07/2024 | GOOGLEOne | | | |
| | Amount (\$) | Payee address; City; State; Zi | o Code | | |
| | \$3.19 | 600 Amphitheatre Parkway | | | |
| | | Mountain View, CA 94043 | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense | Check if trave | n, TX | side of Texas. Complete Schedule T. K, officeholder living expense |
| | Complete ONLY if direct expenditure to benefit C/O | | e sought | | Office held |
| | Date | Payee name | | | |
| | 11/07/2024 | GOOGLEOne | | | |
| | Amount (\$) \$2.12 | Payee address; City; State; Zi 600 Amphitheatre Parkway | o Code | | |
| | | Mountain View, CA 94043 | | | |
| _ | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense | Check if trave | n, TX | side of Texas. Complete Schedule T. K, officeholder living expense |
| | Complete ONLY if direct expenditure to benefit C/OF | | e sought | | Office held |
| | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | 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: 7/11 Rpt: 31/35 | Harrison, Brian E. (The Honorable) |
| 4 | Date | 5 Payee name |
| | 12/30/2024 | Hoyer, Catherine |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$1,326.17 | 420 W. Franklin St. |
| | | Apt 11 |
| | | Waxachie, TX 76065 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Reimbursements and work |
| | | Reinbursements and work |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 12/30/2024 | Hoyer, Catherine |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$250.00 | 420 W. Franklin St. |
| | | |
| | | Waxahachie, TX 75165 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | - | Check if Austin, TX, officeholder living expense Work |
| | | WOIK |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 12/06/2024 | LSF National Airport |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$28.30 | 2401 Smith Blvd |
| | Ψ20.00 | 2401 Onitin Biva |
| | | Arlington, VA 22202 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Travel meal |
| | | Traver meai |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

| The Instruction Guide explains how to complete this form. | | | | |
|--|---|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | | |
| Sch: 8/11 Rpt: 32/35 | Harrison, Brian E. (The Honorable) | 00085786 | | |
| 4 Date | 5 Payee name | | | |
| 12/31/2024 | Osborn, Maurice | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Co | de | | |
| \$75.00 | 210 Panther Peak Dr | | | |
| | | | | |
| | Midlothian, TX 76065 | | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| OF EXPENDITURE | Salaries/Wages/Contract Labor | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| | | Work | | |
| | | ···on | | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sou | ght Office held | | |
| expenditure to benefit C/O | | 5 | | |
| Date | Payee name | | | |
| 12/03/2024 | Raising Cane's | | | |
| Amount (\$) | Payee address; City; State; Zip Co | nde | | |
| \$18.81 | 801 J H Kultgen Expy | | | |
| +- | 0010ago 2,p) | | | |
| | Waco, TX 76706 | | | |
| PURPOSE | | (b) Description | | |
| OF | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description Check if travel outside of Texas. Complete Schedule T. | | |
| EXPENDITURE | Food/Beverage Expense | Check if Austin, TX, officeholder living expense | | |
| | | Staff Meal | | |
| | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sou | ght Office held | | |
| expenditure to benefit C/O | н | | | |
| Date | Payee name | | | |
| 11/19/2024 | Southwest Airlines | | | |
| Amount (\$) | Payee address; City; State; Zip Co | de | | |
| \$8.00 | 2702 Love Field Dr | | | |
| | | | | |
| | Dallas, TX 75235 | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| OF EXPENDITURE | Office Overhead/Rental Expense | Check if travel outside of Texas. Complete Schedule T. | | |
| EXI ENDITORE | | Check if Austin, TX, officeholder living expense | | |
| | | WiFi | | |
| Complete ONLY if direct | Condidate/Officeholder name Office act | oht Office held | | |
| Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | | | |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 9/11 Rpt: 33/35 | Harrison, Brian E. (The Honorable) 00085786 |
| 4 | Date | 5 Payee name |
| | 12/31/2024 | Stripe |
| 6 | Amount (\$) \$458.60 | 7 Payee address; City; State; Zip Code 354 Oyster Point Boulevard |
| | | South San Francisco, CA 94080 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fees |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 12/31/2024 | TicketTailor |
| | Amount (\$) \$42.00 | Payee address; City; State; Zip Code 203-213 Mare Street |
| | | London E8 3LY United Kingdom |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 12/24/2024 | Timothy Georgeff |
| | Amount (\$) \$1,500.00 | Payee address; City; State; Zip Code 587 White Mound Rd |
| | | Sherman, TX 75090 |
| | 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 Fundraiser performance |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officenoider/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 10/11 Rpt: 34/35 | Harrison, Brian E. (The Honorable) 00085786 |
| 4 | Date | 5 Payee name |
| | 12/03/2024 | Two Amigos Taqueria |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$49.48 | 241 Monroe St |
| | | |
| | | Waxahachie, TX 75165 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Staff meal |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | H The state of the |
| | Date | Payee name |
| | 12/05/2024 | UBER |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$16.91 | 1515 3rd St |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Transportation |
| | | The soportunes. |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Date | Payee name |
| | 11/12/2024 | UPS Store |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$18.86 | 791 N Hwy 77 |
| | 410.00 | Ste 501-C |
| | | Waxahachie, TX 75165 |
| | PURPOSE | |
| | OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Mail Mail |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | л |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | 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: 11/11 Rpt: 35/35 | Harrison, Brian E. (The Honorable) 00085786 |
| 4 | Date | 5 Payee name |
| | 11/20/2024 | Whataburger |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$24.01 | 2741 N Stemmons Fwy |
| | | |
| | | Dallas, TX 75207 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Staff meal |
| | | Star medi |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| _ | | |
| | Date | Payee name |
| | 12/31/2024 | Winred |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$544.57 | 1340 Poydras Street |
| | | Suite 1770 |
| | | New Orleans, LA 70112 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Fees |
| | Opening ONE V if direct | On all data (Office helder marrie |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
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