CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

_							
Th	e C/OH Instruction (Guide explains how to con	nplete this form.	1 Filer ID (Ethics Commis 00067738	sion Filers)	2 Total pages	filed: 116
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	0==:0=	
	OFFICEHOLDER NAME	The Honorable	Jeff C.		IVII	OFFICE Date Received	USE ONLY
l						FI FCTRONI	CALLY FILED
l		NIOKALAME				07/15/2025	07.2211.22
l		NICKNAME	LAST		SUFFIX	01/13/2023	
			Leach				
4	CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	d or Date Postmarked
	OFFICEHOLDER MAILING ADDRESS	800 Glen Rose Dr.				Receipt #	Amount
	Change of Address	Allen, TX 75013					
		Alleli, IX 73013				Date Processed	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
ľ	TREASURER	Mr.	Dan				
	NAME	IVII.	DαII				
		NICKNAME	LAST		SUFFIX		
l			Panetti				
6	CAMPAIGN	STREET ADDRESS (NO I	PO BOX PI FASE).	AP7	/ SUITE #; CITY	· s	TATE; ZIP CODE
ľ	TREASURER	3513 Cross Bend Rd.	0 00, 1 22, 102),	, , ,	7 00112 //,	,	17(12, 211 0052
	ADDRESS	COLO CIOSS Della Ita.					
	(Residence or Business)	DI TV 75000					
		Plano, TX 75023					
7	CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
	TREASURER	(214) 682-9248					
	PHONE	(== ', ' == = ' = ' = ' = ' = ' = ' = ' =					
8	REPORT						
	TYPE	January 15	30th day before	e election	Runoff		campaign treasurer
							officeholder only)
		X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)
9	PERIOD	Month Day Yea	ır		Month Day	Year	
l	COVERED	01/01/2025	TH	HROUGH	06/30/202	25	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
l		Month Day Yea	ar XP	rimary	Runoff	Other	
l		03/03/2025		General	☐ Cassial	_	
				Derierai	Special		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	Γ (if known)	
**	OFFICE	State Representative D	istrict 67		State Represent		7
		Otate Representative B			State Represent	tative Bistriot or	
\vdash		1			<u>l</u>		
	GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 116

13 C / OH NAME	Leach, Jeff C. (The I	Honorable)	14 Filer ID 00067738	(Ethics Commission Filer	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this informatic	the candidate's or offic	ceholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	John Marie Abbridge			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	255		
		COMMITTEE CAMITATON TREASURER ADDITE			
16 CONTRIBUTION TOTALS		I IIZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.0	
	\$ 452,205.0				
EXPENDITURE TOTALS					
	4. TOTAL POLITION	CAL EXPENDITURES		\$ 187,194.	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PI	CAL CONTRIBUTIONS MAINTAINED AS OF THE I	AST DAY OF THE	\$ 492,731.8	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 0.0	
17 AFFIDAVIT		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.			
		The Ho	norable Jeff C. Leac	h	
			f Candidate or Officeho		
AFFIX NO	TARY STAMP / SEAL AE	OVE			
Sworn to and subs	cribed before me, by the s	said	, this the	day	
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath	
Signature or offic	cer auministening	Finited name of onicer administering	Tille of office	er auministening tätti	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	3 of 116								
18 FILER NA		19 Filer ID	(Ethics Comr	nission Filers)					
	eff C. (The Honorable)	00067738	Т						
	E SUBTOTALS SCHEDULE		SUBTO	TAL AMOUNT					
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS								
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				380.00					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$						
4.	4. SCHEDULE E: LOANS								
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS								
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS								
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$							
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$							
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$							
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$						
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$						

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/116	
2	FILER NAME Leach, Jeff C	C. (The Honorable)			3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 06/30/2025	5 Full name of contributor Apartment Association of6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$5,000.00
_	Deinsinal assu	Irving, TX 75038	, T	O Franksian (Cook la chuichticea	<u></u>		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor Austin, Joel Contributor address; City; St)		Amount of Contribution (\$)	\$1,500.00
	Deinsinal	McKinney, TX 75072	, 1	Faralas and (Cara landous times			
	SVP	pation / Job title (See Instructions)	Employer (See Instructions Oncor	5)		
	Date 06/28/2025	Full name of contributor Bouressa, Chris Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$250.00
		Plano, TX 75094					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/24/2025	Full name of contributor Brodie, Mike Contributor address; City; St Richardson, TX 75080)	•	Amount of Contribution (\$)	\$2,000.00
	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions Keller Williams	5)		
	Date 06/25/2025	Full name of contributor Cammack & Strong PC Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/116	
2	FILER NAME Leach, Jeff (c. (The Honorable)		3	Filer ID (Ethics Commissio 00067738	n Filers)
4	Date 06/30/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_	Daine in all access	Sunnyvale, TX 75182				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#: Clinton, Rita Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		Dallas, TX 75225				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Cook, Cindy Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$25.00
		Atlanta, GA 30309				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Cook, Ken Contributor address; City; State; Zip Code Allen, TX 75013		•	Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Cypull, Karen Contributor address; City; State; Zip Code Allen, TX 75013		•	Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 6/116	
2	FILER NAME Leach, Jeff (c. (The Honorable)			3	Filer ID (Ethics Commission 00067738	ion Filers)
4	Date 06/25/2025	5 Full name of contributor DTH Strategies LLC6 Contributor address; City; States	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
_	Dringing Loggy	Austin, TX 78701	. Io) Employer (Coo Instructions	<u>, , </u>		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 06/25/2025	Full name of contributor Delisi Communications PA Contributor address; City; Sta				Amount of Contribution (\$)	\$1,000.00
	Deinsinal assu	Austin, TX 78701		Frankrian (Caa kashiristiana	<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	»)		
	Date 06/30/2025	Full name of contributor Energy Transfer Partners Contributor address; City; Sta				Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 06/30/2025	Full name of contributor Erben & Yarbrough Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/27/2025	Full name of contributor Gallagher, Lisa Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25,000.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Gallagher Construction			
			<u>, </u>				

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/116	
2	FILER NAME Leach, Jeff (C. (The Honorable)			3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 06/23/2025	Full name of contributor Garrison, Stephen Contributor address; City; Sta	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
_		Keller, TX 76248			<u> </u>		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 06/28/2025	Full name of contributor Gibb, Catherine Contributor address; City; Sta)		Amount of Contribution (\$)	\$25.00
	Dringing aggr	Plano, TX 75074 pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Pilicipai occu	pation / Job title (See Instructions,	'	Employer (See Instructions	·)		
	Date 06/30/2025	Full name of contributor Gore, Rex Contributor address; City; Sta)		Amount of Contribution (\$)	\$4,100.00
		Austin, TX 78709					
	Principal occu Advisor	pation / Job title (See Instructions)		Employer (See Instructions CleanScapes	5)		
	Date 06/25/2025	Full name of contributor Grace & McEwan Consulti Contributor address; City; Sta Austin, TX 78701)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)).	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor Gray, Cary Contributor address; City; Sta Houston, TX 77056	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Gray Reed & McGraw	5)		
			1				

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains hov	to complete this fo	form.		1	Total pages Schedule A1: Sch: 5/12 Rpt: 8/116		
2	FILER NAME Leach, Jeff (C. (The Honorable)				3	Filer ID (Ethics Commission 00067738	on Filers)	
4	Date 06/30/2025	5 Full name of contributor Heidelberg Materials US6 Contributor address; City; S				7	Amount of Contribution (\$)	\$1,500.00	
		Irving, TX 75062							
8	Principal occu	pation / Job title (See Instructions	5)	9 E	mployer (See Instructions	s)			
	Date 06/30/2025	Full name of contributor Henry, Matthew Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00	
	D: : 1	Dallas, TX 75218	<u>, </u>	1 -					
	Principal occu	pation / Job title (See Instructions	5)	=	mployer (See Instructions	5)			
	Date 06/25/2025	Full name of contributor HillCo PAC Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5,000.00	
		Austin, TX 78701		_					
	Principal occu	pation / Job title (See Instructions	5)	E	mployer (See Instructions	5)			
	Date 06/25/2025	Full name of contributor HomePAC of Texas Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions	5)	E	mployer (See Instructions	5)			
	Date 06/27/2025	Full name of contributor Horner, Tim Contributor address; City; S Plano, TX 75093	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu President	pation / Job title (See Instructions	5)		mployer (See Instructions remier Designs	s)			
				1					

