FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 109 00058241 3 COMMITTEE NAME **OFFICE USE ONLY** Friends of Brandon Creighton Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2257 N. Loop 336, Ste. 140-366 Date Hand-delivered or Date Postmarked Conroe, TX 77304 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Dr. Johnny J. NAME NICKNAME LAST **SUFFIX** Peet STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 17350 St. Luke's Way STREET **ADDRESS** Suite 390 (Residence or Business) The Woodlands, TX 77384 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2257 N. Loop 336, Ste. 140-366 MAILING **ADDRESS** Conroe, TX 77304 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (936) 499-9390 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Year Month Day COVERED **THROUGH** 06/30/2025 01/01/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** χ Primary Month Day Year Other Runoff 03/03/2026 General Special

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Friends of Brandon Cre	ighton		00058241	
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME		
PURPOSE		Sen. Brandon Creighton		
(Attach lists on plain paper to complete this	X Candidate			
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELD	(officeholder)	
	_	State Senator		
X SUPPORT		BALLOT IDENTIFICATION / #	FLECTI	ION DATE
(Candidate or Measure)		BALLOT IDENTIFICATION / #	Month	Day Year
OPPOSE			Worth	Day Tour
(Candidate or Measure)				
ASSIST	Measure	DESCRIPTION		
(Officeholder)				
				<u> </u>
15 CONTRIBUTION TOTALS		NTRIBUTIONS OF \$50 OR LESS (OTHER THAN EES OF LOANS, OR CONTRIBUTIONS MADE	PLEDGES,	\$ \$0.00
	ELECTRONICALLY), UI			\$0.00
	2. TOTAL POLITICAL (CONTRIBUTIONS		
	(OTHER THAN PLEDG	ES, LOANS, OR GUARANTEES OF LOANS)		\$ \$93,851.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED P	OLITICAL EXPENDITURES		\$ \$18.123.43
				\$ \$18,123.43
	4. TOTAL POLITICAL E	EXPENDITURES		
				\$ \$206,086.58
CONTRIBUTION BALANCE	5. TOTAL POLITICAL COI	NTRIBUTIONS MAINTAINED AS OF THE LAST I	DAY OF THE	\$ \$2,331,409.75
				Ψ2,331,409.73
OUTSTANDING	6. TOTAL PRINCIPAL AM	OUNT OF ALL OUTSTANDING LOANS AS OF T	HE LAST	
LOAN TOTALS	DAY OF THE REPORTI			\$ \$0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of perju and correct and includes all information		
		Title 15, Election Code.	required to be	roported by me under
		Dr. Johns	ny 1 Doot	
		Signature of Can	ny J. Peet maign Treasur	er
AFFIX NOTARY	STAMP / SEAL ABOVE	oigitalai o or oali	.pa.g.r r raacar	o .
Sworn to and subscribed	before me, by the said	, th	is the	day
		ch, witness my hand and seal of office.		
Signature of officer ad	ministering oath Pri	nted name of officer administering oath	Title of office	er administering oath
- 5				g

SUBTOTALS - SPAC

FORM SPAC **COVER SHEET PG 3**

				3 of 109
17 COMMIT	ΓΕΕ NAME	18 Filer ID	(Ethics Commiss	sion Filers)
Friends	of Brandon Creighton	00058241		
19 SCHEDU NAME O	SUBTOTAL	. AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	93,851.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	35,000.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
7.	SCHEDULE E: LOANS		\$	
8. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	206,086.58
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	otal pages Schedule A1: Sch: 1/6 Rpt: 4/109	
2	FILER NAME				1	Filer ID (Ethics Commission	on Filers)
	Friends of Br	randon Creighton			(00058241	
4	4 Date 06/30/2025 5 Full name of contributor out-of-state PAC (ID#:) 7 Alvis, Steven 6 Contributor address; City; State; Zip Code		7 /	Amount of Contribution (\$)	\$10,000.00		
8	Principal occu	Houston, TX 77040 pation / Job title (See Instructions	s) [0	9 Employer (See Instructions	<u> </u>		
Ü	Co-Founder		''	Newquest	3)		
	Date 06/25/2025	Full name of contributor Brooks, Jeri Contributor address; City; St Houston, TX 77098	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u>I </u>		
	CEO			One World Strategy Gro	oup		
Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Buckalew, Don Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00			
		Conroe, TX 77305					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	s)		
	Auto Dealer			Buckalew Chevrolet			
Date Full name of contributor out-of-state PAC (ID#:) DeZevallos, Shelly Contributor address; City; State; Zip Code Houston, TX 77094			Amount of Contribution (\$)	\$500.00			
	Principal occu President	pation / Job title (See Instructions	5)	Employer (See Instructions West Houston Airport	s)		
	Date 06/30/2025	Full name of contributor EHRA Engineering PAC Contributor address; City; St Houston, TX 77042	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONEI	ARY POLITICAL CONTRIBUT	ION	15		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete thi	is for	m.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/109	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Friends of Bi	andon Creighton				00058241	
4	Date 5 Full name of contributor		7	Amount of Contribution (\$)	\$3,000.00		
8	Principal occu	Houston, TX 77068 pation / Job title (See Instructions)	la la	Employer (See Instructions	<u> </u>		
0	Dealer	Salion 7 30b title (See Instructions)	"	Community Autogroup	,		
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Gandy , Austin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
		Channelview, TX 77530					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Shoreline contractors)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/25/2025 Garver, C.M. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00		
		Houston, TX 77098					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Principal			Garver Real Estate			
Date Full name of contributor out-of-state PAC (ID#:) 06/24/2025 HOME-PAC Greater Houston Builders Assoc. Contributor address; City; State; Zip Code Houston, TX 77064			Amount of Contribution (\$)	\$1,000.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (I Hardman, Harry Contributor address; City; State; Zip Code Conroe, TX 77304	D #:)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/109	
2	FILER NAME Friends of B	randon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 06/24/2025			7	Amount of Contribution (\$)	\$3,000.00	
0	Dringing oggu	Houston, TX 77041	17	• Employer (Coo Instructions	<u></u>		
0	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	·)		
	Date 06/24/2025	Full name of contributor Houston Police Officers Ur Contributor address; City; Sta)	•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77007 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
		,			,		
	Date Full name of contributor out-of-state PAC (ID#:) 06/24/2025 Mach, Steven Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00		
		Houston, TX 77219					
	Principal occu VP, Finance	pation / Job title (See Instructions)		Employer (See Instructions Mach Industrial Group,			
	Date 06/24/2025	Full name of contributor Mach, Steven Contributor address; City; Sta Houston, TX 77219)		Amount of Contribution (\$)	\$1,000.00
	Principal occu VP, Finance	pation / Job title (See Instructions)		Employer (See Instructions Mach Industrial Group,			
Date Full name of contributor out-of-state PAC (ID#:) 06/23/2025 Nau III, John Contributor address; City; State; Zip Code Houston, TX 77219		•	Amount of Contribution (\$)	\$2,500.00			
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Silver Eagle Distubution			
			<u> </u>				

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/109	
2	FILER NAME				3	Filer ID (Ethics Commissi	on Filers)
	Friends of B	andon Creighton				00058241	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 06/23/2025 Prillaman , Matt 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1.00		
		Arlington, VA 22204					
8	Principal occu Retired	pation / Job title (See Instructions	5)	9 Employer (See Instructions Retired	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/24/2025	Schwartz Page & Harding	 J L.L.P.				\$1,000.00
		Contributor address; City; S	tate; Zip Code		-		
		Houston, TX 77056					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/28/2025 Spigener, James				\$500.00		
		Contributor address; City; S Willis, TX 77318	tate; Zip Code				
	Princinal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	:) 		
	Chief Client		,	Dekra	رد		
				,	_	Amount of Contribution (f)	
	Date 06/30/2025	Full name of contributor Taedter, Lisa	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	00/30/2023	Contributor address; City; S	tate; Zip Code		•		Ψ100.00
		Montgomery , TX 77356					
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	s) 		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/27/2025	Texans United For A Con	servative Majority				\$10,000.00
		Contributor address; City; S	tate; Zip Code				
		Victoria , TX 77901	· · · · · · · · · · · · · · · · · · ·		<u>L</u>		
	Principal occu	pation / Job title (See Instructions	s) 	Employer (See Instructions	S)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/109	
2	FILER NAME Friends of B	andon Creighton		3	Filer ID (Ethics Commission Filers) 00058241	
4	Date 06/30/2025 5 Full name of contributor out-of-state PAC (ID#:) Texans for Lawsuit Reform PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$10,000.00		
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Texans for Truth & Liberty PAC Contributor address; City; State; Zip Code Austin , TX 78701)		Amount of Contribution (\$) \$20,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Texienne Physicians Medical Asso. PLLC Contributor address; City; State; Zip Code Spring, TX 77380			Amount of Contribution (\$) \$10,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_ Troutman Pepper Locke LLP Contributor address; City; State; Zip Code Atlanta , GA 30308)	•	Amount of Contribution (\$) \$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>1</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Wallace, Bonnie Contributor address; City; State; Zip Code Llano, TX 78643			Amount of Contribution (\$) \$500.00		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	<u>.</u> S)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/109	
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 06/23/2025			Amount of Contribution (\$)	\$5,000.00	
_	Dringing Lagge	Houston, TX 77027	O Employer (See Instructions			
8	Founder	pation / Job title (See Instructions)	Employer (See Instructions Weekley Properties)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Wessel, Wes Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
	Principal occu	Willis, TX 77318 spation / Job title (See Instructions)	Employer (See Instructions			
	Sales	pation 7 oob title (occ instructions)	Self			
	Date Full name of contributor out-of-state PAC (ID#:) 06/28/2025 Whitney, Matthew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
		Conroe, TX 77304				
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Wilson, Welcome Contributor address; City; State; Zip Code Houston, TX 77057			Amount of Contribution (\$)	\$500.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Wilson Company)		

PLEDO	GED CONTRIBUT	TIONS			SCHEDULE B		
The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/1 Rpt: 10/109			
2 FILER NAM	E Brandon Creighton			3 Filer ID (Eth 00058241	ics Commission Filers)		
4	F UNITEMIZED PLEDG	ES		\$	0.00		
5 Date	6 Full name of pledgor Gonzalez, Edward	out-of-state PAC (ID#:_)	8 Amount of pledge (\$)	9 In-kind description (If applicable)		
06/25/2025	7 Pledgor Address;	City; State; Zip Code		\$10,000.00			
	The Woodlands , TX 7	7382		Check if travel outs	i ide of Texas. Complete Schedule T.		
10 Principal oc President	cupation / Job title (See Instruc	ctions)	11 Employer (See Instru Gonzalez & Asso				
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:_)	8 Amount of	9 In-kind description		
	Stanislaus, Jim			pledge (\$)	(If applicable)		
06/30/2025	7 Pledgor Address;	City; State; Zip Code		\$25,000.00	 		
	Austin, TX 78701			Check if travel outs	I I ide of Texas. Complete Schedule T.		
10 Principal oc Founder	cupation / Job title (See Instruc	tions)	11 Employer (See Instru Petros PACE Fina				

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

	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: 1/99 Rpt: 11/109	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/05/2025	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$129.90	2952 IH 45 N
		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Campaign phone bill.
		Campaign priorie bill.
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	02/05/2025	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$313.50	2952 IH 45 N
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign phone bill.
		Campaign priorie siii.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	D .	
	Date	Payee name
	05/15/2025	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$343.83	2952 IH 45 N
		Conroe, TX 77304
	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
		Campaign phone bill.
	0 1. 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	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: 2/99 Rpt: 12/109	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/15/2025	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$343.83	2952 IH 45 N
		Conroe, TX 77304
8	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.
		Check if Austin, TX, officeholder living expense Campaign phone bill.
		Campaign priorie bill.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	5 .	
	Date	Payee name
	03/17/2025	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$420.89	2952 IH 45 N
		Conroe, TX 77304
	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.
		Check if Austin, TX, officeholder living expense Campaign phone bill.
		Campaigh phone bill.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date	Payee name
	02/18/2025	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$226.28	2952 IH 45 N
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign phone bill.
		Campaign prione bill.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Com Credit Card Payment	mittee Legal Services Salaries A The Instruction Guide explains how to co	Vages/Contract Labor	OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2 F	FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 3/99 Rpt: 13/109	Friends of Brandon Creighton		00058241
4 Date 5	Payee name		
01/15/2025	AT&T		
\$226.27	Payee address; City; State; Zip Co 2952 IH 45 N Conroe, TX 77304	ode	
8 PURPOSE (a) (Category (See Categories listed at the top of this schedule)	(b) Description	
1 AE I	Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense none bill.
Complete ONLY if direct Caexpenditure to benefit C/OH	andidate/Officeholder name Office sou	ght	Office held
Date	Payee name		
06/16/2025	AT&T		
\	Payee address; City; State; Zip Co 2952 IH 45 N	ode	
(Conroe, TX 77304		
I OE I	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	l <u>–</u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense none bill.
Complete ONLY if direct Carespenditure to benefit C/OH	randidate/Officeholder name Office sou	ght	Office held
Date	Payee name		
03/03/2025	Alc Steaks		
l ''	Payee address; City; State; Zip Co 1205 Lamar Blvd	ode	
,	Austin, TX 78703		
I 0F I	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austin	outside of Texas. Complete Schedule T. a, TX, officeholder living expense scuss officeholder/ campaign issues.
Complete <u>ONLY</u> if direct Ca expenditure to benefit C/OH	andidate/Officeholder name Office sou	ght	Office held