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/116	
2	FILER NAME Leach, Jeff C	C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 06/30/2025	 Full name of contributor out-of-state PAC (II Houston Clinton Company (a Texas general Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$200.00
_	5	Burnet, TX 78611	<u> </u>	Ţ		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ns)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (II Humphrey, Randall Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$2,500.00
	Detection	Argyle, TX 76226	Faralana (On a landon di an			
	Contractor	pation / Job title (See Instructions)	Employer (See Instruction Humphrey Assoc.	ns)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (II Independent Insurance Agents of Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Austin, TX 78768				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 06/26/2025	Full name of contributor out-of-state PAC (II Kelley, Rusty Contributor address; City; State; Zip Code Austin, TX 78731	D#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instruction Blackridge	ns)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (I Lesch, Melissa Contributor address; City; State; Zip Code Grapevine, TX 76051	D#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 10/116	
2	FILER NAME Leach, Jeff (C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	ion Filers)
4	Date 06/30/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Driverinal	Austin, TX 78701	O Franks or (Cas hatwatians			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_Mayo, Ginger Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Richardson, TX 75080 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occa	pation 7 oob title (occ mondellons)	Employer (See Manacions	,		
	Date 06/23/2025	Full name of contributor)		Amount of Contribution (\$)	\$25.00
		Plano, TX 75023				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ McCutcheon, Darrell Contributor address; City; State; Zip Code Plano, TX 75093)		Amount of Contribution (\$)	\$5,000.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ McLane Jr., Drayton (Mr.) Contributor address; City; State; Zip Code Temple, TX 76503)		Amount of Contribution (\$)	\$75,000.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions The McLane Group)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/12 Rpt: 11/116
2	FILER NAME Leach, Jeff (C. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067738
4	Date 06/25/2025	5 Full name of contributor out-of-state PAC (ID#: Moak Casey PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00
_	Dringing Lagge	Austin, TX 78746	O Franks or (Cas Instructions		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)	
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID#:_ Montgomery, John Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$100.00
	Principal occu	Allen, TX 75013 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
		,		,	
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Oden, Steve Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$10,000.00
		Austin, TX 78746			
	Principal occu Co-Founder	pation / Job title (See Instructions)	Employer (See Instructions OHT Partners	i)	
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Phillips, Elizabeth Contributor address; City; State; Zip Code Dallas, TX 75219)		Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Rural Friends of Electric Cooperatives Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/116
2	FILER NAME Leach, Jeff C	c. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067738
4	Date 06/28/2025	 Full name of contributor		7	Amount of Contribution (\$) \$500.00
_	District	Allen, TX 75013	O Familia de (Osa la destructione		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 06/26/2025	Contributor address; City; State; Zip Code		•	Amount of Contribution (\$) \$500.00
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)	
	•	,		,	
	Date 06/30/2025	Full name of contributor)	•	Amount of Contribution (\$) \$2,000.00
		Houston, TX 77002			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701)	•	Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$245,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE		
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/116		
2	FILER NAME Leach, Jeff (C. (The Honorable)		3	Filer ID (Ethics Commission 00067738	on Filers)
4	Date 06/30/2025	 Full name of contributor	7	Amount of Contribution (\$)	\$5,000.00	
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Association PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
				,		
	Date 06/27/2025	Full name of contributor)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_Valero PAC Contributor address; City; State; Zip Code San Antonio, TX 78269			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/116		
2	FILER NAME Leach, Jeff (C. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067738	
4	Date 06/27/2025	5 Full name of contributor out-of-state PAC (ID#:_ Van Ooteghem, Patrick 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$) \$500.00)	
_		Dallas, TX 75225				_
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_Vaughn, J Thomas Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00)
	Principal occu	Bellaire, TX 77401 pation / Job title (See Instructions)	Employer (See Instructions)		_
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$) \$10,000.00	-,
	Principal occu	Frisco, TX 75034 pation / Job title (See Instructions)	Employer (See Instructions) retired)		_
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard Contributor address; City; State; Zip Code Houston, TX 77027			Amount of Contribution (\$) \$2,500.00	-
	Principal occu Real Estate	pation / Job title (See Instructions) Developer	Employer (See Instructions) Self)		_
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$) \$2,500.00)
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
						-

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1	
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/116	
2	FILER NAME Leach, Jeff (C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067738	
4	Date 06/23/2025	 Full name of contributor	7 Amount of Contribution (\$) \$100.00	
		Allen, TX 75013		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 16/116 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Leach, Jeff C. (The Honorable) 00067738 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/25/2025 Second Floor Strategies \$380.00 Campaign event email 7 Contributor address; City; State; Zip Code distribution Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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: 1/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	01/07/2025	7-Eleven - Allen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.69	1004 W McDermott
		Allen, TX 75013
8	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
		Campaign/officeholder fuel charge
		Campaign om control of the strange
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	06/23/2025	7-Eleven - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.06	1004 W McDermott
		Allen, TX 75013
	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
		Campaign/officeholder fuel charge
		Campaign/ointerrolater that ge
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	5 .	
	Date	Payee name
	06/30/2025	7-Eleven - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.45	1004 W McDermott
		Allen, TX 75013
	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.
	LAFENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	

SCHEDULE F1

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

	dit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1 Tota	l pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4 Date	:	5 Payee name		<u> </u>
04/1	.5/2025	7-Eleven - Austin		
6 Amo	unt (\$)	7 Payee address; City; State; Zip Co	ode	
	\$20.21	917 N Lamar Blvd		
		Austin, TX 78703		
8 F	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EVI	OF PENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
LAI	FLNDITORL			Check if Austin, TX, officeholder living expense
				Campaign/officeholder fuel charge
			<u> </u>	25.
	plete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held
Date		Payee name		
05/2	27/2025	7-Eleven - Austin		
Amo	unt (\$)	Payee address; City; State; Zip Co	ode	
	\$64.70	917 N Lamar Blvd		
		Austin, TX 78703		
F	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
FXI	OF PENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
LA	ENDITORE			Check if Austin, TX, officeholder living expense
				Campaign/officeholder fuel charge
Com	ploto ONII V if direct	Condidate/Officeholder name Office co.	ıabt	Office hold
	plete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sou	ıgnı	Office held
Date		Payee name		
	.8/2025	7-Eleven - Hillsboro		
Amo	unt (\$)	Payee address; City; State; Zip Co	ode	
	\$72.38	1500 Corsicana Hwy		
		Hillsboro, TX 76445		
F	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXI	OF PENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
				Campaign/onicendider luer charge
Com	nlete ONI V if direct	Candidate/Officeholder name Office sou	lap+	Office held
	plete <u>ONLY</u> if direct enditure to benefit C/O		agril	Office field

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	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: 3/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	01/03/2025	AT&T Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.00	208 S Akard St
		Suite 2954
		Dallas, TX 75202
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/officeholder cell phone and internet
		Campaign/officeriolder dell priorie and internet
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	01/21/2025	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$671.09	208 S Akard St
		Suite 2954
		Dallas, TX 75202
	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/officeholder living expense Campaign/officeholder cell and internet charges
		Campaign/onicenduel cell and internet charges
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/31/2025	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	208 S Akard St
		Suite 2954
		Dallas, TX 75202
	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
		Campaign/officeholder cell and internet charges
-	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

	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: 4/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/19/2025	AT&T Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$542.04	208 S Akard St
		Suite 2954
		Dallas, TX 75202
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
		Campaign/officeholder cell phone & internet
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/03/2025	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	208 S Akard St
		Suite 2954
		Dallas, TX 75202
	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/officeholder cell phone & internet
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	03/18/2025	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$547.52	208 S Akard St
	φο-11.02	Suite 2954
		Dallas, TX 75202
	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/officeholder cell phone and internet
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONET II direct	
	expenditure to benefit C/OI	H
		H
		н

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Git/Awards/Memorials Legal Services The Instruction Gu		-	ges/	Contract Labor		OTHER (enter a	strict a category not listed above)
1	Total pages Schedule F1:	12			•		•		3	Filer ID	(Ethics Commission Filers)
		ı			LI_)				3		(Lunca Commission Filera)
	Sch: 5/100 Rpt:		Leacn, Jeπ (C. (The Honora	bie)					00067738	
4	Date	5	Payee name								
	03/31/2025		AT&T Inc								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Code					
١	` '	ı	•		State, Zip	Cour	C				
	\$120.00	1	208 S Akard	151							
			Suite 2954								
			Dallas, TX 7	5202							
8	PURPOSE	(a)	Category (so	o Catogorios listod at th	ne top of this schedule)	(k	b)	Description			
	OF			nead/Rental Exp		`	ĺ	_ :	outsi	de of Texas. Con	nplete Schedule T.
	EXPENDITURE		Onice Oven	icaantentai Exp	501130		İ	Check if Austin,	TX,	officeholder living	g expense
							7	 Campaign/off	ice	holder cell ¡	ohone and internet
9	Complete ONLY if direct		andidate/Offic	ceholder name	Office	sough	ht			Office h	eld
	expenditure to benefit C/O	Н									
	Date		Payee name								
	05/02/2025		AT&T Inc								
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code	e				
	\$120.00		208 S Akard	LSt							
	+==0.00	1	Suite 2954								
		1									
			Dallas, TX 7	5202							
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(k	b)	Description			
	OF EXPENDITURE		Office Overh	nead/Rental Exp	oense		[=			nplete Schedule T.
	EXI ENDITORE						I			officeholder living	
								Campaign/off	ice	holder cell	ohone and internet
	Complete ONLY if direct		andidate/Offic	ceholder name	Office	sough	ht			Office h	eld
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	05/19/2025		AT&T Inc								
				City ii	Chahai Zin	Cade					
	Amount (\$)	ı	Payee addres	•	State; Zip	Code	е				
	\$547.52		208 S Akard	St							
			Suite 2954								
			Dallas, TX 7	5202							
	PURPOSE	(a)	Category (so	a Catagoriae lietad at th	ne top of this schedule)	a	b)	Description			
	OF			e categories listed at ti nead/Rental Exp			٠,		outsi	de of Texas. Con	nplete Schedule T.
	EXPENDITURE		Office Overr	icaa/rteritai Exp	Jense		i	Check if Austin,	, TX,	officeholder living	g expense
								 Campaign/off	ice	holder cell ¡	ohone and internet
\vdash	Complete ONLY if direct		 Candidate/Offic	ceholder name	Office	sough	ht			Office h	eld
	expenditure to benefit C/O				200	~g					
_											