SCHEDULE F1

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

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

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: 4/99 Rpt: 14/109	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/14/2025	Alc Steaks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$152.86	1205 Lamar Blvd
		Austin, TX 78703
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
		Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiditure to beliefit C/OI	
	Date	Payee name
	02/07/2025	Alonti Catering Kitchen
	Amount (\$)	Payee address; City; State; Zip Code
	\$353.02	12001 Burnet Rd suite c
		Austin , TX 78758
	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
		Meeting to discuss campaign/officeholder issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	01/21/2025	Amazon
-	Amount (\$)	Payee address; City; State; Zip Code
	\$1,245.40	434 Terry Avenue North
	Ψ1,243.40	454 Telly Aveilue Notui
		Seattle, WA 98109
	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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	Commisto ONUVIII	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OH	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 Co

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

Candidate/Officenoider/Political Committee Legal Services Salaries/wages/Contract Labor OTHER (enter a category not listed above) 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: 5/99 Rpt: 15/109	Friends of Brandon Creighton 00058241		
4	Date	5 Payee name		
	01/27/2025	Amazon		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$313.20	434 Terry Avenue North		
		Seattle, WA 98109		
8	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. Check if Austin, TX, officeholder living expense		
		Supplies for Austin office.		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
	Date	Payee name		
	01/03/2025	Amazon		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$550.91	434 Terry Avenue North		
		Seattle, WA 98109		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		
	EXI ENDITORE	Check if Austin, TX, officeholder living expense		
		Supplies for Austin office.		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·		
	Date	Payee name		
	01/13/2025	Amazon		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$259.21	434 Terry Avenue North		
	¥			
		Seattle, WA 98109		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Supplies for Austin office.		
	0 1. 0			
	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 Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	T		-11>
1	Total pages Schedule F1: Sch: 6/99 Rpt: 16/109	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission F 00058241	·ilers)
4	Date	5 Payee name	
	02/13/2025	Amazon	
6	Amount (\$) \$89.50	7 Payee address; City; State; Zip Code 434 Terry Avenue North Seattle, WA 98109	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ľ	OF	Office Overhead/Rental Expense Office Overhead/Rental Expense Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense Supplies for Austin office.	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/26/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$121.75	434 Terry Avenue North	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/04/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.86	434 Terry Avenue North	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Supplies for Austin office.	
		Supplies for Austri Office.	
_	Complete ONLY if direct	Condidate/Officeholder name Office policible	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
	,		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	-		->
1	Total pages Schedule F1:		S)
	Sch: 7/99 Rpt: 17/109	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	03/12/2025	Amazon	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$102.22	434 Terry Avenue North	
		Seattle, WA 98109	
-	DUDDOSE		
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description Category (see Categories listed at the top of this schedule)	
	EXPENDITURE	Office Overhead/Rental Expense	
		Supplies for Austin office.	
		The state of the s	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
_	<u></u>	<u> </u>	
	Date	Payee name	
	03/26/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$48.71	434 Terry Avenue North	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	/n	
	Date	Payee name	
	04/21/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$54.54	434 Terry Avenue North	
		Seattle, WA 98109	
	DUDDOG		
	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	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
		The state of the s	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

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

	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: 8/99 Rpt: 18/109	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/28/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$430.77	434 Terry Avenue North
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Supplies for Austin office.
		Supplies for Austri office.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Dougo nama
	05/05/2025	Payee name
		Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$66.61	434 Terry Avenue North
		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for Austin office.
		Supplies for Austri office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
-	Date	Payee name
	05/19/2025	Payee name Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.77	434 Terry Avenue North
		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
		Supplies for Austra Since.
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Political			Gift/Awards/Memorials Expense mmittee Legal Services	Printing Ex Salaries/W		e Travel Out of District //Contract Labor OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explains h	how to co	mple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 9/99 Rpt: 19/109		Friends of Brandon Creighton			00058241
4	Date	5	Payee name			
	05/23/2025		Amazon			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de	
	\$86.13		434 Terry Avenue North			
			Seattle, WA 98109			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
						Supplies for Austin office.
9	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	ght	Office held
	expenditure to benefit C/OI	H				
	Date		Payee name			
	02/05/2025		Amazon			
	Amount (\$)		Payee address; City; State;	Zip Co	de	
	\$451.97		434 Terry Avenue North			
			Seattle, WA 98109			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description Description
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
						Supplies for Austin office.
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght	Office held
	expenditure to benefit C/Oi					
	Date		Payee name			
	04/02/2025		Amazon			
	Amount (\$)		• • • • • • • • • • • • • • • • • • • •	Zip Co	de	
	\$91.65		434 Terry Avenue North			
			Seattle, WA 98109			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense
						Supplies for Austin office.
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	ght	Office held
	expenditure to benefit C/OI	П				

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

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)	
Sch: 10/99 Rpt:	Friends of Brandon Creighton		00058241		
4 Date	5 Payee name		•		
04/16/2025	Amazon				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$81.38	434 Terry Avenue North				
	Seattle, WA 98109				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Office Overhead/Rental Expense		outside of Texas. Com	plete Schedule T.	
EXPENDITURE	·	. —	n, TX, officeholder living	g expense	
		Supplies for	Austin office.		
		<u> </u>			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office he	eld	
'					
Date	Payee name				
01/06/2025	Amazon				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$810.79	434 Terry Avenue North				
	Seattle, WA 98109				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Office Overhead/Rental Expense	. 	outside of Texas. Com		
			n, TX, officeholder living Austin office.) expense	
		Capplies for	rasuri omoc.		
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıaht	Office he	eld	
expenditure to benefit C/O		9			
Date	Payee name				
05/26/2025	Amazon				
Amount (\$)	Payee address; City; State; Zip Co	nde			
\$209.47	434 Terry Avenue North	oue			
Ψ200.41	404 Telly Avellae Ivolat				
	Seattle, WA 98109				
DUDDOOF		(a) =			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	outside of Texas. Com	nlete Schedule T	
EXPENDITURE	Office Overhead/Rental Expense	. ∟	n, TX, officeholder living	•	
		Supplies for	Austin office.		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight	Office he	eld	
expenditure to benefit C/O	Н				

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

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.	.,,
1 Total pages Schedule F1:		<u> </u>	nics Commission Filers)
Sch: 11/99 Rpt:	Friends of Brandon Creighton	00058241	
4 Date 06/02/2025	5 Payee name Amazon		
6 Amount (\$) \$72.53	7 Payee address; City; State; Zip C 434 Terry Avenue North	de	
	Seattle, WA 98109		
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 S Check if Austin, TX, officeholder living experts Supplies for Austin office.	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sol	ght Office held	
Date	Payee name		
06/27/2025	Amazon		
Amount (\$) \$77.67	Payee address; City; State; Zip C 434 Terry Avenue North	de	
	Seattle, WA 98109		
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 S Check if Austin, TX, officeholder living expersions Supplies for Austin office.	
Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sol	ght Office held	
Date	Payee name		
01/03/2025	Amli On 2nd		
Amount (\$) \$3,835.04	Payee address; City; State; Zip C 425 W 3rd St.	de	
	Austin, TX 78701		
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 S Check if Austin, TX, officeholder living experiment.	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sol	ght Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Lega	wards/Memorials Ex Services Instruction Guid			ages	/Contract Labor		Travel Out of Di OTHER (enter a	strict category not listed ab	ove)
1	Total pages Schedule F1:	2	EII ER NAME						3	Filer ID	(Ethics Commissi	on Filers)
-	Sch: 12/99 Rpt:	_	Friends of Bran	don Creightor	า				,	00058241	(Ethics Commission	0111 11013)
4	Date	5	Payee name									
	02/04/2025		Amli On 2nd									
6	Amount (\$) \$3,818.13	7	Payee address; 425 W 3rd St.	City;	State;	Zip Cod	de					
			Austin, TX 7870)1								
8	PURPOSE	(a)	Category (See Cat	egories listed at the	top of this sched	dule)	(b)	Description				
	OF		Office Overhead			,		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			•				X Check if Austin,	, TX,	officeholder living	g expense	
								Officeholder A	Aus	stin apartme	nt.	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeho	older name	Of	ffice souç	ght			Office h	eld	
	Date		Payee name									
	03/04/2025		Amli On 2nd									
	Amount (\$)	\vdash	Payee address;	City;	State:	Zip Cod	de					
	\$3,761.92		425 W 3rd St.	<i>3.</i>	•	•						
	Ψ0,7 01.02		420 W Old Ot.									
			Austin, TX 7870									
	PURPOSE OF	(a)	Category (See Cat	egories listed at the	top of this sched	dule)	(b)	Description				
	EXPENDITURE		Office Overhead	d/Rental Expe	ense			_			plete Schedule T.	
								Check if Austin,				
								Officeholder A	Aus	sun aparume	nt.	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeho	older name	Of	ffice souç	ght			Office h	eld	
	Date		Payee name									
	04/03/2025		Amli On 2nd									
\vdash	Amount (\$)	H	Payee address;	City;	State:	Zip Cod	de					
	\$3,764.35		425 W 3rd St.	J,	Jiaio,							
	Ψο, 104.55		TEU VV JIU JI.									
			Austin, TX 7870)1								
	PURPOSE	(a)	Category (See Cat	egories listed at the	top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Office Overhead	d/Rental Expe	ense			ш			plete Schedule T.	
	2/11/2/11/0/12									officeholder living		
								Officeholder A	Aus	stin apartme	nt.	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeho	older name	Of	ffice souç	ght			Office h	eld	
L	SAPORGICAL TO DOTION O/OI											
					_							

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/05/2025	Amli On 2nd
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,768.89	425 W 3rd St.
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		Officeholder Austin apartment.
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	06/03/2025	Amli On 2nd
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,803.01	425 W 3rd St.
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		X Check if Austin, TX, officeholder living expense
		Officeholder Austin apartment.
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/26/2025	At Home
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.35	5151 US-290
		Austin , TX 78735
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 14/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/03/2025	Azzurro Italian Costal Cuisine
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$356.20	1950 Hughes Landing Blvd #1900
		The Woodlands , TX 77381
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
		Meeting to discuss officeholder/ campaign issues.
		mooung to discuss officially campaign located.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/10/2025	Baralt , Leo
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3615 Spruce Park Cir
		Kingwood, TX 77345
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign video services.
		Campaigh Nace Convices.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	03/17/2025	Benihana
	Amount (\$)	Payee address; City; State; Zip Code
	\$511.08	9707 Westheimer Rd
	φ511.06	9707 Westheimer Ru
		Houston, TX 77042
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experioralie to belieff C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/07/2025	Best Buy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$757.74	1550 Lake Woodlands Dr.
		The Woodlands, TX 77380
8	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. Check if Austin, TX, officeholder living expense Supplies for The Woodlands office.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	02/10/2025	Blakemore & Associates
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1 Greenway Plaza
		Houston, TX 77007
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political campaign services.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/05/2025	Blakemore & Associates
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1 Greenway Plaza
		Houston, TX 77007
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political campaign services.
	Complete ONLY if direct expenditure to benefit C/OI	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