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

	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: 6/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	06/02/2025	AT&T Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.00	208 S Akard St
		Suite 2954
		Dallas, TX 75202
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
		Campaign/officeholder cell phone and internet
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/20/2025	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$547.52	208 S Akard St
		Suite 2954
		Dallas, TX 75202
	DUDDOCE	
	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
		Campaign/officeholder cell phone and internet
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/09/2025	Allen Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$442.00	210 W. McDermott
	φ442.00	210 W. MicDefffiold
		Allen, TX 75013
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder chamber membership fee
		Campaign/oincerioider chamber membership ice
	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 Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	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: 7/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		•
	04/28/2025	Aloft Austin		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$22.49	109 E 7th St		
		Austin, TX 78701		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Meeting to discuss Campaign/officeholder duties
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date	Payee name		
	01/09/2025	Amazon		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$123.30	410 Terry Ave N		
		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.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Office supplies for Capitol office
	Operation ONLY if allowed	Occasionate (Office Includes a control of the contr	1-4	Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	gnt	Office held
	Date	Payee name		
	01/13/2025	Amazon		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$64.88	410 Terry Ave N		
		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.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Office supplies for Capitol office
	Commission ONE V. C. P.	Condidate/Officeholder	a.l- ·	O.E 1-14
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ynt	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	
	01/22/2025	Amazon	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$37.43	410 Terry Ave N	
		Seattle, WA 98109	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE		n, TX, officeholder living expense
		Campaign/or	fficeholder office supplies
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	expericiture to benefit C/Oi		
	Date	Payee name	
	02/04/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$132.01	410 Terry Ave N	
		0 11 114 00400	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Cffice Overhead (Parted Five press)	outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overficad/Nertial Experise	n, TX, officeholder living expense
		Office suppli	es for Capitol office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/07/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$296.86	410 Terry Ave N	
		Seattle, WA 98109	
	BUBBOOF	·	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense
		Office suppli	es for Capitol office
	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

Event Expense Fees Food/Beverage 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: 9/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738	
4	Date 03/11/2025	5 Payee name Amazon	
6	Amount (\$) \$27.59	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office supplies for Capitol office	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/15/2025	Amazon	
	Amount (\$) \$216.49	Payee address; City; State; Zip Code 410 Terry Ave N 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 Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder office supplies	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 04/29/2025	Payee name Amazon	_
			_
	Amount (\$) \$37.86	Payee address; City; State; Zip Code 410 Terry Ave N	
		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 Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder office supplies	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	_
Г <u>о</u> -	rms provided by Toyas F	thics Commission was athics state ty us Version V4.1.0 f10d0f	10

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		t listed above)
1	Total pages Cabadula F1:		'ommission Eilara\
1	Total pages Schedule F1: Sch: 10/100 Rpt:	2 FILER NAME School (Ethics Control Leach, Jeff C. (The Honorable) 00067738	commission Filers)
4	Date	5 Payee name	
	05/06/2025	Amazon	
6	Amount (\$) \$28.13	7 Payee address; City; State; Zip Code 410 Terry Ave N	
		Seattle, WA 98109	
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 Schede	ule T.
		Campaign/officeholder office supplie	S
		Тамирандан эмге сарры	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
H	Date	Payee name	
	06/05/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$68.03		
	Ψ00.03	410 Telly NVC IV	
		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 Schedi	ule T.
		Campaign/officeholder office supplie	S
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	06/09/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$504.93	3 410 Terry Ave N	
		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 Schede	ule T.
		Campaign/officeholder office supplie	S
		Sampaig. a simos cappilo	-
	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 M 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 L	Bift/Awards/Memorials E Legal Services The Instruction Gui			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 Comm	ission Filers)
	Sch: 11/100 Rpt:	ı		C. (The Honorab	le)		_		3	00067738	(Luncs Confill	SSION I NEISJ
4	Date	5	Payee name									
	01/06/2025	_	Amazon									
6	Amount (\$) \$54.11	ı	Payee address 410 Terry Av	•	State;	Zip Co	de					
			Seattle, WA	98109								
8	PURPOSE	(a)	Category (See	Categories listed at the	e top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Office Overh	ead/Rental Exp	ense			<u> </u>			plete Schedule T.	
								_		officeholder living		
								Campaign/off	ice	nolaer office	e supplies	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Of	ffice souç	ght			Office he	eld	
	Date		Payee name									
	06/16/2025		Amazon									
	Amount (\$)		Payee address	s; City;	State;	Zip Cod	de					
	\$23.80		410 Terry Av	re N								
	,-5. 30											
		├	Seattle, WA			·						
	PURPOSE OF			e Categories listed at the		dule)	(b)	Description				
	EXPENDITURE		Office Overh	ead/Rental Exp	ense			—		de of Texas. Com officeholder living	plete Schedule T.	
								Campaign/off				
								Campaign/011	1100	noidel bille	Supplies	
_	Complete ONII V if direct	<u> </u>	Sandidate /Off: -	oboldor re		ffice assert	2b+			Office	ald.	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	еношег пате	O1	ffice souç	JII			Office he		
	Date	_	Payee name	<u>-</u>			_					
	04/07/2025		American Air	lines								
	Amount (\$)		Payee address	s; City;	State;	Zip Cod	de					
	\$86.00		4333 Amon (Carter Boulevard	dFort							
			Ft. Worth, T	< 76155								
	PURPOSE OF	ı	•	e Categories listed at the	e top of this sche	dule)	(b)	Description				
	EXPENDITURE		Fees					ш		de of Texas. Com officeholder living	plete Schedule T.	
								Campaign/off				
								Campaign/011	1100	noider airilli	C 1663	
	Complete ONII V if direct	\vdash	Sandidate /Off: -	oboldor re	-	ffice as:	2 b 4			Office	ald	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	enoluer name	Oi	ffice souç	JIII			Office he	eiù	

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Comm	nittee L	Sift/Awards/Memorials egal Services The Instruction G	•		ages/	Contract Labor		Travel Out of OTHER (en		rict ategory not listed above)
1	Total pages Schedule F1:	2 -							3	Filer ID		(Ethics Commission Filers)
_	Sch: 12/100 Rpt:	ı		C. (The Honora	ble)					0006773	38	(Earles Confinission Filets)
4	Date	5 P	Payee name									
	04/07/2025		American Aiı	lines								
6	Amount (\$) \$48.00	4	Payee addres: 1333 Amon (Ft. Worth, T)	Carter Bouleva		; Zip Cod	de					
8	PURPOSE	(a) C	Category (See	Categories listed at t	he top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE	ı	ees	<u> </u>		´		Check if travel	outsi	de of Texas.	Comp	lete Schedule T.
	EXPENDITURE							Check if Austin, Campaign/off				
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	eholder name	(Office souç	ght			Office	e hel	d
	Date	Р	Payee name									
	04/07/2025	Α	American Aiı	lines								
	Amount (\$)	P	Payee addres	s; City;	State	; Zip Co	de					
	\$19.00	4	1333 Amon (Carter Bouleva	rdFort							
	DUDDOOS	 	Ft. Worth, T	〈 76155		Т	/I->					
	PURPOSE OF	l	,	Categories listed at t	he top of this sch	nedule)	(a)	Description	outci	do of Toyas I	Comn	loto Schodulo T
	EXPENDITURE		ees					Check if travel of Check if Austin				lete Schedule T. expense
								Campaign/off				
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	eholder name	(Office sou	ght			Office	e hel	ld
	Date	P	Payee name									
	06/24/2025	A	Anasofia Me	xican Grill								
	Amount (\$)	l	Payee addres			; Zip Co	de					
	\$171.92	1	.328 W McD	ermott Dr # 26	60							
		Д	Allen, TX 750)13			_				_	
	PURPOSE	(a) C	Category (See	Categories listed at t	he top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE	F	ood/Bevera	ge Expense				ш				lete Schedule T.
								Check if Austin				expense n/officeholder duties
								meeting to dis	JUU	oo camp	,aigi	womocholder daties
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	eholder name	(Office sou	ght			Office	e hel	d

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 13/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	01/08/2025	Armor Coffee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.85	190 E Stacy Rd
		Allen, TX 75002
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 Campaign/officeholder duties
		mooning to allocate Campaign of the control of the
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	01/03/2025	Atkinson, Julie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	1508 Cool Springs Drive
		Allen, TX 75013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign staff wages
	Commission ONLL V if disposit	Condidate/Office helder notes Office accepts
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H
	<u> </u>	
	Date	Payee name
	01/31/2025	Atkinson, Julie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	1508 Cool Springs Drive
		Allen, TX 75013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign staff wages
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiulture to benefit C/Oi	

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 nages Schodulo F1:	
	Total pages Schedule F1: Sch: 14/100 Rpt:	Leach, Jeff C. (The Honorable) Continuous C
4	Date	5 Payee name
	03/04/2025	Atkinson, Julie (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
"	\$2,000.00	1508 Cool Springs Drive
	φ∠,000.00	1000 Cool Ohilido Dilac
		Allen, TX 75013
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign staff wages
_	Operation ONE V. V. P	Oversited to 100% and address oversity and the second to 100% and th
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/31/2025	Atkinson, Julie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	1508 Cool Springs Drive
		Allen, TX 75013
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign staff wages
		Sampaigh san Wagos
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
\vdash	Data	David and a second
	Date	Payee name
	05/02/2025	Atkinson, Julie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	1508 Cool Springs Drive
		Allen, TX 75013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFLINDITORE	Check if Austin, TX, officeholder living expense
		Campaign staff wages
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorale to belief C/Of	1