Candidate/Officeh Credit Card Paymen		ittee Legal Services The Instruction Guide explains	Salaries/Wages/Cor how to complete t		OTHER (eitlei a c	ategory not listed above)
1 Total pages Sche	edule F1: 2 F	ILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 16/99	Rpt: F	riends of Brandon Creighton			00058241	
4 Date	5 P	ayee name				
04/04/2025	E	Blakemore & Associates				
6 Amount (\$)	7 P	Payee address; City; State	e; Zip Code			
\$2	2,500.00 1	. Greenway Plaza				
	F	louston, TX 77007				
8 PURPOSE	(a) C	category (See Categories listed at the top of this sc	hedule) (b) De	scription		
OF EXPENDITURE	_ C	Consulting Expense		Check if travel outsid		
				Check if Austin, TX, litical campaig		expense
				milical campaig	ii seivices.	
• • • • • • • • • •		" I - 10" I - I -	0.00		0.00	
9 Complete ONLY expenditure to be		andidate/Officeholder name	Office sought		Office hel	d
<u>'</u>						
Date	P	Payee name				
04/04/2025	E	Blakemore & Associates				
Amount (\$)	Р	Payee address; City; State	e; Zip Code			
\$2	2,500.00 1	. Greenway Plaza				
	F	louston, TX 77007				
PURPOSE	(a) C	category (See Categories listed at the top of this sc	hedule) (b) De	scription		
OF EXPENDITURE	<u> </u>	Consulting Expense		Check if travel outsid		
				Check if Austin, TX, litical campaig		expense
			"	illicai campaig	ii seivices.	
Complete ONLY	if direct Co	undidate/Officeholder name	Office cought		Office hel	٨
Complete <u>ONLY</u> expenditure to be		ndidate/Oniceriolder name	Office sought		Office fier	u
	<u> </u>					
Date		Payee name				
04/29/2025	I P	Blakemore & Associates				
04/23/2020						
Amount (\$)			e; Zip Code			
Amount (\$)	P		; Zip Code			
Amount (\$)	P	Payee address; City; State	e; Zip Code			
Amount (\$)	2,500.00 1	Payee address; City; State	e; Zip Code			
Amount (\$) \$2 PURPOSE	2,500.00 P	Payee address; City; State . Greenway Plaza		scription		
Amount (\$) \$2 PURPOSE OF	2,500.00 1 (a) C	Payee address; City; State Greenway Plaza Houston, TX 77007		Check if travel outsid		
Amount (\$) \$2 PURPOSE	2,500.00 1 (a) C	Payee address; City; State Greenway Plaza Houston, TX 77007 Category (See Categories listed at the top of this sc	hedule) (b) De	Check if travel outside Check if Austin, TX,	officeholder living e	
Amount (\$) \$2 PURPOSE OF	2,500.00 1 (a) C	Payee address; City; State Greenway Plaza Houston, TX 77007 Category (See Categories listed at the top of this sc	hedule) (b) De	Check if travel outsid	officeholder living e	
Amount (\$) \$2 PURPOSE OF EXPENDITURE	2,500.00 1 H	Payee address; City; State Consulting Expense	hedule) (b) De	Check if travel outside Check if Austin, TX,	officeholder living o	expense
Amount (\$) \$2 PURPOSE OF EXPENDITURE	2,500.00 1 (a) C	Payee address; City; State Consulting Expense	hedule) (b) De	Check if travel outside Check if Austin, TX,	officeholder living e	expense
Amount (\$) \$2 PURPOSE OF EXPENDITURE	2,500.00 1 (a) C	Payee address; City; State Consulting Expense	hedule) (b) De	Check if travel outside Check if Austin, TX,	officeholder living o	expense
Amount (\$) \$2 PURPOSE OF EXPENDITURE	2,500.00 1 (a) C	Payee address; City; State Consulting Expense	hedule) (b) De	Check if travel outside Check if Austin, TX,	officeholder living o	expense

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 Wagnes/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	y not listed above)
1	Total pages Schedule F1:	L: 2 FILER NAME 3 Filer ID (Ethic	cs Commission Filers)
	Sch: 17/99 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	06/10/2025	Blakemore & Associates	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,500.00	1 Greenway Plaza	
		Houston, TX 77007	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Sc	
		Political campaign services.	-
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	OH CONTROL OF THE CON	
	Date	Payee name	
	04/17/2025	Cabo Bobs	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$903.30	2828 Rio Grande St	
		Austin , TX 78705	
	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 Sc	
		Meeting to discuss officeholder/ c	
			. 0
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	OH	
	Date	Payee name	
	05/26/2025	Canva	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$205.00	3212 E Cesar Chavez St	
		Austin, TX 78702	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Sc	
		Check if Austin, TX, officeholder living expens Officeholder print advertising serv	
		Onlectional print devertising serv	icc.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

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

	Credit Card Payment	The Instruction Guide explains how to complete this fo	rm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 18/99 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	
	01/16/2025	Chama Gaúcha Brazilian Steakhouse	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$386.43	5865 Westheimer Rd	
		Houston, TX 77057	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	i i ood/beverage Expense	c if travel outside of Texas. Complete Schedule T. c if Austin, TX, officeholder living expense
		ı	g to discuss officeholder/ campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	
	Date	Payee name	
	05/15/2025	Chama Gaúcha Brazilian Steakhouse	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$103.81	5865 Westheimer Rd	
		Houston, TX 77057	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000/Beverage Expense	c if travel outside of Texas. Complete Schedule T. c if Austin, TX, officeholder living expense
		I — I —	g to discuss officeholder/ campaign issues.
			-
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	04/07/2025	Clayton Spangler Photographic Design	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$549.00	235 Point Lick Dr	
		Charleston , WV 25306	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	
	OF EXPENDITURE	Onice Overrieda/Nentai Expense	c if travel outside of Texas. Complete Schedule T. c if Austin, TX, officeholder living expense
			ımic Senate photo.
			P
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

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

	Credit Card Payment	The Instruction Guide explains how to compl	lete this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers) 00058241
Ļ	Sch: 19/99 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	
	04/21/2025	Comcast	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$212.30	1701 John F Kennedy Blvd.	
		Philadelphia, PA 19103	
8	PURPOSE OF	,	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign broadband service.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	- 1	
_	Date	Payee name	
	03/19/2025	Comcast	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$214.70	1701 John F Kennedy Blvd.	
		,	
		Philadelphia, PA 19103	
-	PURPOSE	· · · · · · · · · · · · · · · · · · ·	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Cinide Overneda/Nental Expense	Check if Austin, TX, officeholder living expense
			Campaign broadband service.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experience to benefit Gree		
	Date	Payee name	
	02/19/2025	Comcast	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$214.70	1701 John F Kennedy Blvd.	
		Philadelphia, PA 19103	
	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.
			Check if Austin, TX, officeholder living expense Campaign broadband service.
			Campaign broadband Scrivice.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		SSS Nota
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	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: 20/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/21/2025	Comcast
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$214.78	1701 John F Kennedy Blvd.
		Philadelphia, PA 19103
8	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.
		Campaign broadband service.
		Campaigh broadband scrives.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
\vdash	Date	Davies same
		Payee name
	05/19/2025	Comcast
	Amount (\$)	Payee address; City; State; Zip Code
	\$212.30	1701 John F Kennedy Blvd.
		Philadelphia, PA 19103
	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.
		Campaign broadband service.
		Campaigh broadband service.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	06/20/2025	Comcast
	Amount (\$)	Payee address; City; State; Zip Code
	\$212.30	1701 John F Kennedy Blvd.
		Philadelphia, PA 19103
	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.
		Campaign broadband service.
		Campaign broauband Service.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 21/99 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	01/17/2025	Community Assistance Center	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	022 Mccall Ave	
		Conroe , TX 77301	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITORE	Candidate/Officeholder/Political Committee	
		Contribution for organization event.	
Ļ			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	02/07/2025	Conroe Chamber of Commerce	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	505 W Davis St	
		Conroe , TX 77301	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee Contribution for organization event.	
		Contribution for organization event.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	y	
H	Date	Payee name	_
	02/07/2025	Conroe Chamber of Commerce	
-	Amount (\$)	Payee address; City; State; Zip Code	_
	\$300.00	505 W Davis St	
	4000.00		
		Conroe , TX 77301	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee Contribution for organization event.	
		Contribution organization event.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	d 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: 22/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/13/2025	Dillards
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$474.02	2901 N Capital of Texas Hwy
		Austin , TX 78746
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
F	Date	Payee name
	01/13/2025	Dillards
H	Amount (\$)	Payee address; City; State; Zip Code
	\$108.24	2901 N Capital of Texas Hwy
		Austin , TX 78746
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
		Cappines is in death emissi
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/30/2025	EcoFlow
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$2,380.42	1200 W Northern Lights Blvd
		Anchorage , AK 99516
Ī	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for The Woodlands office.
		Supplies for the woodiands office.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

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

	Credit Gard i dyment	The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 23/99 Rpt:	Friends of Brandon Creighton		00058241
4	Date	5 Payee name		
	02/14/2025	Elegance Flowers		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$758.12	10613 Bellaire Blvd Ste 136		
		Houston, TX 77072		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Flowers for constituents.
_	2			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	<u>'</u>			
	Date	Payee name		
	03/31/2025	Erben & Yarbrough		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$2,700.00	807 Brazos St.		
		Austin , TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Legal Services		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign/ officeholder legal services.
				Campaign officeriolder legal services.
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI	•	9	
	Date	Payee name		
	01/14/2025	Expedia Expedia		
		•	do	
	Amount (\$) \$608.64	Payee address; City; State; Zip Co 1111 Expedia Group Way W.	ue	
	φ000.04	1111 Expedia Group Way W.		
		Coottle MA 00110		
		Seattle , WA 98119		
	PURPOSE OF	,	(b)	Description Check if traval outside of Tayon, Complete Schodule T
	EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Staff hotel stay during officeholder meetings.
	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/OI	1		

SCHEDULE F1

Advertising Expense Eve
Accounting/Banking Fee
Consulting Expense Foo
Contributions/ Donations Made By - Gift/

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printing Legal Services Salaries The Instruction Guide explains how to 6	/Wage	es/Contract Labor OT	avel Out of District THER (enter a category not listed above)
1	Total pages Schedule F1:	2	FII FR NAME		3 File	er ID (Ethics Commission Filers)
Ĺ	Sch: 24/99 Rpt:	Ĺ	Friends of Brandon Creighton		l	0058241
4	Date	5	Payee name			
	04/16/2025		Fedex			
6	Amount (\$)	7	Payee address; City; State; Zip C	Code		
	\$11.53		1304 W. Davis St.			
			Conroe, TX 77304			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	
	OF	``	Office Overhead/Rental Expense	`		of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin, TX, office	ceholder living expense
					Campaign/ officeho	older shipping expense.
9	Complete ONLY if direct		Candidate/Officeholder name Office so	ough		Office held
	expenditure to benefit C/OI	п 				
	Date		Payee name			
	04/08/2025		Fedex			
	Amount (\$)		Payee address; City; State; Zip C	Code		
	\$126.81		1304 W. Davis St.			
			Conroe, TX 77304	1		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	of Tayon Complete Calculate T
	EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Check if Austin, TX, office	of Texas. Complete Schedule T. ceholder living expense
					ш	older shipping expense.
						. Fr 3 - F
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	İ	Office held
	expenditure to benefit C/OI	Н				
	Date		Payee name			
	03/19/2025		Fedex			
	Amount (\$)		Payee address; City; State; Zip C	Code		
	\$16.26		1304 W. Davis St.			
			Conroe, TX 77304			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b	Description	
	EXPENDITURE		Office Overhead/Rental Expense			of Texas. Complete Schedule T.
					Campaign/ officeho	cenoider living expense older shipping expense.
					Campaign/ Oniceno	Jaci Shipping Capense.
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so) Jught		Office held
	expenditure to benefit C/O		Office St	g - 11	•	230 110.0

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 25/99 Rpt:	FILER NAME Friends of Brandon Creighton	3 Filer ID (Ethics Commission Filers) 00058241
4	Date 05/15/2025	5 Payee name Fedex	
6	Amount (\$) \$34.04	7 Payee address; City; State; Zip Code 1304 W. Davis St.	
8	PURPOSE OF EXPENDITURE	Conroe, TX 77304 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/ officeholder shipping expense.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/27/2025	Payee name Fedex	
	Amount (\$) \$46.26	Payee address; City; State; Zip Code 1304 W. Davis St. Conroe, TX 77304	
	PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/ officeholder shipping expense.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 06/16/2025	Payee name Fedex	
	Amount (\$) \$44.57	Payee address; City; State; Zip Code 1304 W. Davis St.	
		Conroe, TX 77304	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/ officeholder shipping expense.
	Complete ONLY if direct expenditure to benefit C/OI	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 Comm

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/Po	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I	F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 26/99 Rpt:	Friends of Brandon Creighton 00058241
4 Date	5 Payee name
06/13/2025	Fieldings
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$180.	46 1699 Research Forest Dr
	Shenandoah, TX 77380
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
	Meeting to discuss officeholder/ campaign issues.
	Weeting to discuss officeriolide, campaign issues.
9 Complete ONLY if direct	Ct Candidate/Officeholder name Office sought Office held
expenditure to benefit (
Date	Payee name
06/30/2025	Fieldings
Amount (\$)	Payee address; City; State; Zip Code
\$64.9	95 1699 Research Forest Dr
	Shenandoah, TX 77380
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
	Meeting to discuss officeholder/ campaign issues.
	Wicoling to disouss officeriodely sumpaign issues.
Complete ONLY if dire	ct Candidate/Officeholder name Office sought Office held
expenditure to benefit (y
	ı
Date	Payee name
01/10/2025	Galveston Chamber of Commerce
Amount (\$)	Payee address; City; State; Zip Code
\$225.0	2228 Mechanic St #101
	Galveston, TX 77550
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Contribution for organization event.
Complete <u>ONLY</u> if direct expenditure to benefit (
experience to borione	, on