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		nmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Guid	xpense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Fil	ers)
L	Sch: 15/100 Rpt:	L	Leach, Jeff	C. (The Honorab	le)					00067738		
4	Date	5	Payee name									
	06/02/2025		Atkinson, Ju	ılie (Ms.)								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode					
	\$2,000.00		1508 Cool 9	Springs Drive								
			Allen, TX 75	5013								
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	ton of this sch	edule)	(b)	Description				
	OF	` `		ages/Contract Lat		cudic)		_ ·	outsio	de of Texas. Com	plete Schedule T.	
	EXPENDITURE							\Box		officeholder living	g expense	
								Campaign sta	aff v	wages		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	Office sou	ıght			Office he	eld	
	Date		Payee name									
	04/07/2025		Austin Airpo	ort Food & Bevera	age Court							
	Amount (\$)	\vdash	Payee addre	ss; City;	State;	Zip Co	ode					
	\$83.38		3600 Presid	lential Blvd	·	-						
			Austin, TX 7									
	PURPOSE OF	(a)		ee Categories listed at the	top of this sche	edule)	(b)	Description				
	EXPENDITURE		Food/Bever	age Expense				—		de of Texas. Com officeholder living	plete Schedule T.	
								Meal during C				
										, 5		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	Office sou	<u>I</u> ıght			Office ho	eld	
	experientale to beliefft C/Of											
	Date		Payee name									
L	04/28/2025		Austin Airpo	ort Food & Bevera	age Court		_		_			
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					
	\$77.94		3600 Presid	lential Blvd								
			Austin, TX 7	78719								
	PURPOSE	(a)	Category 194	ee Categories listed at the	top of this sch	edule)	(b)	Description				
	OF EXPENDITURE	Ĭ.,		age Expense		,		Check if travel of			plete Schedule T.	
	EXPENDITURE			- •						officeholder living		
								Meal during	С	ampaign/of	ficeholder travel	
							<u> </u>					
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	Office sou	ıght			Office h	eld	
	Superiorder to belieff 6/01											

SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food/
Contributions/ Donations Made By - Gift/A
Candidate/Officeholder/Political Committee Legal

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

ement Solicitation/Fundraising Expense

Pransportation 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 com	plet	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 16/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		
	03/21/2025	Austin Country Club		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$265.21	4408 Long Champ Dr		
		Austin, TX 78746		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
			١	Check if Austin, TX, officeholder living expense
				Event expense with campaign supporters
_	0 1: 0 1: 0			0" 111
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sough	ht	Office held
	Date	Payee name		
	03/24/2025	Austin Country Club		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$81.19	4408 Long Champ Dr		
		Austin, TX 78746		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Food/Beverage Expense	ļ	Check if travel outside of Texas. Complete Schedule T.
			ı	Check if Austin, TX, officeholder living expense Meeting to discuss Campaign/officeholder duties
				Meeting to discuss Campaign/onicenduel duties
H	Complete ONLY if direct	Candidate/Officeholder name Office sough	h+	Office held
	expenditure to benefit C/O	3	H	Office field
	Date	Payee name		
	04/28/2025	BOA Steakhouse Austin		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$397.59	300 W 6th Street		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Food/Beverage Expense	ļ	Check if travel outside of Texas. Complete Schedule T.
			J	Check if Austin, TX, officeholder living expense
				Meeting to discuss Campaign/officeholder duties
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht	Office held
	experialitate to betterit 6/01	<u> </u>		

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 (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	<u> </u>						
	Sch: 17/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738						
4	Date	5 Payee name						
	03/14/2025	Beacon Strategies						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$2,500.00	PO Box 1696						
		Liberty Hill, TX 78642						
8	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.						
	EXI ENDITORE	Check if Austin, TX, officeholder living expense						
		Campaign/officeholder consulting expense						
_	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						
	01/16/2025	Best Buy - Allen						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$323.65	190 E Stacy Rd #300						
		Allen, TX 75002						
	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/officeholder technology supplies						
		Campaign/oniceriolder technology supplies						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Data							
	Date 06/10/2025	Payee name Provin Molly						
		Brown, Molly						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$500.00	3292 N State Highway 289						
		Sherman, TX 75092						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Staff wages						
		otali magoo						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	y						

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal S	Legal Services Salaries/Wages/Contract Lab The Instruction Guide explains how to complete this form				· • • • • • • • • • • • • • • • • • • •			
_	Total mariae Cabadula F1.				proto timo torimi	1	Files ID	(Ethios Commission	Filoro)	
1	Total pages Schedule F1:		h - 11 1-)			3	Filer ID	(Ethics Commission	Filers)	
	Sch: 18/100 Rpt:	Leach, Jeff C. (T	ne Honorable)				00067738			
4	Date	5 Payee name								
	01/13/2025	Buc-ee's - Templ	e							
6	Amount (\$)	7 Payee address;	City; State;	Zip Code	 e					
	\$67.69	4155 N General I	Bruce Dr	•						
		Tomple TV 76E0	11							
		Temple, TX 7650								
8	PURPOSE OF		gories listed at the top of this sched	_{dule)} (I	b) Description					
	EXPENDITURE	Travel Out of Dis	trict		<u> </u>		ide of Texas. Com , officeholder living			
					Campaign/of					
					Campaignion	1100	inolaci laci c	narge		
_	0 1: 0 1: 0	0 111 (0" 1 1					0.00			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officehold	ier name Of	ffice sougl	nt		Office he	ela		
	Date	Payee name								
	01/15/2025	Buc-ee's - Templ	е							
	Amount (\$)	Payee address;	City; State;	Zip Cod	e					
	\$60.47	4155 N General I	Bruce Dr							
		Temple, TX 7650	11							
		•		1.						
	PURPOSE OF		gories listed at the top of this sched	_{dule)} (I	b) Description		:d4.T O	oleke Oekeedule T		
	EXPENDITURE	Travel Out of Dis	trict		=		ide of Texas. Com , officeholder living			
					Campaign/of					
					Gampang. # Gr			a. go		
	Complete ONLY if direct	Candidate/Officehold	dor namo Of	ffice sough	nt .		Office he	old.		
	expenditure to benefit C/OI		del fiame Of	nice sougi	it.		Office fie	au		
	Date	Payee name								
	01/17/2025	Buc-ee's - Templ	е							
	Amount (\$)	Payee address;	City; State;	Zip Cod	е					
	\$75.60	4155 N General I	Bruce Dr							
		Temple, TX 7650	1							
	PURPOSE			(b) Description					
	OF	Travel Out of Dis	pories listed at the top of this sched	dule)		outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE	Travel Out of Dis	uict				, officeholder living			
					Campaign/of	fice	holder fuel o	charge		
	Complete ONLY if direct	Candidate/Officehold	der name Of	ffice sough	nt		Office he	eld		
	expenditure to benefit C/OI			9.						

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

	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: 19/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/03/2025	Buc-ee's - Temple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$86.80	4155 N General Bruce Dr
		Temple, TX 76501
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.
		Campaign/officeholder living expense Campaign/officeholder fuel charge
		Sampaign/oiliceriolaer laer charge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	David and the second se
	Date	Payee name
	02/27/2025	Buc-ee's - Temple
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.18	4155 N General Bruce Dr
		Temple, TX 76501
	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
		Campaign/officeholder fuel charge
	Compulate ONLY if direct	Condidate/Officeholder name Office county
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/03/2025	Buc-ee's - Temple
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.88	4155 N General Bruce Dr
		Temple, TX 76501
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
_	Complete ONII V if allows:	Condidate/Officeholder name
	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

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		/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor					Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Cara r ayment		The Instruction Guide	e explains how to	o compl	ete this form.					
1	Total pages Schedule F1: Sch: 20/100 Rpt:	1	E C. (The Honorable	e)			3	Filer ID 00067738	(Ethics Commission Filers)		
4	Date	5 Payee name	<u> </u>				<u> </u>				
	03/17/2025	Buc-ee's -									
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip	Code						
	\$41.09	4155 N Ge	neral Bruce Dr								
		Temple, T									
8	PURPOSE OF		See Categories listed at the to	op of this schedule)	(b)	Description	o. ito	ide of Toyon Cor	unlata Cabadula T		
	EXPENDITURE	Travel Out	of District				n, TX	, officeholder livir			
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office	sought			Office h	eld		
	Date	Payee name									
	03/21/2025	Buc-ee's -	Temple								
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code						
	\$48.09	4155 N Ge	neral Bruce Dr								
		Temple, T	(76501								
	PURPOSE OF		See Categories listed at the to	op of this schedule)	(b)	Description					
	EXPENDITURE	Travel Out	of District					, officeholder livir	nplete Schedule T. a expense		
						Campaign/of					
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office	sought			Office h	eld		
	Date	Payee name	!								
	03/28/2025	Buc-ee's -	Temple								
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code						
	\$66.82	4155 N Ge	neral Bruce Dr								
		Temple, T	(76501								
	PURPOSE OF	· ·	See Categories listed at the to	op of this schedule)	(b)	Description		=			
	EXPENDITURE	Travel Out	of District					de of Texas. Cor , officeholder livir	nplete Schedule T. a expense		
						Campaign/of					
	Complete ONLY if direct		ïceholder name	Office	sought			Office h	eld		
	expenditure to benefit C/O	H 									
$\Gamma \sim 1$	rme provided by Tayas E	thine Commice	ion 14,0404	v othice state	tv uc	· · · · · · · · · · · · · · · · · · ·	_	·	Varsion V// 1 0 f10d0fd9		

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	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: 21/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	04/15/2025	Buc-ee's - Temple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.95	4155 N General Bruce Dr
		Temple, TX 76501
8	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
		Campaign/officeholder fuel charge
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
l	04/23/2025	Buc-ee's - Temple
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$87.13	
	Φ87.13	4155 N General Bruce Dr
		Temple, TX 76501
	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.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
L	0 1: 01:17.7.1	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held I
H	Date	Payso nama
	04/28/2025	Payee name Buc-ee's - Temple
L		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.19	4155 N General Bruce Dr
		Temple, TX 76501
\vdash	PURPOSE	
l	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.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		