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Advertising Expense Accounting/Banking Consulting Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schodule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
_	Total pages Schedule F1: Sch: 27/99 Rpt:	Friends of Brandon Creighton O0058241	
4	Date	5 Payee name	
	01/22/2025	Go Big Media	
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code PO Box 25026	
		Washington, DC 20027	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
		Check if Austin, TX, officeholder living expense	
		Campaign website.	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/31/2025	Go Big Media	
_	Amount (\$)	Payee address; City; State; Zip Code	
	• *		
	\$750.00	PO Box 25026	
		Washington, DC 20027	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Campaign website.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/16/2025	Go Big Media	
_			
	Amount (\$)		
	\$500.00	PO Box 25026	
		Washington, DC 20027	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Advertising Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign website.	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

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: 28/99 Rpt:	Friends of Brandon Creighton	00058241		
4	Date	5 Payee name			
	01/06/2025	Google			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$10.65	1600 Amphitheatre Parkway Mountain			
		View, CA 94043			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion		
	OF EVENDITUE	, , , , , , , , , , , , , , , , , , ,	if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check	if Austin, TX, officeholder living expense		
		Online	political advertising.		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	02/06/2025	Google			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$10.65	1600 Amphitheatre Parkway Mountain			
		View, CA 94043			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion		
	OF EXPENDITURE	Advertising Expense	if travel outside of Texas. Complete Schedule T.		
		I —	if Austin, TX, officeholder living expense political advertising.		
		Offillie	political advertising.		
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI		Office field		
-	Data	David Taring			
	Date 03/06/2025	Payee name Google			
		•			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$10.65	1600 Amphitheatre Parkway Mountain			
		V. 04.04040			
		View, CA 94043			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript			
	EXPENDITURE	Advertising Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense		
			political advertising.		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	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)	Π
	Sch: 29/99 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	04/07/2025	Google	
6	Amount (\$) \$10.65	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain	
		View, CA 94043	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/06/2025	Google	
	Amount (\$) \$10.65	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain	
		View, CA 94043	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/02/2025	Google	
	Amount (\$) \$184.20	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain	
		View, CA 94043	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.	
	Complete ONLY 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 Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:			
Sch: 30/99 Rpt:	Friends of Brandon Creighton 7 File 10 (Eurits Commission File is) 00058241		
4 Date	5 Payee name		
01/02/2025	Google		
6 Amount (\$) \$184.20	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Online political advertising.		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
02/03/2025	Google		
Amount (\$)	Payee address; City; State; Zip Code		
\$184.20	1600 Amphitheatre Parkway Mountain		
	View, CA 94043		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Online political advertising.		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
03/03/2025	Google		
Amount (\$)	Payee address; City; State; Zip Code		
\$184.20	1600 Amphitheatre Parkway Mountain		
	View, CA 94043		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Online political advertising.		
	Se permean acroning.		
Complete ONLY 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 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/Magney/Contract Labor

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
1 Total pages Schedule F1: Sch: 31/99 Rpt:	Friends of Brandon Creighton 73 File 10 (Ethics Commission Files) 00058241
4 Date	5 Payee name
05/02/2025	Google
6 Amount (\$) \$184.20	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/06/2025	Google
Amount (\$)	Payee address; City; State; Zip Code
\$10.65	1600 Amphitheatre Parkway Mountain
	View, CA 94043
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/02/2025	Google
Amount (\$)	Payee address; City; State; Zip Code
\$184.20	1600 Amphitheatre Parkway Mountain
	View, CA 94043
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Legal Service	Memorials Expense es ction Guide explai		/ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filer	rs)
	Sch: 32/99 Rpt:		Friends of Brandon (Creighton				•	00058241	(<i>J</i> ,
4	Date	5	Payee name								
	02/11/2025		HEB								
6	Amount (\$) \$81.19	7	Payee address; Cit 1000 E. 41st St.	y; Sta	ate; Zip Co	de					
			Austin, TX 78751								
8	PURPOSE	(a)	Category (See Categories		schedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rer	tal Expense			=		de of Texas. Com		
							_		officeholder living	expense	
							Supplies for A	Aus	un onice.		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder r	ame	Office sou	ght			Office he	eld	
	Date		Payee name								
	01/08/2025		HEB								
	Amount (\$)		Payee address; Cit	y; Sta	ate; Zip Co	de					
	\$46.48		1000 E. 41st St.								
		┝	Austin, TX 78751								
	PURPOSE OF	(a)	Category (See Categories		schedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rer	ital Expense			ш		de of Texas. Com officeholder living		
							Supplies for A			expense	
							Supplies for 7	lus	dir onice.		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder r	ame	Office sou	ght			Office he	eld	
	Date		Payee name								
	01/16/2025		HEB								
-	Amount (\$)	_	Payee address; Cit	v. Sta	ate; Zip Co	de					
	\$96.84		1000 E. 41st St.	,, 510	, <u>-</u>						
	Ψ30.04										
			Austin, TX 78751								
	PURPOSE	(a)	Category (See Categories	listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	1	Office Overhead/Rer	tal Expense			ш		de of Texas. Com		
							—		officeholder living	expense	
							Supplies for A	AUS	ип описе.		
	Complete ONLY if direct	Ц,	Candidate/Officeholder r	ame	Office sou	abt			Office he	ald	
	expenditure to benefit C/O		and additional of the control of the	anio	Office 30th	Aiir			Silice He		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (output a category not listed above)

	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: 33/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/24/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$27.54	1000 E. 41st St.
		Austin, TX 78751
8	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. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/24/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$292.78	1000 E. 41st St.
		Austin, TX 78751
	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.
		Check if Austin, TX, officeholder living expense Supplies for Austin office.
		Cappines for Australians.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/03/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.32	1000 E. 41st St.
		Austin, TX 78751
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
I		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
-	Total pages Cabadula 54:		
1	Total pages Schedule F1: Sch: 34/99 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers 00058241)
4	Date	5 Payee name	
	02/05/2025	HEB	
6	Amount (\$) \$142.68	7 Payee address; City; State; Zip Code 1000 E. 41st St.	
		Austin, TX 78751	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/12/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$125.38	1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/24/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$138.03	1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	н	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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: 35/99 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	02/24/2025	HEB	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$429.00	1000 E. 41st St.	
		Austin, TX 78751	
8	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.	
		Check if Austin, TX, officeholder living expense Supplies for Austin office.	
		Supplies for Austin office.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	Complete ONLY if direct expenditure to benefit C/OH	- · · · · · · · · · · · · · · · · · · ·	
L			
	Date	Payee name	
	03/05/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$114.84	1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Supplies for Austin office.	
		Supplies for Austri office.	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
H	Data		
	Date	Payee name	
	03/06/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$226.82	1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	_/, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
	0 1. 0		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total mariae Cabadula E1.	<u></u>	
1	Total pages Schedule F1: Sch: 36/99 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission Filers Triends of Brandon Creighton 00058241)
4	Date	5 Payee name	
	03/14/2025	HEB	
6	Amount (\$) \$113.88	7 Payee address; City; State; Zip Code 1000 E. 41st St.	
	¥==0.00		
	DUDDOCE	Austin, TX 78751	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	03/14/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$199.53	1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	03/24/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$86.60	1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	LAFLINDITORL	Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
	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

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: 37/99 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4	Date 03/26/2025	5 Payee name HEB
6	Amount (\$) \$164.55	7 Payee address; City; State; Zip Code 1000 E. 41st St.
8	PURPOSE OF EXPENDITURE	Austin, TX 78751 (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 Supplies for Austin office.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/31/2025	Payee name HEB
	Amount (\$) \$104.51	Payee address; City; State; Zip Code 1000 E. 41st St. Austin, TX 78751
	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 Supplies for Austin office.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 04/04/2025	Payee name HEB
	Amount (\$) \$131.27	Payee address; City; State; Zip Code 1000 E. 41st St.
		Austin, TX 78751
	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 Supplies for Austin office.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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	l 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: 38/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
L	04/07/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.33	1000 E. 41st St.
		Austin, TX 78751
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
L	04/14/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$107.51	1000 E. 41st St.
		Austin, TX 78751
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	04/15/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$108.68	1000 E. 41st St.
L		Austin, TX 78751
	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.
		Check if Austin, TX, officeholder living expense Supplies for Austin office.
		Supplies for Austra office.
	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

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

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		_
	Sch: 39/99 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	_
	04/24/2025	HEB	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
l	\$82.17	1000 E. 41st St.	
l			
		Austin, TX 78751	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
⊨	Date	Davisa nama	=
	05/01/2025	Payee name HEB	
L			_
l	Amount (\$) \$294.75	Payee address; City; State; Zip Code 1000 E. 41st St.	
	Φ294.75	1000 E. 41St St.	
l		Aughin TV 70751	
L		Austin, TX 78751	_
l	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.	
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	1	
	Date	Payee name	
	05/07/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$176.24	1000 E. 41st St.	
l			
l		Austin, TX 78751	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
l	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
\vdash			_

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 complete this form.	
1	Total pages Schedule F1: Sch: 40/99 Rpt:	2 FILER NAME Friends of Brandon Creighton	3 Filer ID (Ethics Commission Filers) 00058241
4	Date 05/08/2025	5 Payee name HEB	
6	Amount (\$) \$39.13	7 Payee address; City; State; Zip Code 1000 E. 41st St.	
8	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Experise	outside of Texas. Complete Schedule T. , TX, officeholder living expense Austin office.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/09/2025	Payee name HEB	
	Amount (\$) \$232.12	Payee address; City; State; Zip Code 1000 E. 41st St. Austin, TX 78751	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense Austin office.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/12/2025	Payee name HEB	
	Amount (\$) \$35.58	Payee address; City; State; Zip Code 1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE OF EXPENDITURE	Onice Overneau/Nerital Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense Austin office.
	Complete ONLY if direct expenditure to benefit C/OI	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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	, -	2 FILER NAME Striends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
_	Sch: 41/99 Rpt:	
4	Date 05/20/2025	5 Payee name HEB
6	Amount (\$) \$131.47	7 Payee address; City; State; Zip Code 1000 E. 41st St.
		Austin, TX 78751
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 Supplies for Austin office.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/27/2025	Payee name HEB
	Amount (\$) \$127.67	Payee address; City; State; Zip Code 1000 E. 41st St.
		Austin, TX 78751
	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 Supplies for Austin office.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/27/2025	Payee name HEB
	Amount (\$) \$228.84	Payee address; City; State; Zip Code 1000 E. 41st St.
		Austin, TX 78751
	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 Supplies for Austin office.
	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 Con

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	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: 42/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/26/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$158.57	1000 E. 41st St.
		Austin, TX 78751
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/03/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$70.19	1000 E. 41st St.
		Austin, TX 78751
	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.
		Check if Austin, TX, officeholder living expense Supplies for Austin office.
		Supplies for Austri office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	06/13/2025	Harris County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	7232 Wynnwood Ln
		Houston, TX 77008
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Lincoln-Reagan dinner sponsorship.
	Complete ONLY if allowers	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 2 25 3/01	
L		

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

	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: 43/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/03/2025	Hill Country Springs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$138.05	10019 IH35 South
		Austin, TX 78747
8	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. Check if Austin, TX, officeholder living expense
		Water for Austin office.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/04/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.04	10019 IH35 South
	,	
		Austin, TX 78747
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Water for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Data	
	Date 03/04/2025	Payee name Hill Country Springs
	Amount (\$) \$128.46	Payee address; City; State; Zip Code 10019 IH35 South
	φ120.40	10019 1033 30001
		Auctio TV 70747
	DUDDOGE	Austin, TX 78747
	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
		Water for Austin office.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	7

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)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission	n Filers)
Sch: 44/99 Rpt:	Friends of Brandon Creighton		00058241	
4 Date	5 Payee name			
04/02/2025	Hill Country Springs			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$180.56	10019 IH35 South			
	Austin, TX 78747			
8 PURPOSE		(b) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if trave	el outside of Texas. Complete Schedule T.	
EXPENDITURE	Office Overflead/Refital Expense		tin, TX, officeholder living expense	
		Water for A	ustin office.	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held	
expenditure to benefit C/C	Н			
Date	Payee name			
05/02/2025	Hill Country Springs			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$151.45	10019 IH35 South			
,				
	Austin, TX 78747			
DUDDOCE		(In) =		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	el outside of Texas. Complete Schedule T.	
EXPENDITURE	Office Overhead/Rental Expense	. —	tin, TX, officeholder living expense	
		Water for A	ustin office.	
Complete ONLY if direct	Candidate/Officeholder name Office sor	ught	Office held	
expenditure to benefit C/C	PH			
Date	Payee name			
06/03/2025	Hill Country Springs			
Amount (\$)	Payee address; City; State; Zip C	ode.		
\$277.66				
+ =	20020 11.000 000011			
	Auctin TV 79747			
	Austin, TX 78747	T		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	el outside of Texas. Complete Schedule T.	
EXPENDITURE	Office Overhead/Rental Expense		tin, TX, officeholder living expense	
		Water for A		
Complete ONLY if direct	Candidate/Officeholder name Office soil	ught	Office held	
expenditure to benefit C/C				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 45/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/15/2025	Holocaust Remembrance Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$292.62	PO Box 6556
		Kingwood , TX 77325
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Oniceriolder/Political Committee Contribution for organization event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	the state of the s
_	Date	Payee name
	01/22/2025	HomeGoods
	Amount (\$) \$749.87	Payee address; City; State; Zip Code 5400 Brodie Lane
	\$149.81	5400 Broule Larie
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	01/22/2025	HomeGoods
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.16	5400 Brodie Lane
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schodula F1:	<u> </u>	
1	Total pages Schedule F1: Sch: 46/99 Rpt:	2FILER NAME3Filer ID(Ethics Commission Filers)Friends of Brandon Creighton00058241	
4	Date	5 Payee name	
	01/09/2025	Istorage Self Storage	
Ļ			
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$242.00	1777 N Loop 336 W	
		Conroe, TX 77304	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign storage.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	-1	
\vdash	Date	Power name	
	01/28/2025	Payee name	
		Istorage Self Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$363.00	1777 N Loop 336 W	
		Conroe, TX 77304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign storage.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
H	Data	Dove name	
	Date	Payee name	
	02/10/2025	Istorage Self Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$242.00	1777 N Loop 336 W	
		Conroe, TX 77304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign storage.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 47/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/28/2025	Istorage Self Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$363.00	1777 N Loop 336 W
		Conroe, TX 77304
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign storage.
		Gampaigh storage.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	03/10/2025	Istorage Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$242.00	1777 N Loop 336 W
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign storage.
	Operation ONLY if allowed	On didn't Office helds
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/28/2025	Istorage Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$363.00	1777 N Loop 336 W
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Campaign storage.
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schodula F1:	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 48/99 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/09/2025	Istorage Self Storage
<u>_</u>		
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$242.00	1777 N Loop 336 W
		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign storage.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н
\vdash	Date	Payee name
		Payee name
	04/28/2025	Istorage Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$363.00	1777 N Loop 336 W
		Conroe, TX 77304
	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
		Campaign storage.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
H	Data	
	Date	Payee name
	05/09/2025	Istorage Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$242.00	1777 N Loop 336 W
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign storage.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above Credit Card Payment The Instruction Guide explains how to complete this form.	e)
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission	r Filers)
Sch: 49/99 Rpt: Friends of Brandon Creighton 00058241	
4 Date 5 Payee name	
05/28/2025 Istorage Self Storage	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$363.00 1777 N Loop 336 W	
Conroe, TX 77304	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Control of the Control of Topics Complete Schedule Topics Control of Topics Contro	
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Campaign storage.	
Campaign storage.	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
06/09/2025 Istorage Self Storage	
Amount (\$) Payee address; City; State; Zip Code	
\$242.00 1777 N Loop 336 W	
Conroe, TX 77304	
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.	
Check if Austin, TX, officeholder living expense Campaign storage.	
Campaign storage.	
Complete ONLY if divert Condidate/Officeholder name Office accepts	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
· · · · · · · · · · · · · · · · · · ·	
Date Payee name	
06/30/2025 Istorage Self Storage	
Amount (\$) Payee address; City; State; Zip Code	
\$363.00 1777 N Loop 336 W	
Conroe, TX 77304	
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.	
Check if Austin, TX, officenoider living expense	
Campaign storage.	
Complete ONLY if direct Condidate/Officeholder name Office assists	
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	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: 50/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/12/2025	JW Marriott Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$445.54	110 E 2nd St
		Austin , TX 78701
8	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 Staff hotel stay for officeholder event.
		Star Note: Stay for officeriolder event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/30/2025	JW Marriott Austin
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$207.54	110 E 2nd St
		Austin, TX 78701
	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
		Staff hotel stay for officeholder event.
		Can note say to smooth overa.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/05/2025	King Florist Austin
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$357.23	1806 W Koenig Ln
		Austin , TX 78756
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Flowers for constituent.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
ı		

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 51/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/28/2025	Kingwood Tea Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	P.O. Box 5478
		Kingwood, TX 77325
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Contribution for organization event.
		Contribution of gamzadon overta
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	04/04/2025	Kingwood Tea Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	P.O. Box 5478
		Kingwood, TX 77325
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contribution for organization event.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/23/2025	Kirbys Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$337.69	123 N Loop 1604 E
		San Antonio , TX 78232
	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

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

	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: 52/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/26/2025	Kiser , Brandon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$204.62	17142 Coventry Park Dr
		Houston, TX 77084
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mileage reimbursement for 305.4 miles @ \$0.67 per
		mile not reimbursed by the state.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/26/2025	Kiser , Brandon
	Amount (\$)	Payee address; City; State; Zip Code
	\$113.30	17142 Coventry Park Dr
		Houston, TX 77084
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mileage reimbursement for 161.1 miles @ \$0.67 per
		mile not reimbursed by the state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/24/2025	Kiser , Brandon
	Amount (\$)	Payee address; City; State; Zip Code
	\$531.31	17142 Coventry Park Dr
		Houston, TX 77084
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Mileage reimbursement for 793 miles @ \$.67 per
		mile not reimbursed at state expense.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	T-+-1 C- -	1
1	Total pages Schedule F1: Sch: 53/99 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4	Date	5 Payee name
	01/09/2025	Kohls
6	Amount (\$) \$368.56	7 Payee address; City; State; Zip Code 16640 Interstate 45 S Conroe , TX 77384
8	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. Check if Austin, TX, officeholder living expense Supplies for The Woodlands office.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/22/2025	LifeFirst
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 115
		Magnolia, TX 77353
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution for organization event.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/22/2025	Lilly & Company
	Amount (\$) \$15,240.75	Payee address; City; State; Zip Code 1005 Congress Ave. Ste 400 Austin , TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political campaign services.
	Complete ONLY if direct expenditure to benefit C/OI	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 Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 54/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/10/2025	Lilly & Company
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15,240.75	1005 Congress Ave.
		Ste 400
		Austin , TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Political campaign services.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/10/2025	Lilly & Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,389.48	1005 Congress Ave.
		Ste 400
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Political campaign services.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/19/2025	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$671.58	675 Ponce De Leon Ave
		Atlanta, GA 30308
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign digital newsletter platform.
		Campaign digital newsletter platform.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	•	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	a category not listed above)
1	Total pages Schedule F1:	2 FILED NAME		•			3	Filer ID	(Ethics Commission Filers)
							ိ		(Ethics Commission Filers)
	Sch: 55/99 Rpt:	Friends of E	Brandon Creighton					00058241	
4	Date	5 Payee name							
	04/21/2025	Mailchimp							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode				
	\$671.58	1	De Leon Ave						
		Atlanta CA	20200						
		Atlanta, GA							
8	PURPOSE OF	(a) Category (Se	ee Categories listed at the to	p of this schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense			=		de of Texas. Com officeholder living	plete Schedule T.
						Campaign dig			
						Campaign aig	gita	inewsiettei	piationii.
_	0 1: 0 1: 0	0 11 1 10 11		0.00	<u> </u>			0,11	
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office so	ugnt			Office h	ela
	Date	Payee name							
	03/19/2025	Mailchimp							
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$671.58	675 Ponce	De Leon Ave						
		Atlanta CA	20200						
		Atlanta, GA			1				
	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense			=		de of Texas. Com officeholder living	plete Schedule T.
						Campaign dig			
						Campaign aig	g.tu	. Howolotto	piacionni
_	Complete ONLY if direct	Candidate/Offi	ceholder name	Office so	ıaht			Office h	old.
	expenditure to benefit C/OI		centiquei name	Office Soi	ugnt			Office II	eiu
	·								
	Date	Payee name							
	02/19/2025	Mailchimp							
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$671.58	675 Ponce	De Leon Ave						
		Atlanta, GA	30308						
	PURPOSE				(h)	Description			
	OF		ee Categories listed at the to	p of this schedule)	(0)	Description Check if travel of	nutsi	de of Texas Com	nplete Schedule T.
	EXPENDITURE	Advertising	Expense					officeholder living	•
						Campaign dig			
H	Complete ONLY if direct	L Candidate/Offi	ceholder name	Office so	ught			Office h	eld
	expenditure to benefit C/OI			255 300	J			200 11	
H									
L									
-	rme provided by Tayas E	thice Commissi	00 140404	tothice state tv					Varsian V/I 1 0 f10d0fc

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Se Event Expense Loan Renavment/Reimbi

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 comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 56/99 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	<u>'</u>
	01/21/2025	Mailchimp	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$671.58	675 Ponce De Leon Ave	
		Atlanta, GA 30308	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Campaign digital newsletter platform.
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		0" 111
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	·		
	Date	Payee name	
	06/20/2025	Mailchimp	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$671.58	675 Ponce De Leon Ave	
		Atlanta, GA 30308	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign digital newsletter platform.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
H	Date	Payee name	
	06/20/2025	Marriott Dallas	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$462.64	650 Pearl St	
		Dallas , TX 75201	
\vdash	PURPOSE		Description
	OF	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Officeholder hotel during campaign meeting days.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 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 (output a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	<u> </u>	_
	Sch: 57/99 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	03/05/2025	Melo Malfitano, Natalia	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$720.00	22488 Brass Bell Dr.	
		Porter, TX 77339	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign photography services.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
_	Date	Payee name	_
	04/29/2025	Melo Malfitano, Natalia	
			_
	Amount (\$) \$829.54	Payee address; City; State; Zip Code 22488 Brass Bell Dr.	
	\$829.54	22488 Blass Bell Dl.	
		Porter, TX 77339	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign photography services.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
-	Date	Davos nama	_
	03/25/2025	Payee name Meta	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$552.00	1 Hacker Way	
		Menlo Park, CA 94025	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign advertising.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	

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)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME	;	3 Filer ID	(Ethics Commission Filers)
	Sch: 58/99 Rpt:	Friends of Brandon Creighton		00058241	
4	Date	5 Payee name			
	03/03/2025	Meta			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$277.10	1 Hacker Way			
		Menlo Park, CA 94025			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Advertising Expense	Check if travel or	utside of Texas. Cor	
	LAFENDITORE		\Box	TX, officeholder livin	g expense
			Campaign adv	rtising.	
_	Occupation ONLY if allowed	Our lidete (Office helder grown		O#: I-	-1-1
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought		Office h	eiu
_					
	Date	Payee name			
	01/02/2025	Meta			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$14.68	1 Hacker Way			
		Menlo Park, CA 94025			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Advertising Expense	\square	utside of Texas. Cor TX, officeholder livin	
			Campaign adv		g expense
			p g	. or a consist	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office h	eld
	expenditure to benefit C/O	-1			
	Date	Payee name			
	04/14/2025	Meta			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$828.00	1 Hacker Way			
	4020.00	Thacker Way			
		Menlo Park, CA 94025			
	DUDDOCE		5		
	PURPOSE OF	,	Description Check if travel or	utside of Texas. Cor	nplete Schedule T.
	EXPENDITURE	Advertising Expense		TX, officeholder livin	
			Campaign adv	ertising.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office h	eld
	expenditure to benefit C/O	1			

SCHEDULE F1

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

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

	Card Payment	The Instruction Guide explains how to co	-	ete this form.
1 Total pa	ages Schedule F1:	·		3 Filer ID (Ethics Commission Filers)
	h: 59/99 Rpt:	Friends of Brandon Creighton		00058241
4 Date		5 Payee name		•
04/01/	/2025	Meta		
6 Amoun	nt (\$)	7 Payee address; City; State; Zip Co	ode	
	\$95.43	1 Hacker Way		
		Menlo Park, CA 94025		
8 PUI	RPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EVDE	OF NDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
EXPE	INDITORE			Check if Austin, TX, officeholder living expense
				Campaign advertising.
• • •			<u> </u>	0"
	ete <u>ONLY</u> if direct diture to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held
Date		Payee name		
02/24/	/2025	Meta		
Amoun	nt (\$)	Payee address; City; State; Zip Co	ode	
	\$552.00	1 Hacker Way		
		Menlo Park, CA 94025		
	RPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF NDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
_/				Check if Austin, TX, officeholder living expense
				Campaign advertising.
Comple	ete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	ıaht	Office held
	diture to benefit C/O		agrit	Office field
D-4-				
Date	/202E	Payee name		
01/21/		Meta		
Amoun		Payee address; City; State; Zip Co	ode	
	\$334.00	1 Hacker Way		
		Menlo Park, CA 94025		
PUI	RPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXPE	OF NDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign advertising.
				Campagn advertioning.
Comple	ete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	laht	Office held
	diture to benefit C/O		agrit	Onice field