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 r dyment	The Instruction Guide explains how to complete this form	1.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 22/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	
	05/12/2025	Buc-ee's - Temple	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$97.44	4155 N General Bruce Dr	
	!		
		Temple, TX 76501	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Traver out or District	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
	!	,	n/officeholder fuel charge
		l sampang	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	05/16/2025	Buc-ee's - Temple	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$75.67	4155 N General Bruce Dr	
	!		
	!	Temple, TX 76501	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Have out of District	travel outside of Texas. Complete Schedule T.
	!	,	Austin, TX, officeholder living expense In/officeholder fuel charge
		- Carripang	go
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	05/21/2025	Buc-ee's - Temple	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$86.39	4155 N General Bruce Dr	
		Temple, TX 76501	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n
	OF EXPENDITURE	Travel Out of District	travel outside of Texas. Complete Schedule T.
			Austin, TX, officeholder living expense In/officeholder fuel charge
		Campaig	Thomceriolder ider charge
	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 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 Cabadula F1:						
	Total pages Schedule F1:						
	Sch: 23/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738					
4	Date	5 Payee name					
	06/02/2025	Buc-ee's - Temple					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$39.88	4155 N General Bruce Dr					
		Temple, TX 76501					
Ļ	DUDD 0.05	· · · · · · · · · · · · · · · · · · ·					
8	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					
		Campaign/officeholder fuel charge					
6	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9	expenditure to benefit C/O						
L	-						
	Date	Payee name					
	06/03/2025	Buc-ee's - Temple					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$61.27	4155 N General Bruce Dr					
		Temple, TX 76501					
	DUDDOCE						
	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 travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Campaign/officeholder fuel charge					
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	o					
 	Data						
	Date	Payee name					
	01/06/2025	Canva					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$12.99	2 Lacey Street					
L		Surry Hills Surry Hills Australia					
	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/officeholder graphic design					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	experiulture to benefit C/On						

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	n.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 24/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	•
	02/05/2025	Canva	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.99	2 Lacey Street	
		Surry Hills Surry Hills Australia	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n
	OF EXPENDITURE	Advertising Expense	travel outside of Texas. Complete Schedule T.
			Austin, TX, officeholder living expense In/officeholder graphic design program
		Campaig	in onicendider graphic design program
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		Cilice field
⊨	Date	Davisa nama	
	03/05/2025	Payee name Canva	
_			
	Amount (\$) \$12.99	Payee address; City; State; Zip Code 2 Lacey Street	
	Ф12.99	2 Lacey Street	
		Commedia Commedia	
L		Surry Hills Surry Hills Australia	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if	n travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	Austin, TX, officeholder living expense
		Campaiç	n/officeholder graphic design program
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	04/07/2025	Canva	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$12.99	2 Lacey Street	
		Surry Hills Surry Hills Australia	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n
	OF EXPENDITURE	Advertising Expense	travel outside of Texas. Complete Schedule T.
			Austin, TX, officeholder living expense In/officeholder graphic design program
		Campaiç	monicendider graphic design program
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Cinco noid

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

	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: 25/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	05/06/2025	Canva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.99	2 Lacey Street
		Surry Hills Surry Hills Australia
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/officeholder graphic design program
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/05/2025	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.99	2 Lacey Street
		Surry Hills Surry Hills Australia
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder graphic design
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/14/2025	Capitol Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.22	1001 Congress Ave
	¥ .=.==	
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting to discuss Campaign/officeholder duties
	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/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: 26/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/28/2025	Capitol Gift Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$67.66	1400 Congress Ave
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for campaign supporters
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	06/02/2025	Capitol Gift Shop
H	Amount (\$)	Payee address; City; State; Zip Code
	\$67.66	1400 Congress Ave
	Φ07.00	1400 Congress Ave
		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.
		Check if Austin, TX, officeholder living expense Cards for legislators
		Calus for legislators
L	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	y
⊨	D :	
	Date	Payee name
	06/03/2025	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$67.66	1400 Congress Ave
		Austin, TX 78701
L	PURPOSE	
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Cards for staff
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H		

SCHEDULE F1

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

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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	06/24/2025	Carbone Dallas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$61.96	1617 Hi Line Drive
		Dallas, TX 75207
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 Campaign/officeholder duties
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit Gree	<u> </u>
	Date	Payee name
	04/08/2025	Cefco Belton
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.92	1600 I 35
		Belton, TX 76513
	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	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/OI	
	Date	Payee name
	03/03/2025	Chick Fil-A Temple
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.10	3303 S 31st St
		- 1
		Temple, TX 76502
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Food/Reverage 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
		Meal during Campaign/officeholder travel
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to belieff 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			Legal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed at	oove)
	Credit Card Payment			The Instruction G	uide explains h	now to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 28/100 Rpt:		Leach, Jeff (C. (The Honora	able)					00067738		
4	Date	5	Payee name									
	01/13/2025			#02992 Austin								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$46.02		503 W MLK	-		·						
			Austin, TX 7	8701								
8	PURPOSE	(2)					(h)	Description				
°	OF	(a)		e Categories listed at	the top of this sche	edule)	(D)	Description Check if travel of	nutsi	de of Texas Con	nplete Schedule T.	
	EXPENDITURE		roou/bever	age Expense				=		officeholder livin		
								Lunch for Cap	pito	ol office staf	f	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/17/2025		•	#02992 Austin								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$59.73		503 W MLK	-		·						
			Austin, TX 7	8701								
	PURPOSE	(2)				T	(h)	Description				
	OF	اس		e Categories listed at age Expense	the top of this sche	edule)	(5)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		roou/bever	age Expense				=		officeholder livin		
								Lunch for Cap	pito	ol office staf	f	
Complete ONLY if direct Candidate/Officeholder name Office sought							Office h	eld				
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/31/2025		Chick Fil-a #	#02992 Austin								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$63.36		503 W MLK									
			Austin, TX 7	8701								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	` `		age Expense	110 top 01 tillo 00110	, , , , , , , , , , , , , , , , , , , ,			outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE									officeholder livin		
								Lunch for Cap	pitc	ol office staf	f	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
	experiulture to periorit G/OTT											

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 (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: 29/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/07/2025	Chick Fil-a #02992 Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$71.38	503 W MLK
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Lunch for Capitol office staff
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/19/2025	Chick Fil-a #02992 Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.87	503 W MLK
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Lunch for Capitol office staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/09/2025	Chick Fil-a #02992 Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.14	503 W MLK
		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 Campaign/officeholder duties
		wiccumy to discuss Campaign/onicendider duties
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	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 complete this form.
1	Total pages Schedule F1: Sch: 30/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067738
4	Date 05/16/2025	5 Payee name Chick Fil-a #02992 Austin
6	Amount (\$) \$43.91	7 Payee address; City; State; Zip Code 503 W MLK
8	PURPOSE OF EXPENDITURE	Austin, TX 78701 (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 Lunch for Capitol office staff
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 05/27/2025	Payee name Chick Fil-a #02992 Austin
	Amount (\$) \$30.53	Payee address; City; State; Zip Code 503 W MLK 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 Campaign/officeholder duties
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 05/29/2025	Payee name Chick Fil-a #02992 Austin
	Amount (\$) \$7.95	Payee address; City; State; Zip Code 503 W MLK
		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 Campaign/officeholder duties
	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/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: 31/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738	
4	Date	5 Payee name	
	06/02/2025	Chick Fil-a #02992 Austin	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$26.45	503 W MLK	
		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	
		Lunch for staff	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
F	Date	Payee name	_
	05/01/2025	Chili's - Love Field	
Г	Amount (\$)	Payee address; City; State; Zip Code	_
	\$55.46	8008 Cedar Springs Rd	
		Dallas, TX 75235	
Г	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 Meal during Campaign/officeholder travel	
		modi danng dan pagnionidan datai	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
F	Date	Payee name	_
	01/15/2025	Chipotle	
Г	Amount (\$)	Payee address; City; State; Zip Code	_
	\$47.63	3408 Central Expy	
		Plano, TX 75074	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF 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 duties	
		mooung to discuss sampaign/omoonoids daties	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_
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 Salaries (Contract Labor,

Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1 Total pages Schedule F1:	•		3 Filer ID (Ethics Commission Filers)
Sch: 32/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4 Date	5 Payee name		
01/07/2025	Circle K Waco		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$27.02	901 S 5th St		
	Waco, TX 76706		
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.
EXI ENDITORE			Check if Austin, TX, officeholder living expense
			Campaign/officeholder fuel charge
• • • • • • • • • • • • • • • • • • • •		<u> </u>	000
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so	ught	Office held
Date	Payee name		
02/14/2025	Circle K Waco		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$68.75	901 S 5th St		
	Waco, TX 76706		
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.
LAI LINDITORE			Check if Austin, TX, officeholder living expense
			Campaign/officeholder fuel charge
Complete ONLY if direct	Condidate/Officeholder name Office co	uabt	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so OH	ugni	Office held
Date	Payee name		
03/26/2025	Cirkut Panoramic Photographs		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$429.00	P.O. Box 99		
	Hillsboro, WV 78768		
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/officeholder office supplies
			Campaign/onicenduel onice supplies
Complete ONLY if direct	Candidate/Officeholder name Office so	liapt	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/C		ugill	Office 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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 33/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/07/2025	Clown Around Party Rental
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$391.00	116 N Tennessee St
		Suite 200
		McKinney, TX 75069
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign/officeholder event expense
		Campaign/onicendider event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/31/2025	Collin College - Memorial Fund
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	3452 Spur 399 W
		McKinney, TX 75069
	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 Memorial contribution for in honor of constituent
		Wellerial contribution for in Heliot of constituent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/28/2025	Collin County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$833.33	2963 W. 15th Street
		Suite 2981
		Plano, TX 75075
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign/officeholder event fee
		Campaign/onicendider event lee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
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SCHEDULE F1

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction G			Vages	/Contract Labor		OTHER (enter a	strict a category not listed ab	ove)
┝	Total manage Cabadula F1.	_	FILER NAME						_	Files ID	(Ethias Commissi	ion Filoro)
ľ	, -				1.1.3				3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 34/100 Rpt:		Leach, Jeff	C. (The Honora	able)					00067738		
4	Date	5	Payee name									
	02/12/2025			nty Council of R	epublican W	/omen						
F	Amount (ft)	-					do					
ľ	Amount (\$)	 ′	Payee addre		State,	Zip Co	ue					
l	\$300.00		10300 Nort	h Central Expy								
l			#345									
l			Dallas, TX	75231								
8	PURPOSE	(2)					(h)	Description				
l°	OF	(a)		ee Categories listed at	the top of this sche	edule)	(u)	Description	otoi	do of Toyon Con	anlata Cahadula T	
l	EXPENDITURE		Event Expe	ense						of rexas. Con officeholder livin	nplete Schedule T.	
								—			y expense	
ı								Sponsorship	OI (eveni		
L												
9	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Η										
F	Date		Payee name									
	01/03/2025		Dallas Mori									
L		_			04-4	7:- 0-	-1-					
	Amount (\$)		Payee addre		State;	Zip Co	ae					
	\$32.51		1954 Comr	nerce St								
			Dallas, TX	75201								
⊢	DUDDOCE	(0)					(b)	<u> </u>				
l	PURPOSE OF	(a)		ee Categories listed at		edule)	(u)	Description	otoi	do of Toyon Con	anlata Cahadula T	
l	EXPENDITURE		Office Over	head/Rental Ex	pense			=		of rexas. Con officeholder livin	nplete Schedule T.	
l								ш			spaper subscrip	ation
								Campaignion	IICC	illoluel liew	spaper subscrip	Juon
L												
l	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght			Office h	eld	
l	expenditure to benefit C/OI	7										
Г	Date		Payee name									
	02/03/2025		Dallas Mori									
H		_			Ctata	7:n Co	ما م					
l	Amount (\$)		Payee addre	•	State;	Zip Co	ae					
l	\$32.51		1954 Comr	nerce St								
l			Dallas, TX	75201								
\vdash	PURPOSE	(a)		ee Categories listed at		!!\	(h)	Description				
l	OF	(۳)		ee Categories listed at head/Rental Ex		eaule)	(5)		outsi	de of Texas. Con	nplete Schedule T.	
l	EXPENDITURE		Office Over	neau/Reniai Ex	pense			브		officeholder livin	•	
l											spaper subscrip	otion
								- apaigi#011				
\vdash	Complete ON II V If allow	Ц	Open ali al - + - 10 "	in a la la la company		\ff:				Off: 1	ماما	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Jandidate/Off	iceholder name	C	Office sou	gnt			Office h	eid	
L		_										
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ı												

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 form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 35/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	
	03/03/2025	Dallas Morning News	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$32.51	1954 Commerce St	
		Dallas, TX 75201	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense ficeholder newspaper subscription
		Campaignion	modificaci newspaper subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		5.1135 116.13
_	Date	Payee name	
	01/28/2025	Dropbox	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$172.69	333 Brannan St,	
	41.2.00	ooo brannan oq	
		San Francisco, CA 94107	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overficad/Nertial Expense	, TX, officeholder living expense
		Campaign/of	ficeholder online storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	03/03/2025	Dropbox	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$172.69	333 Brannan St,	
		San Francisco, CA 94107	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overficad/Nerital Expense	outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense ficeholder online storage
		Campaignion	nceriolder offline storage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office ficial

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 co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 36/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738	
4 Date	5 Payee name			
03/31/2025	Dropbox			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$172.69	333 Brannan St,			
	San Francisco, CA 94107			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Office Overhead/Rental Expense		el outside of Texas. Com	plete Schedule T.
EXPENDITURE	·		tin, TX, officeholder living	
		Campaign/d	officeholder onlin	ie storage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ight	Office h	eld
Date	Payee name			
04/29/2025	Dropbox			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$172.69	333 Brannan St,			
	San Francisco, CA 94107			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		el outside of Texas. Com tin, TX, officeholder living	
			online storage	g expense
			g-	
Complete ONLY if direct	Candidate/Officeholder name Office sou	l ight	Office h	eld
expenditure to benefit C/O				
Date	Payee name			
05/29/2025	Dropbox			
Amount (\$)	Payee address; City; State; Zip Co	nde		
\$172.69	333 Brannan St,	,,,,		
72.2.00	333 2.3			
	San Francisco, CA 94107			
PURPOSE		(b) December		
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. Com	plete Schedule T.
EXPENDITURE	Office Overflead/Refital Expense		tin, TX, officeholder living	•
		Campaign/d	officeholder onlin	e storage
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office h	eld
expenditure to benefit C/O	н			

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	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: 37/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	06/30/2025	Dropbox
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$172.69	333 Brannan St,
		San Francisco, CA 94107
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/officeholder living expense Campaign/officeholder online storage
		Campaign/onicenduct online storage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payee name
	06/16/2025	EZ Stop Tyler
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	16151 State Hwy 31 W
		Tyler, TX 75709
	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
		Campaign/officeholder fuel charge
		Campaign om control don that go
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/07/2025	Easy Tiger
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.89	3508 S Lamar
	Ψ-0.03	5500 5 Eurita
		Austin, TX 78704
	PURPOSE	I
	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 Campaign/officeholder duties
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
1		

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: 38/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738			
4	Date	5 Payee name				
	06/25/2025	Eatzi's Plano				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$162.79	5967 W Parker Rd				
	l					
		Plano, TX 75093				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	1 cod/Beverage Expense	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense			
	I	I	to discuss Campaign/officeholder duties			
	l					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O					
_	Date	Payee name				
	05/02/2025	Eberly Austin				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$261.36	615 S. Lamar				
		010 5. 255.				
		Austin, TX 78704				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	1 000/Deverage Expense	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense			
	I	I — I — I — I	to discuss Campaign/officeholder duties			
	I					
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI	Н				
	Date	Payee name				
	06/30/2025	Eggleston, King, Davis LLP				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$51,634.20	102 Houston Ave				
	1	Suite 300				
	l	Weatherford, TX 76086				
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	, , ,	travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if A	Austin, TX, officeholder living expense			
	l	Campaig	gn/officeholder legal services			
	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 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: 39/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067738
4	Date 05/09/2025	5 Payee name El Tacorrido
6	Amount (\$) \$37.28	7 Payee address; City; State; Zip Code 1701 E Riverside
8	PURPOSE OF EXPENDITURE	Austin, TX 78741 (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 Lunch for Capitol office Staff
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/15/2025	Payee name Erben & Yarbrough
	Amount (\$) \$750.00	Payee address; City; State; Zip Code 807 Brazos Street Suite 402 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder legal services
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/21/2025	Payee name Erben & Yarbrough
	Amount (\$) \$900.00	Payee address; City; State; Zip Code 807 Brazos Street Suite 402 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder legal services
	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 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: 40/100 Rpt:	Leach, Jeff C. (The Honorable)
4	Date	5 Payee name
	04/04/2025	Erben & Yarbrough
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	807 Brazos Street
		Suite 402
		Austin, TX 78701
8	PURPOSE	
١	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder consulting fee
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/13/2025	Fedex - Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.60	327 Congress Ave #100
	Ψ24.00	GET Gongless 7 No 1/100
		Austin, TX 78701
	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/officeholder postage fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/05/2025	Fedex - Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.98	327 Congress Ave #100
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign/officeholder postage fee
_	0 1: 0:::::::::::::::::::::::::::::::::	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to benefit 0/01	•

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	mple	ete this form.
1	Total pages Schedule F1: Sch: 41/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067738
4	Date 03/06/2025	5 Payee name Fedex - Austin		·
6	Amount (\$) \$77.63	7 Payee address; City; State; Zip Co 327 Congress Ave #100 Austin, TX 78701	de	
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 Campaign/officeholder postage fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date 06/09/2025	Payee name Firestone		
	Amount (\$) \$310.05	Payee address; City; State; Zip Co 1330 W McDermott Drive Allen, TX 75013	de	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder vehicle expenses - apportioned
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date 01/14/2025	Payee name Fresa's		
	Amount (\$) \$155.34	Payee address; City; State; Zip Co 1703 1st St	de	
		Austin, TX 78704		
	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 Lunch for Capitol office staff
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 42/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4 Date	5 Payee name
03/18/2025	Friendly Rio Market
6 Amount (\$) \$36.77	7 Payee address; City; State; Zip Code 620 W 29th St
	Austin, TX 78705
8 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 Campaign/officeholder fuel charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/30/2025	Galaxy Cafe
Amount (\$) \$99.09	Payee address; City; State; Zip Code 1000 W Lynn Street
	Austin, TX 78703
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 Breakfast with staff
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/10/2025	HEB #425 Austin
Amount (\$) \$2.95	Payee address; City; State; Zip Code 1000 E. 41st Street
	Austin, TX 78751
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 Refreshments for Capitol 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)
ng Expense 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 (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete	• • • • • • • • • • • • • • • • • • • •
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)
	Sch: 43/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	•
	05/06/2025	HEB #425 Austin	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$141.09	1000 E. 41st Street	
		Austin, TX 78751	
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.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Refreshments for Capitol office
_	Occupation ONLY if allowed	Our lide to 10 ff and helder many	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	·		
	Date	Payee name	
	02/04/2025	Hill Country Springs	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.99	10019 S IH 35	
		Austin, TX 78747	
	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
			Water service for Capitol office
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
	<u> </u>		
	Date	Payee name	
	03/04/2025	Hill Country Springs	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$22.99	10019 S IH 35	
		Austin, TX 78747	
	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 Water service for Capitol office
			Tate. Service for Supitor Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Since Hold