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributors/ 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

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

	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: 60/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/28/2025	Meta
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$900.00	1 Hacker Way
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign advertising.
		Campaign daverdonig.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
_	Data	
	Date	Payee name Moto
	02/03/2025	Meta
	Amount (\$)	Payee address; City; State; Zip Code
	\$56.84	1 Hacker Way
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Campaign advertising
		Campaign advertising.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	·	
	Date	Payee name
	03/17/2025	Meta
	Amount (\$)	Payee address; City; State; Zip Code
	\$552.00	1 Hacker Way
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign advertising.
	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	<u> </u>	

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

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

	Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 61/99 Rpt:	Friends of Brandon Creighton		00058241
4	Date	5 Payee name		•
	05/14/2025	Meta		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$900.00	1 Hacker Way		
		Menlo Park, CA 94025		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Campaign advertising.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soul	ght	Office held
	Date	Payee name		
	03/10/2025	Meta		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$552.00	1 Hacker Way		
		Menlo Park, CA 94025		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORL			Check if Austin, TX, officeholder living expense
				Campaign advertising.
	Complete ONII V if direct	Condidate/Officeholder name Office services	abt	Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sould	gni	Office held
	Date	Payee name		
	01/23/2025	Meta		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$334.00	1 Hacker Way		
		Menlo Park, CA 94025		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign advertising.
				campaign advertibility.
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		9,11	Office field

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 complete this form.	
1	Total pages Schedule F1: Sch: 62/99 Rpt:	2 FILER NAME Striends of Brandon Creighton 3 Filer ID (Ethics Commission 00058241	Filers)
4	Date 02/11/2025	5 Payee name Meta	
6	Amount (\$) \$368.00	7 Payee address; City; State; Zip Code 1 Hacker Way	
8	PURPOSE OF EXPENDITURE	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 03/31/2025	Payee name Meta	
	Amount (\$) \$552.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 05/01/2025	Payee name Meta	
	Amount (\$) \$165.54	Payee address; City; State; Zip Code 1 Hacker Way	
		Menlo Park, CA 94025	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

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

Credit Card Payment		The Instruction Guid	e explains how to con	nplet	te this form.
1 Total pages Scheo Sch: 63/99 F		2 FILER NAME Friends of Brandon Creighton			3 Filer ID (Ethics Commission Filers) 00058241
4 Date 01/27/2025	Ę	Payee name Meta			
6 Amount (\$)	334.00	7 Payee address; City; 1 Hacker Way Menlo Park, CA 94025	State; Zip Cod	de	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Advertising Expense	op of this schedule)]]	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.
Complete ONLY if expenditure to ber		Candidate/Officeholder name	Office soug	ght	Office held
Date 04/30/2025		Payee name Meta			
Amount (\$) \$:	900.00	Payee address; City; 1 Hacker Way Menlo Park, CA 94025	State; Zip Cod	de	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Advertising Expense	op of this schedule)]]	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.
Complete <u>ONLY</u> if expenditure to ber		Candidate/Officeholder name	Office soug	ght	Office held
Date 01/30/2025		Payee name Meta			
Amount (\$)	334.00	Payee address; City; 1 Hacker Way	State; Zip Coo	de	
		Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the t Advertising Expense	op of this schedule)]]	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.
Complete <u>ONLY</u> it expenditure to ber		Candidate/Officeholder name	Office souç	ght	Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	, -		sion Filers)
	Sch: 64/99 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	01/30/2025	Meta	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$334.00	1 Hacker Way	
		Menlo Park, CA 94025	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign advertising.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH	
	Date	Payee name	
	01/21/2025	Meta	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$334.00	1 Hacker Way	
		Menlo Park, CA 94025	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign advertising.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI)H	
	Date	Payee name	
	05/27/2025	Meta	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	1 Hacker Way	
		Menlo Park, CA 94025	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign advertising.	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH .	

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

	Credit Card Payment	The Instruction Guide explains how to comp	ete this form.			
1	Total pages Schedule F1: Sch: 65/99 Rpt:	FILER NAME Friends of Brandon Creighton		3	Filer ID 00058241	(Ethics Commission Filers)
4	Date 02/10/2025	5 Payee name Meta		-1		
6	Amount (\$) \$368.00	7 Payee address; City; State; Zip Code 1 Hacker Way				
8	PURPOSE OF EXPENDITURE	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense		stin, TX	ide of Texas. Com , officeholder living rtising.	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought			Office he	eld
	Date 06/02/2025	Payee name Meta				
	Amount (\$) \$808.96	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	ш	stin, TX	ide of Texas. Com , officeholder living rtising.	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought			Office he	eld
	Date 06/18/2025	Payee name Meta				
	Amount (\$) \$900.00	Payee address; City; State; Zip Code 1 Hacker Way				
		Menlo Park, CA 94025				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		stin, TX	ide of Texas. Com , officeholder living rtising.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought			Office he	eld

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 66/99 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4	Date 06/09/2025	5 Payee name Meta
6	Amount (\$) \$900.00	7 Payee address; City; State; Zip Code 1 Hacker Way
		Menlo Park, CA 94025
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/30/2025	Payee name Meta
	Amount (\$) \$561.38	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 01/22/2025	Payee name Michael's Craft Supplies
	Amount (\$) \$58.40	Payee address; City; State; Zip Code 10225 Research Blvd Suite 2000 Austin, TX 78759
	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 Supplies for Austin office.
	Complete ONLY if direct expenditure to benefit C/OI	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 Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 67/99 Rpt:	2 FILER NAME Striends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4 Date 01/22/2025	5 Payee name Michael's Craft Supplies
6 Amount (\$) \$133.30	7 Payee address; City; State; Zip Code 10225 Research Blvd Suite 2000 Austin, TX 78759
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 Supplies for Austin office.
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date 01/22/2025	Payee name Michael's Craft Supplies
Amount (\$) \$109.46	Payee address; City; State; Zip Code 10225 Research Blvd Suite 2000 Austin, TX 78759
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 Supplies for Austin office.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 05/26/2025	Payee name Michael's Craft Supplies
Amount (\$) \$153.67	Payee address; City; State; Zip Code 10225 Research Blvd Suite 2000 Austin, TX 78759
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 Supplies for Austin office.
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 Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 68/99 Rpt:	2 FILER NAME Striends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4 Date 06/30/2025	5 Payee name Michael's Craft Supplies
6 Amount (\$) \$90.89	7 Payee address; City; State; Zip Code 10225 Research Blvd Suite 2000 Austin, TX 78759
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 Supplies for Austin office.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 03/24/2025	Payee name Montgomery County Association of Business Women
Amount (\$) \$500.00	Payee address; City; State; Zip Code 13921 Hwy 105 W Suite 130 Conroe, TX 77304
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution for organization event.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 04/22/2025	Payee name Montgomery County Republican Party
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 45
	Conroe, TX 77305
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution for organization event.
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 Comm

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	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: 69/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/17/2025	Montgomery County Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 1766
		Conroe, TX 77305
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Contribution for organization event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	01/22/2025	North Italia
_	Amount (\$)	Payee address; City; State; Zip Code
	\$437.04	500 W 2nd St.
	φ-01.0-	#120
		Austin, TX 78701
	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
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/16/2025	North Italia
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.97	500 W 2nd St.
	* *****	#120
		Austin, TX 78701
	PURPOSE	I
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Rayarage Eynense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	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

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 70/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date 01/27/2025	5 Payee name North Italia
6	Amount (\$) \$107.41	7 Payee address; City; State; Zip Code 500 W 2nd St. #120 Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/03/2025	North Italia
	Amount (\$) \$80.73	Payee address; City; State; Zip Code 500 W 2nd St. #120 Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LA ENDITORE	Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/17/2025	North Italia
	Amount (\$) \$150.41	Payee address; City; State; Zip Code 500 W 2nd St. #120 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(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. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct expenditure to benefit C/OI	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

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

С	tributions/ Donations Made By Candidate/Officeholder/Politica dit Card Payment	
	l pages Schedule F1: Sch: 71/99 Rpt:	2 FILER NAME Striends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4 Date 05/2	7/2025	5 Payee name North Italia
6 Amo	unt (\$) \$37.93	7 Payee address; City; State; Zip Code 500 W 2nd St. #120 Austin, TX 78701
	PURPOSE OF PENDITURE	(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. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
	plete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 06/0	4/2025	Payee name North Italia
Amo	unt (\$) \$56.01	Payee address; City; State; Zip Code 500 W 2nd St. #120 Austin, TX 78701
	PURPOSE OF PENDITURE	(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. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
	plete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 02/2	4/2025	Payee name Numero 28
Amo	unt (\$) \$224.03	Payee address; City; State; Zip Code 452 W. 2nd St.
		Austin, TX 78701
	PURPOSE OF PENDITURE	(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. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
	plete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 72/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/18/2025	Overflow Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8,212.93	PO Box 92451
		Austin , TX 78709
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Professional speech writing services.
_	Commiste ONLY if diseast	Condidate/Officeholder name
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/01/2025	Paper Source
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.32	524 N Lamar Blvd #105
		Austin , TX 78703
	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.
		Check if Austin, TX, officeholder living expense Supplies for Austin office.
		Supplies for Austin Office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 01/16/2025	Payee name
		Partnership Lake Houston
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	110 W Main St
		Humble , TX 77338
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Sommodian for organization events
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	•