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 (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to comple	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 44/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	1
	04/02/2025	Hill Country Springs	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$7.99	10019 S IH 35	
		Austin, TX 78747	
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.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Water service for Capitol office
_			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/02/2025	Hill Country Springs	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.99	10019 S IH 35	
		Austin, TX 78747	
	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.
	LAFENDITORE		Check if Austin, TX, officeholder living expense
			Water service for Capitol office
	Occupation ONLY if allowed	Out lide to 10 ff and half are a second	Office held
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/03/2025	Hill Country Springs	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$22.99	10019 S IH 35	
		Austin, TX 78747	
	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.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Water service for Capitol office
	Commission ONU V if allows	Condidate/Officeholder news	Office to 14
	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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 45/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		-
	03/07/2025	Home Depot		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$752.32	1200 Barbara Jordan Blvd		
		Austin, TX 78723		
8	PURPOSE		(h)	Description:
0	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overfleau/Refital Expense		Check if Austin, TX, officeholder living expense
				Office supplies for Capitol office
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	02/06/2025	Hopdoddy - Austin		
	Amount (\$)	Payee address; City; State; Zip Co	nde	
	\$37.94	1400 S. Congress Ave	ue	
	Ψ31.94	1400 S. Collyless Ave		
		Austin, TX 78704		
	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 duties
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/O		9	Cince noid
	Dete			
	Date 04/07/2025	Payee name		
		Hyatt Regency Seattle		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$282.82	808 Howell St		
		Seattle, WA 98101		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Campaign/officeholder loding for event
	Complete ONE V if allow -t	Condidate/Officeholder nema	ak+	Office hald
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt	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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	. •	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 46/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	01/13/2025	Il Brutto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$313.25	1601 6th Street
		Austin, TX 78702
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if the selection 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 Campaign/officeholder duties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/13/2025	Jewboy Burger
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.25	5111 Airport Blvd
		Austin, TX 78751
	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 Lunch for Capitol office staff
		Eunem for Capitor office stail
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	01/02/2025	Kroger #0568 - Allen - Fuel Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.70	1320 W McDermott Dr
	¥0 0	
		Allen, TX 75013
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign/officeholder fuel charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u>_</u>	experientare to beliefit G/OI	·

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

1 Total pages Schedule F1: Sch: 47/100 Rpt: Leach, Jeff C. (The Honorable) Leach, Jeff C. (Th		Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Sch: 47/100 Rpt: Leach, Jeff C. (The Honorable) 00067738 4 Date 04/09/2025 5 Payse name Kroger #0568 - Allen - Fuel Center 6 Amount (\$) 7 Payse address: City; State; Zip Code 1320 W McDermott Dr Allen, TX 75013 8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH Date 04/23/2025	1	Total names Schedule E1:	2 FILER NAME Scilar ID (Ethics Commission Filars)
Amount (\$) 7 Payee address: City; State; Zip Code	_	. •	
7 Payee address; City: State; Zip Code	4	Date	5 Payee name
\$74.85 1320 W McDermott Dr Allen, TX 75013 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Travel In District Candidate/Officeholder name Office sought Office held Payee name N/23/2025 Amount (\$) Payee address; City; State; Zip Code 1320 W McDermott Dr Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Travel In District Candidate/Officeholder name Office sought Office held			-
Complete ONLY if direct expenditure to benefit C/OH	6	` '	1320 W McDermott Dr
PURPOSE OF EXPENDITURE Candidate/Officeholder name	8		(a) Category (See Categories listed at the top of this schedule) (b) Description
Campaign/officeholder fuel charge Campaign/officeholder fuel charge			l ————————————————————————————————————
Date 04/23/2025 Amount (\$) Payee address; City; State; Zip Code 1320 W McDermott Dr Allen, TX 75013 PURPOSE OF EXPENDITURE Campiete ONLY if direct expenditure to benefit C/OH Payee address; City; State; Zip Code 1320 W McDermott Dr Allen, TX 75013 (a) Category (see Categories listed at the top of this schedule) Travel In District Campaign/officeholder fiving expense State; Zip Code 1320 W McDermott Dr Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if Austin, TX, officeholder living expense Stamps (b) Description Check if Austin, TX, officeholder living expense Stamps Complete QNLY if direct Candidate/Officeholder name Office Sought Office held		EAPENDITORE	
Amount (\$) Payee address; City; State; Zip Code	9		
Amount (\$)		Date	Payee name
### Septembriture ### Septembriture ### Septembriture ### Payee name		04/23/2025	Kroger #0568 - Allen - Fuel Center
Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge Complete ONLY if direct expenditure to benefit C/OH Date 03/04/2025 Amount (\$) Payee name Kroger #0568 - Allen Amount (\$) Payee address; City; State; Zip Code 1320 W McDermott Dr Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held		Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge Complete ONLY if direct expenditure to benefit C/OH Date O3/04/2025 Amount (\$) Payee name Kroger #0568 - Allen Payee address; City; State; Zip Code 1320 W McDermott Dr Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$65.69	1320 W McDermott Dr
Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel In District Travel In District Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel In District Travel In District Travel outside of Texas. Complete Schedule T. Travel In District Travel In Distri		DUDDOCE	
Complete ONLY if direct expenditure to benefit C/OH Date O3/04/2025 Payee name Kroger #0568 - Allen Amount (\$) Payee address; City; State; Zip Code \$14.97 1320 W McDermott Dr Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge Office sought Office held			
Complete ONLY if direct expenditure to benefit C/OH Date O3/04/2025 Payee name Kroger #0568 - Allen Amount (\$) Payee address; City; State; Zip Code 1320 W McDermott Dr Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense Campaign/officeholder fuel charge Office Sought Office held Office held			Traver in District
Complete ONLY if direct expenditure to benefit C/OH Date O3/04/2025			
Date 03/04/2025 Payee name			
Amount (\$) Payee address; City; State; Zip Code \$14.97 Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought Code State; Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps Office held			y
Amount (\$) Payee address; City; State; Zip Code \$14.97 Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Date	Payee name
\$14.97		03/04/2025	Kroger #0568 - Allen
Allen, TX 75013 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office Sought Office Sought Office held		Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps Office ONLY if direct Candidate/Officeholder name Office sought Office held		\$14.97	1320 W McDermott Dr
OF EXPENDITURE Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
EXPENDITURE Office Overnead/Rental Expense Check if Austin, TX, officeholder living expense Stamps Complete ONLY if direct Candidate/Officeholder name Office sought Office held			l
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Office Overhead/Nertal Expense

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/Officeholder/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: 48/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	05/27/2025	Kyle Morse CPA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$175.00	3841 Berkshire Lane
		Bedford, TX 76021
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder CPA services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/24/2025	La Madeleine - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.61	810 W McDermott Drive
		Allen, TX 75013
	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 Campaign/officeholder duties
		modality to disouse stampaign removal addiso
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/08/2025	Lisa Woods Photography
	Amount (\$)	Payee address; City; State; Zip Code
	\$405.94	1306 E Cesar Chavez
		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 Schedule T.
	-	Check if Austin, TX, officeholder living expense Campaign/officeholder pictures
		Campaign/oniceriolder pictures
	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

	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: 49/100 Rpt:	Leach, Jeff C. (The Honorable)
4	Date	5 Payee name
	05/30/2025	Lisa Woods Photography
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$405.94	1306 E Cesar Chavez
		Austin, TX 78702
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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign pictures
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	oxperialitate to beliefit 6/01	•
	Date	Payee name
	02/06/2025	Love Field Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.00	8008 Herb Kelleher Way
		Dallas, TX 75235
	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
		Campaign/officeholder airport parking fee
		Campaign/omeendaer airport parking rec
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/16/2025	Love Field Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.00	8008 Herb Kelleher Way
		Dallas, TX 75235
	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.
		Campaign/officeholder airport parking
		Campaign/officeholder airport parking
	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	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: 50/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	06/27/2025	Love Field Parking
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$45.00	8008 Herb Kelleher Way
		Dallas, TX 75235
8	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
		Campaign/officeholder airport parking
		Campaign/officerrolder airport parking
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
L		
	Date	Payee name
	01/06/2025	Lowe's #01199 - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$342.57	1010 W McDermott Dr.
		Allen, TX 75013
	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/officeholder office supplies
		Campaign of the Cappillo
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Data	
	Date	Payee name
	01/27/2025	Lowe's #01199 - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$70.32	1010 W McDermott Dr.
L		Allen, TX 75013
	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/officeholder living expense Campaign/officeholder office supplies
		Campaign/onicenduel onice supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct 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 Commi