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 Wagnes/Contract Labor

	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: 73/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/25/2025	Partnership Lake Houston
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$45.00	110 W Main St
		Humble , TX 77338
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Contribution or garneauth event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	04/14/2025	Perla's Seafood
	Amount (\$)	Payee address; City; State; Zip Code
	\$253.54	1400 S Congress Ave
		Austin, TX 78704
	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 Meeting to discuss officeholder/ campaign issues.
		wiceting to discuss officeriolider/ campaign issues.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	05/08/2025	Payee name
		Perry's Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$272.25	114 W 7th St.
		Austin , TX 78701
	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 Meeting to discuss officeholder/ campaign issues
		ivideting to discuss officendiael/ campaign issues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 74/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/26/2025	Perry's Steakhouse
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$330.37	114 W 7th St.
		Austin , TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxon Complete Schedule T
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	01/21/2025	Phoebe's Diner
	Amount (\$)	Payee address; City; State; Zip Code
	\$91.31	408 W 11th St
		Austin , TX 78701
	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
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/27/2025	Phoebe's Diner
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.85	408 W 11th St
		Austin , TX 78701
	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
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com 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	Il 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: 75/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/17/2025	Phoebe's Diner
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$53.57	408 W 11th St
		Austin , TX 78701
8	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
		Meeting to discuss officeholder/ campaign issues.
		Wiceling to discuss officeriolder campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/24/2025	Phoebe's Diner
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.54	408 W 11th St
		Austin , TX 78701
	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 Meeting to discuss officeholder/ campaign issues.
		mooting to disease officerious, campaign issues.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	05/14/2025	Phoebe's Diner
	Amount (\$)	Payee address; City; State; Zip Code
	\$110.68	408 W 11th St
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
I	Complete ONLY if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 76/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/30/2025	Phoebe's Diner
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	408 W 11th St
		Austin , TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Complete Schedule T
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/O	
	Date	Payee name
	01/22/2025	Precision Camera
	Amount (\$)	Payee address; City; State; Zip Code
	\$202.14	2438 W Anderson Ln
		Austin , TX 78757
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder photos.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	05/26/2025	Ramirez, Carolina
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	113 Quail Ridge Dr.
		Kyle, TX 78640
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense
		Officeholder Austin apartment cleaning services.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
_	Sch: 77/99 Rpt:	Friends of Brandon Creighton O0058241
4	Date	5 Payee name
	05/26/2025	Ramirez, Carolina
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 113 Quail Ridge Dr. Kyle, TX 78640
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense Officeholder Austin apartment cleaning services.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/26/2025	Ramirez, Carolina
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	113 Quail Ridge Dr.
		Kyle, TX 78640
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder Austin apartment cleaning services.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/26/2025	Ramirez, Carolina
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	113 Quail Ridge Dr.
		Kyle, TX 78640
	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.
		X Check if Austin, TX, officeholder living expense
		Officeholder Austin apartment cleaning services.
_	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 Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 78/99 Rpt:	Friends of Brandon Creighton O0058241
4	Date	5 Payee name
	05/26/2025	Ramirez, Carolina
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$375.00	113 Quail Ridge Dr.
		Kyle, TX 78640
8	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.
		Check if Austin, TX, officeholder living expense Officeholder Austin apartment cleaning services.
		omoondasi yasani aparanoni doariing sorvisso.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/22/2025	Randall's
	Amount (\$)	Payee address; City; State; Zip Code
	\$114.95	2727 Exposition Blvd
		Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/18/2025	Randall's
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	2727 Exposition Blvd
		Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Gu		Wages	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID	(Ethics Commission File	ers)
	Sch: 79/99 Rpt:		s of Brandon Creighto	on				00058241		
4	Date	5 Payee r	name							
	05/30/2025	Ready	refresh							
6	Amount (\$)	7 Payee a	address; City;	State; Zip Co	ode					
	\$27.64	#215 6	661 Dixie HWY							
		Suite 4	ŀ							
		Louisv	ille, KY 40258							
8	PURPOSE	(a) Catego	ry (See Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Office	Overhead/Rental Exp	ense		ш		de of Texas. Com		
						Water for The		officeholder living		
						water for the	. ••	oodianas oi	nec.	
9	Complete ONLY if direct expenditure to benefit C/OI		te/Officeholder name	Office sou	ught			Office he	eld	
		•								
	Date	Payee r	name							
	04/21/2025	Ready	refresh							
	Amount (\$)	Payee a	address; City;	State; Zip Co	ode					
	\$110.39	#215 6	#215 6661 Dixie HWY							
		Suite 4	ļ							
		Louisv	ille, KY 40258							
	PURPOSE	(a) Categor	ry (See Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Office	Overhead/Rental Exp	ense				de of Texas. Com		
		l L				Check if Austin, TX, officeholder living expense Water for The Woodlands office.				
						water for the	. VV	oodianas oi	ncc.	
	Complete ONLY if direct expenditure to benefit C/OH		te/Officeholder name	Office sou	ught			Office he	eld	
	Date	Payee r	name							
	04/10/2025	l í	refresh							
	Amount (\$)	Payee a	address; City;	State; Zip Co	ode					
	\$27.64	#215 6	661 Dixie HWY	•						
		Suite 4	<u>l</u>							
			ille, KY 40258							
	PURPOSE		ry (See Categories listed at th		(b)	Description				
	OF		Overhead/Rental Exp		(2)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	011100	O vorrioda/i vortai Exp	761100		Check if Austin	, TX,	officeholder living	expense	
						Water for The	e W	oodlands of	fice.	
	Complete ONLY if direct expenditure to benefit C/OH		te/Officeholder name	Office sou	ught			Office he	eld	
		•								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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.	OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 80/99 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	
	03/17/2025	Readyrefresh	
6	` ,	7 Payee address; City; State; Zip Code	
	\$77.37	#215 6661 Dixie HWY	
	!	Suite 4	
		Louisville, KY 40258	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overficad/Nertical Expense	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
	1		ne Woodlands office.
	!		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	Н	
	Date	Payee name	
	03/07/2025	Readyrefresh	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.64	#215 6661 Dixie HWY	
	!	Suite 4	
	!	Louisville, KY 40258	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	el outside of Texas. Complete Schedule T.
	-	,	in, TX, officeholder living expense ne Woodlands office.
	1	1333.13.	ic woodianas omoc.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	9	
H	Date	Payee name	
	01/21/2025	Readyrefresh	
\vdash	Amount (\$)	Payee address; City; State; Zip Code	
	\$77.37	#215 6661 Dixie HWY	
	!	Suite 4	
	!	Louisville, KY 40258	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	el outside of Texas. Complete Schedule T.
	EXPENDITORL		in, TX, officeholder living expense
	1	Water for the	ne Woodlands office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field

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	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: 81/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/06/2025	Readyrefresh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$24.64	#215 6661 Dixie HWY
		Suite 4
		Louisville, KY 40258
8	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. Check if Austin, TX, officeholder living expense
		Water for The Woodlands office.
		votice for the voodiands office.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/09/2025	Readyrefresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.73	#215 6661 Dixie HWY
		Suite 4
		Louisville, KY 40258
	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.
		Check if Austin, TX, officeholder living expense Water for The Woodlands office.
		votice for the voodiands office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/06/2025	Readyrefresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.64	#215 6661 Dixie HWY
		Suite 4
		Louisville, KY 40258
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZABITORZ	Check if Austin, TX, officeholder living expense
		Water for The Woodlands office.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made Candidate/Officeholder/Polit Credit Card Payment	
1 Total pages Schedule F1	
Sch: 82/99 Rpt:	Friends of Brandon Creighton 00058241
4 Date	5 Payee name
05/07/2025	Resortpass
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$235.44	321 Santa Monica Blvd, Suite 300
	Santa Monica , CA 90401
0 DUDDOCE	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Staff hotel amenities charge during stay.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/	DH .
Date	Payee name
01/21/2025	San Luis
Amount (\$)	Payee address; City; State; Zip Code
\$221.38	
Ψ221.00	SZZZ GCAWAII BIVA
	Calveston TV 77551
	Galveston, TX 77551
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
	Officeholder hotel during campaign meeting days.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/	
Dato	Pouse name
Date	Payee name
01/15/2025	Spaw Senate Account
Amount (\$)	Payee address; City; State; Zip Code
\$1,100.00	1400 Congress Ave.
	Austin, TX 78701
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Officeholder members lounge dues.
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held OH
onponditure to benefit of	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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		category not listed above)
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
	Sch: 83/99 Rpt:	Friends of Brandon Creighton 00058241	<u> </u>
4	Date	5 Payee name	
	01/24/2025	Spaw Senate Account	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$125.00	1400 Congress Ave.	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Comp	
		Check if Austin, TX, officeholder living Committee dues.	expense
		Committee dues.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office he	·ld
	expenditure to benefit C/OI		
	Date	Payee name	
	05/22/2025	Spaw Senate Account	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$165.00	1400 Congress Ave.	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
		Candidate/Officeholder/Political Committee Contribution for end-of-sessi	
			on giiti
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office he	ld
	expenditure to benefit C/OI	OH	
	Date	Payee name	
	05/31/2025	Spaw Senate Account	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$361.25	1400 Congress Ave.	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living Contribution for kitchen staff.	
		Contribution for Nitchell States	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office he	ld
	expenditure to benefit C/O	S	· -

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		y not listed above)
1	Total pages Schodula F1:		cs Commission Filers)
1	Total pages Schedule F1: Sch: 84/99 Rpt:	Friends of Brandon Creighton 00058241	cs Commission Filers)
4	Date	5 Payee name	
	05/28/2025	Spectrum	
6	Amount (\$) \$307.97	7 Payee address; City; State; Zip Code 400 Atlantic St. Stamford, CT 06901	
8	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 So	se
9	Complete ONLY if direct expenditure to benefit C/Ol		
	Date	Payee name	
	04/28/2025	Spectrum	
	Amount (\$) \$307.97	Payee address; City; State; Zip Code 400 Atlantic St.	
		Stamford, CT 06901	
	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 So X Check if Austin, TX, officeholder living expense Officeholder Austin apartment cal	se
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
	Date	Payee name	
	03/28/2025	Spectrum	
	Amount (\$) \$307.97	Payee address; City; State; Zip Code 400 Atlantic St.	
		Stamford, CT 06901	
	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 Scint Check if Austin, TX, officeholder living expension Officeholder Austin apartment call	se
	Complete ONLY if direct 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 Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction G			ges	/Contract Labor		OTHER (enter a	strict a category not listed abov	/e)	
					uide explains now	to com	pic	te tilis loilli.	_			\	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissio	n Filers)	
	Sch: 85/99 Rpt:		Friends of B	randon Creight	on					00058241			
4	Date	5	Payee name										
	02/28/2025		Spectrum										
_	Amount (¢)	7	<u> </u>	City:	State; Zir	2 Code							
6	Amount (\$)	 ′	Payee addres		State, Zij	J Coue	е						
	\$307.97		400 Atlantic	St.									
			Stamford, C	T 06901									
8	PURPOSE	(a)	Category (Sa	e Catenories listed at t	he top of this schedule)	(t	b)	Description					
	OF	 `´		nead/Rental Ex		′ `	•	_ `	outsi	de of Texas. Con	plete Schedule T.		
	EXPENDITURE				5555			X Check if Austin,	, TX,	officeholder livin	g expense		
								Officeholder A	Aus	stin apartme	nt cable.		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sough	ht			Office h	eld		
	expenditure to benefit C/O	Н											
-	Date	Г											
			Payee name										
	01/28/2025		Spectrum										
	Amount (\$)		Payee addres	•	State; Zip	Code	е						
	\$296.73		400 Atlantic	St.									
			Stamford, C	T 06901									
_	PURPOSE	(a)	Catagony			T (t	h)	Description					
	OF	'"			he top of this schedule)	' '	٠,	_ `	outsi	de of Texas. Con	plete Schedule T.		
EXPENDITURE			Office Overhead/Rental Expense					X Check if Austin, TX, officeholder living expense					
					Officeholder Austin apartment cable.								
										·			
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sough	ht			Office h	eld		
	expenditure to benefit C/O					9-							
	Date		Payee name										
	06/30/2025		Spectrum										
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code	е						
	\$307.97		400 Atlantic	St.									
			Stamford, C	T 06901									
	PURPOSE	(0)				1/1	<u>ه</u>	D inti-					
	OF	(a)			he top of this schedule)) ('	U)	Description Check if travel (outei	de of Teyas Con	nplete Schedule T.		
	EXPENDITURE		Office Overr	nead/Rental Ex	pense					officeholder livin	•		
								Officeholder /					
										,			
<u> </u>	Complete ONLY if direct	Щ	Candidate/Offic	reholder name	Office	sough	ht			Office h	eld.		
	expenditure to benefit C/O		Janunaie/OIII	CHOIGE HAIRE	Onice	, sougi	11			Onice II	Ciu		
_	·												

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Salaries/\	Expens Wages	se s/Contract Labor		Travel in District Travel Out of Distric OTHER (enter a car	ct tegory not listed above)
1	Total pages Schedule F1:						3	Filer ID (Ethics Commission Filers)
L	Sch: 86/99 Rpt:	Friends of E	Brandon Creighton					00058241	
4	Date	5 Payee name							
	01/01/2025	Target Hun	ger						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode				
	\$500.00	1260 Shotw	ell St						
		Houston , T	X 77020						
8	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE		ns/Donations Made By			_		de of Texas. Comple	
	LAPENDITORE	Candidate/	Officeholder/Political C	ommittee		_		officeholder living ex	
						Contribution f	or (organization e	vent.
<u>_</u>	Commission ONU Wife allows	Condide to 100	aabaldar nass	Offi				O#: I- 11	
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ugnt			Office held	
	Date	Payee name							
	02/14/2025	Tarrytown F	Pharmacy						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode				
\$119.75 2727 Exposition Blvd #105									
		Austin, TX	78703						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE		head/Rental Expense	,		—		de of Texas. Comple	
	_/					ш		officeholder living ex	pense
						Supplies for A	\US	un onice.	
L	Complete ONLY if direct	Candidata/Off	ceholder name	Office sou	lap+			Office held	<u> </u>
	expenditure to benefit C/O		CENDIUEI HAIHE	Office SOL	agrit			Onice neid	
\vdash	Data	Davis a resi							
	Date 02/18/2025	Payee name Tarrytown F	Pharmacy						
				04-4 7' 0					
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$82.96	2/2/ Expos	sition Blvd #105						
		Austin, TX	78703						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE		head/Rental Expense	,		Check if travel of		de of Texas. Comple	
	LAI LINDITURE							officeholder living ex	pense
						Supplies for A	\US	un onice.	
	Complete ONLY if direct	Candidata	coholder name	Office	lapt			Office held	1
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office sou	ayrıt			Onice neid	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	T-t-1	1
1	Total pages Schedule F1:	
L	Sch: 87/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/12/2025	Tarrytown Pharmacy
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$16.45	2727 Exposition Blvd #105
	Ψ10.43	2727 Exposition bive #100
		Austin, TX 78703
8	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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	01/24/2025	Texas Department of Criminal Justice
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,976.33	P.O. Box 4013
		Huntsville, TX 77342
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent gifts.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	03/13/2025	Texas Department of Criminal Justice
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,922.52	P.O. Box 4013
		Huntsville, TX 77342
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent gifts.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	T-t-1	,
1	Total pages Schedule F1:	
L	Sch: 88/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/24/2025	Texas Department of Criminal Justice
_	Amount (t)	
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,019.95	P.O. Box 4013
		Huntsville, TX 77342
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent gifts.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
L		
	Date	Payee name
	04/24/2025	Texas Department of Criminal Justice
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,059.15	P.O. Box 4013
	, , , , , , ,	
		Huntsville, TX 77342
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense
		Constituent gifts.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/24/2025	Texas Prison Museum
	Amount (\$)	Payee address; City; State; Zip Code
	\$676.56	491 Highway 75 N.
		Huntsville, TX 77320
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gift for constituent.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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 Committee

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

	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: 89/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/08/2025	Texas Senate
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$133.50	1400 Congress
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Flags for constituents.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	02/18/2025	Texas Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$61.75	1400 Congress
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense Flags for constituents.
		Tags for constituents.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	03/03/2025	Texas Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$178.00	1400 Congress
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL	Check if Austin, TX, officeholder living expense
		Flags for constituents.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		

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

1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Com Sch: 90/99 Rpt: Friends of Brandon Creighton 00058241	
Sch: 90/99 Rpt: Friends of Brandon Creighton 00058241	mission Filers)
4 Date 5 Payee name	
03/06/2025 Texas Senate	
6 Amount (\$) 7 Payee address; City; State; Zip Code \$80.00 1400 Congress	
Austin, TX 78701	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	Г.
Flags for constituents.	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
05/05/2025 Texas Senate	
Amount (\$) Payee address; City; State; Zip Code	
\$178.00 1400 Congress	
Austin, TX 78701	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (c) Category (See Categories listed at the top of this schedule)	
EXPENDITURE Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule Texas. Complete Sch	ſ .
Flags for constituents.	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
05/19/2025 Texas Senate	
Amount (\$) Payee address; City; State; Zip Code	
\$773.44 1400 Congress	
Austin, TX 78701	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (c) Category (See Categories listed at the top of this schedule) (b) Description	-
Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule Check if Laustin, TX, officeholder living expense	l.
Gavels for staff gifts.	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
Complete ONLY 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						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ers)				
	Sch: 91/99 Rpt:	Friends of Brandon Creighton 00058241					
4	Date	5 Payee name					
	06/17/2025	Texas Senate					
6	Amount (\$) \$222.50	7 Payee address; City; State; Zip Code 1400 Congress Austin, TX 78701					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flags for constituents.					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H					
	Date	Payee name					
	03/04/2025	The Post Oak Hotel					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,800.55	1600 W Loop S					
		Houston, TX 77027					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense Officeholder hotel during campaign meeting day	/S.				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H					
	Date	Payee name					
	03/28/2025	The Stephen F. Austin Royal Sonesta Hotel					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,202.45	701 Congress Ave.					
		Austin , TX 78701					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Staff hotel stay for officeholder event.					
	Complete ONLY 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 Cou

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 92/99 Rpt:	Friends of Brandon Creighton 00058241		
4	Date	5 Payee name		
	04/14/2025	The Stephen F. Austin Royal Sonesta Hotel		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$321.80	701 Congress Ave.		
		Austin , TX 78701		
8	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 Staff hotel stay for officeholder event.		
		Stan noter stay for officeriolder event.		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
ľ	expenditure to benefit C/OI			
F	Date	Payee name		
	04/21/2025	Toss Pizza		
H	Amount (\$)	Payee address; City; State; Zip Code		
\$365.68 2901 S 1st St				
		#102		
		Austin, TX 78704		
┝	PURPOSE			
	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	Check if Austin, TX, officeholder living expense		
		Meeting to discuss officeholder/ campaign issues.		
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		
	Date	Payee name		
	01/08/2025	Wall Street Journal		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$42.21	1211 Avenue of the Americas		
		New York , NY 10036		
	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.		
		Check if Austin, TX, officeholder living expense Online newspaper subscription.		
		Offilite newspaper subscription.		
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·		
\vdash				
ı				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed abo					ve)			
					de explains how to co	ompl	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission	n Filers)
	Sch: 93/99 Rpt:		Friends of B	randon Creightor	า				00058241		
4	Date	5	Payee name								
	02/05/2025		Wall Street	Journal							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip Co	ode					
	\$42.21		1211 Avenu	e of the Americas	S						
			New York ,	NV 10036							
Ļ		_				1					
8	PURPOSE OF	(a)		e Categories listed at the		(b)	Description				
	EXPENDITURE		Office Overl	nead/Rental Expe	ense				officeholder living	plete Schedule T.	
							Online newsp				
							Ommio novop	Jup	or caboonp		
Ļ	Commission ONII V if alice at	<u> </u>	Condidate/Offi		Office				Office b	ماما	
9	Complete ONLY if direct expenditure to benefit C/OH		Jandidate/Offic	ceholder name	Office sou	ugnt			Office h	ela	
	<u> </u>										
	Date		Payee name								
	03/05/2025		Wall Street	Journal							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode					
	\$42.21		1211 Avenu	e of the Americas	S						
			New York ,	NY 10036							
	DUDDOCE	(0)				(h)					
	PURPOSE OF	(a)		e Categories listed at the		(D)	Description Check if travel (nutei	de of Teyes Con	nnlete Schedule T	
EXPENDITURE			Office Overficad/Nertial Experise				<u> </u>	vel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense			
							Online newsp				
							·	•	·		
	Complete ONLY if direct		 Candidate/Offi	ceholder name	Office sou	ıaht			Office h	eld	
	expenditure to benefit C/O					3					
-	Dete	_									
	Date		Payee name	3							
	04/03/2025		Wall Street	Journal							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode					
	\$42.21		1211 Avenu	e of the Americas	S						
			New York ,	NY 10036							
	PURPOSE	(a)	Category 194	e Categories listed at the	top of this schedule)	(b)	Description				
	OF	` `		nead/Rental Expe		` `		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE			•			Check if Austin,	, TX,	officeholder living	g expense	
							Online newsp	oap	er subscript	ion.	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office sou	ught			Office h	eld	
	expenditure to benefit C/OI	Н									
l											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
<u> </u>	Total pages Schodula F1:	· · · · · · · · · · · · · · · · · · ·	ore)						
1	Total pages Schedule F1: Sch: 94/99 Rpt:	Friends of Brandon Creighton 00058241	c13)						
Ļ	·								
4	Date	5 Payee name							
L	05/01/2025	Wall Street Journal							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$42.21	1211 Avenue of the Americas							
		New York , NY 10036							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Online newspaper subscription.							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	H							
\vdash	Date	Payee name							
	05/28/2025	Wall Street Journal							
_									
	Amount (\$)	Payee address; City; State; Zip Code							
	\$42.21	1211 Avenue of the Americas							
		New York , NY 10036							
	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.	*						
	LAI LIIDITOILE	Check if Austin, TX, officeholder living expense							
		Online newspaper subscription.							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
L	Superiorder to belieff 6/01								
	Date	Payee name							
	06/26/2025	Wall Street Journal							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$42.21	1211 Avenue of the Americas							
		New York , NY 10036							
\vdash	PURPOSE	To a second seco							
	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	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Online newspaper subscription.							
	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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		nmittee	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.				Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 95/99 Rpt:		Friends of E	Brandon Creightor	n					00058241	
4	Date	5	Payee name								
	01/22/2025		Walmart								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				
	\$44.15		1407 N Loo	p 336 W							
			Conroe, TX	77304							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			head/Rental Expe		oud.o,			outsio	de of Texas. Comp	olete Schedule T.
	EXPENDITORE							_		officeholder living	
								Supplies for T	ne	woodlands	опісе.
Ļ	0 1 0 0 0 0 0 0	<u> </u>								- · ·	
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	ld
	Date		Payee name								
	01/22/2025		Walmart								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de				
\$10.79 1407 N Loop 336 W											
			Conroe, TX	77304							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			head/Rental Expe		,		ш		de of Texas. Comp	
	EXI ENDITORE							ш		officeholder living	
								Supplies for T	ne	woodiands	опісе.
	Complete ONLY if direct	<u> </u>	Condidate /Cff	achalder reserve		office as:	ab+			Office I-	Id
	Complete ONLY if direct expenditure to benefit C/OH		Jandidate/Offi	ceholder name	C	Office sou	gnt			Office he	ılu
L		_									
	Date		Payee name								
	01/22/2025		Walmart								
	Amount (\$)		Payee addre		State;	Zip Co	de				
	\$10.25		1407 N Loo	p 336 W							
			Conroe, TX	77304							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Office Over	head/Rental Expe	ense					de of Texas. Comp	
								Check if Austin, Supplies for T		officeholder living	
								Ouppiico IUI I	116	vvoodiailus	onice.
	Complete ONLY if direct	Щ	Candidate/Offi	ceholder name		Office sou	aht			Office he	ld
	expenditure to benefit C/O		Jan Ididato/OIII	co.loidoi lidillo			ar			Cinice He	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	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: 96/99 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/17/2025	Walmart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$815.04	1407 N Loop 336 W
		Conroe, TX 77304
8	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.
		Check if Austin, TX, officeholder living expense Supplies for The Woodlands office.
		Supplies for the woodands office.
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/07/2025	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	1407 N Loop 336 W
		Conroe, TX 77304
	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.
		Check if Austin, TX, officeholder living expense Supplies for The Woodlands office.
		Supplies for The Woodianus office.
	Opening the ONII Wife discort	On did to 10 ff as hald a grant Off as south
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2025	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.59	1407 N Loop 336 W
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Supplies for The Woodlands office.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/OI	•
1		

SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)				
Ļ							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
L	Sch: 97/99 Rpt:	Friends of Brandon Creighton	00058241				
4	Date	5 Payee name					
	03/31/2025	Walmart					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$145.89	1407 N Loop 336 W					
		Conroe, TX 77304					
	DUDDOCE						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel	outside of Texas. Complete Schedule T.				
	EXPENDITURE	Onlee Overhead/Nerhal Expense	, TX, officeholder living expense				
		I — I —	Γhe Woodlands office.				
			-				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OI						
\vdash	Date	Payee name					
	05/08/2025	Walmart					
\vdash							
	Amount (\$)	Payee address; City; State; Zip Code					
	\$57.89	1407 N Loop 336 W					
L		Conroe, TX 77304					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.				
			Check if Austin, TX, officeholder living expense				
		Supplies for I	Γhe Woodlands office.				
_	Operation ONE V. C. P.	Overskildete (Office hedden manne	Office held				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
L	01/21/2025	Walmart					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$731.96	1407 N Loop 336 W					
		Conroe, TX 77304					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin,	, TX, officeholder living expense				
		Supplies for 1	Γhe Woodlands office.				
L							
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OI	H					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		l Committee	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:						3 Filer ID 000582	(Ethics Commission Filers)	
Ļ	Sch: 98/99 Rpt:		Brandon Creighton				1 000582	.41	
4	Date 04/07/2025	5 Payee name Walmart	. a, so hame						
6	Amount (\$)	7 Payee addr	ess; City;	State: 2	Zip Code	e			
	\$436.29	1407 N Lo	. ,,	Otato, .	p	•			
		Conroe, T	X 77304						
8	PURPOSE		See Categories listed at the to		ule) (I	Description			
	OF EXPENDITURE	Office Ove	rhead/Rental Exper	nse			outside of Texas n, TX, officeholde	s. Complete Schedule T. r living expense	
						Supplies for			
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Offi	ice sough	nt	Offic	ce held	
H	Date	Payee name	e						
	06/17/2025	Walmart							
	Amount (\$)	Payee addr	ess; City;	State; 2	Zip Code				
	\$149.66 1407 N Loop 336 W								
		Conroe, T	X 77304						
	PURPOSE OF		See Categories listed at the to		ule) (I	Description			
	EXPENDITURE	Office Ove	rhead/Rental Expe	nse		<u> </u>	outside of Texas n, TX, officeholde	s. Complete Schedule T. r living expense	
						Supplies for			
	Complete ONLY if direct expenditure to benefit C/Oh		fficeholder name	Offi	ice sough	nt	Offic	ce held	
H	Date	Payee name	e						
	05/20/2025	Wasabi Bi							
	Amount (\$)	Payee addr	ess; City;	State;	Zip Code	9			
	\$200.00	449 S Loo	p 336 W						
		#1500							
		Conroe, T	X 77304						
	PURPOSE	(a) Category (See Categories listed at the to	op of this schedu	ule) (I	Description			
	OF EXPENDITURE	Food/Beve	erage Expense				outside of Texas n, TX, officeholde	c. Complete Schedule T.	
								eholder/ campaign issues	
						3 · · ·		, 0	
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Offi	ice sough	nt	Offic	ce held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services The Instruction Guide e	Salaries/	Expense Wages/Contract Labor	Т	Fravel in District Fravel Out of Dis DTHER (enter a	trict category not listed above)
1	Total pages Schedule F1: Sch: 99/99 Rpt:		ME Strandon Creighton			1	Filer ID 10058241	(Ethics Commission Filers)
4	Date 06/20/2025	5 Payee name						
6	Amount (\$) \$99.14	#1500	Iress; City; op 336 W TX 77304	State; Zip C	ode			
8	PURPOSE OF EXPENDITURE		(See Categories listed at the top of verage Expense	of this schedule)	Check if Aust	in, TX, of	fficeholder living	olete Schedule T. expense Her/ campaign issues.
9	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office so	ught		Office he	ld