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.
1	Fotal pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 51/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4 [Date	5 Payee name
(01/07/2025	Lucy's Fried Chicken
6 /	Amount (\$) \$136.77	7 Payee address; City; State; Zip Code 2218 College
		Austin, TX 78704
8	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 Campaign/officeholder duties
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
[Date	Payee name
(06/02/2025	Mail Pro USA
,	Amount (\$) \$1,212.80	Payee address; City; State; Zip Code 2016 Randol Mill Suite 408 Arlington, TX 76011
	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 Congratulatory certificates for graduating seniors
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
[Date	Payee name
(01/13/2025	MailChimp
A	Amount (\$) \$106.60	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000
		Atlanta, GA 30308
	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 email service
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	L L 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 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/Politica Credit Card Payment	ll 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: 52/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/11/2025	MailChimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.60	675 Ponce de Leon Ave NE Suite 5000
		Atlanta, GA 30308
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 email service
		- Campaign on all oct vice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	03/11/2025	MailChimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.60	675 Ponce de Leon Ave NE Suite 5000
		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 email service
		Campaign email service
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	04/11/2025	MailChimp
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$106.60	675 Ponce de Leon Ave NE Suite 5000
	\$100.00	073 Police de Leon Ave NE Suite 3000
		Atlanta, GA 30308
H	PURPOSE	To.
	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	Check if Austin, TX, officeholder living expense
		Campaign email service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Salarie	s/Wage	es/Contract Labor		OTHER (enter a	category not listed above	e)
				The Instruction Gui	ide explains how to	comp	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission	Filers)
	Sch: 53/100 Rpt:		Leach, Jeff (C. (The Honorab	ole)				00067738		
4	Date	5	Payee name								
	05/12/2025		MailChimp								
6	Amount (\$)	7	Payee addres	s; City;	State; Zip (Code					
	\$106.60		675 Ponce o	le Leon Ave NE	Suite 5000						
			Atlanta, GA	30308							
8	PURPOSE	(a)				(b)) Description				
ľ	OF	(۳)	Advertising I	e Categories listed at the	e top of this schedule)	(2)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Advertising	_xperise			_		officeholder living		
							Campaign/of	fice	holder ema	il service	
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office s	ought	İ		Office h	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	06/11/2025		MailChimp								
	Amount (\$)		Payee addres	s; City;	State; Zip (Code					
	\$106.60		675 Ponce o	le Leon Ave NE	Suite 5000						
			Atlanta, GA	30308							
	PURPOSE	(a)		e Categories listed at the	a top of this caledula)	(b)) Description				
	OF	``	Advertising I		e top of this scriedule)	` '	_ `	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		, tare talening .				Check if Austin	ı, TX,	officeholder living	g expense	
							Campaign/of	fice	holder ema	il service	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Office s	ought	t		Office h	eld	
	experioralizate to beriefit C/Or	П									
	Date		Payee name								
	01/16/2025		Marriott								
	Amount (\$)		Payee addres	s; City;	State; Zip (Code					
	\$5,573.27		109 E 7th St	reet							
			Austin, TX 7	8701							
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this schedule)	(b)) Description				
	OF EXPENDITURE		Travel Out o		,			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE						_		officeholder living		
							Campaign/of	fice	holder lodg	ng	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Office s	ought	t		Office h	eld	
	experience to beliefft C/Of										

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 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: 54/100 Rpt:	Leach, Jeff C. (The Honorable)	
4	Date	5 Payee name	
	02/14/2025	Marriott	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$8,936.89	109 E 7th Street	
		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.	
	EXPENDITORE	X Check if Austin, TX, officeholder living expense	
		Campaign/officeholder lodging	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialitare to beliefit eroi		
	Date	Payee name	
	02/27/2025	Marriott	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,578.05	109 E 7th Street	
		Austin, TX 78701	
	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. X Check if Austin, TX, officeholder living expense	
		X Check if Austin, TX, officeholder living expense Campaign/officeholder lodging	
		Campaign/onicentiaer loaging	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	
	03/03/2025	Marriott	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$822.43	109 E 7th Street	
		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.	
		X Check if Austin, TX, officeholder living expense	
		Campaign/officeholder lodging	
_	Complete ONLY if direct	Candidate/Officeholder name Office county Office hold	
	Complete ONLY if direct expenditure 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Citi/Awards/Memorials in Legal Services The Instruction Gu		s/Wage	es/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Cabadula F1:	12						12	Filer ID	(Ethics Commission File	vro)
	Total pages Schedule F1:							3		(Ethics Commission File	:15)
	Sch: 55/100 Rpt:		Leach, Jeff (C. (The Honoral	ole)				00067738		
4	Date	5	Payee name								
	03/14/2025		Marriott								
_	Λ (Φ)	 -	Davis and disco	0.1	Otata: 7in (Sl -					
6	Amount (\$)	7	Payee addres	•	State; Zip (Joue					
	\$5,370.00		109 E 7th St	treet							
			Austin, TX 7	8701							
_	DUDDOCE	(-)				(6)					
8	PURPOSE OF	(a)		e Categories listed at th	e top of this schedule)	(a)	Description				
	EXPENDITURE		Travel Out o	of District			=			plete Schedule T.	
							X Check if Austin		officeholder living		
							Campaignion	IICE	noluel loug	ing	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ought			Office h	eld	
	expenditure to benefit C/OI	Н									
H	Date	Г	Payee name								
	03/24/2025		Marriott								
			Marriott								
	Amount (\$)		Payee addres	ss; City;	State; Zip (Code					
	\$884.20		109 E 7th St	treet							
			Austin, TX 7	8701							
		ļ.,				1					
	PURPOSE OF	(a)		e Categories listed at th	e top of this schedule)	(b)	Description				
	EXPENDITURE		Travel Out of	of District			=			plete Schedule T.	
							ш		officeholder living		
							Campaign/off	lice	noluer loug	ing	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ought			Office h	eld	
	expenditure to benefit C/OI	Н									
	Date	Π	Payee name								
	04/18/2025		Marriott								
	Amount (\$)		Payee addres		State; Zip (Code					
	\$5,000.00		109 E 7th St	treet							
			Austin, TX 7	8701							
	D. IDD 0.05	ļ.,				14.					
	PURPOSE OF	(a)		e Categories listed at th	e top of this schedule)	(b)	Description		d4.T O	unlasta Calbandula T	
	EXPENDITURE		Travel Out o	of District			ш		officeholder living	plete Schedule T.	
							Campaign/off				
							Campaign/01	iice	noluel loug	ing	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ought			Office h	eld	
	expenditure to benefit C/OI	Н									
1											

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)
	Sch: 56/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738	,
4	Date	5 Payee name	
	04/25/2025	Marriott	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5,000.00	109 E 7th Street	
		Austin, TX 78701	
8	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	X Check if Austin, TX, officeholder living expense	
		Campaign/officeholder lodging	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/Of		
	Date	Payee name	
	05/23/2025	Marriott	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,389.81	109 E 7th Street	
		Austin, TX 78701	
	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. X Check if Austin, TX, officeholder living expense	
		Campaign/officeholder lodging	
		Sampagiromocrioter loaging	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
F	Date	Payee name	
	05/27/2025	Marriott	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	109 E 7th Street	
	,=,==,==		
		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.	
		X Check if Austin, TX, officeholder living expense Campaign/officeholder lodging	
		Campaign/onicenduct loaging	
	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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 57/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		
	06/03/2025	Marriott		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$1,000.00	109 E 7th Street		
		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.
				Campaign/officeholder lodging
				Campaign/officeholder lodging
_	0 1: 0 1: 0			017
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	ght	Office held
	Date	Payee name		
	06/04/2025	McDonald's - Jarrell		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$11.89	11640 I-35 North		
		Jarrell, TX 76537		
	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 Meal during Campaign/officeholder travel
				ivical during Campaign/officeriolder traver
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/O		ynı	Office field
	Date	Payee name		
	04/03/2025	Microsoft Store		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$140.71	One Microsoft Way		
		Redmond, WA 98052		
	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/officeholder office suite
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	experialitate to betterit 6/01	·		

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: Sch: 58/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067738
4	Date 05/08/2025	5 Payee name Moller Promotional Products
6	Amount (\$) \$1,762.70	7 Payee address; City; State; Zip Code 711 N Carancahua Corpus Christi, TX 78401
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 Gifts for committee members
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/06/2025	Payee name Murdy Creative Co
	Amount (\$) \$268.06	Payee address; City; State; Zip Code 304 Ellison St Horicon, WI 53032
	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 Campaign/officeholder office supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 04/10/2025	Payee name New York Times
	Amount (\$) \$41.81	Payee address; City; State; Zip Code 620 8th Ave
		NewYork, NY 10018
	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 Campaign/officeholder newspaper subscription
	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 Co

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.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 59/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	06/26/2025	Noble Sandwich Co.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.58	4805 Burnet
		Austin, TX 78756
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 Campaign/officeholder duties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н
	Date	Payee name
	04/30/2025	North Italia
	Amount (\$)	Payee address; City; State; Zip Code
	\$81.99	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 Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss Campaign/officeholder duties
		Meeting to disouss earnpaign/omeendust duties
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/12/2025	P Terry S Burger S
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.13	515 Congress
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense Meeting to discuss Campaign/officeholder duties
		Meeting to discuss Campaign/onicenduel duties
_	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 Committ

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Lenal 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: 60/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	03/12/2025	Prosperity Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.00	321 East McDermott
		Allen, TX 75013
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder bank fees
		Sampaigi veriori del sami rece
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	05/16/2025	Prosperity Bank
H	Amount (\$)	Payee address; City; State; Zip Code
	\$3.00	321 East McDermott
		Allen, TX 75013
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign/officeholder bank fees
		Sampaigi veriori del sami rece
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	03/11/2025	Prosperity Bank
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	321 East McDermott
	φ-10.00	321 Edd MODelmod
		Allen, TX 75013
1	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign/officeholder bank fee
\vdash	Complete ONII V if alice -	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
$ldsymbol{f eta}$		

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: 61/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067738
4	Date 01/13/2025	5 Payee name Purple Sage Strategies	
6	Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 3002 Bryker Drive	
8	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense fficeholder social media consulting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 02/07/2025	Payee name Purple Sage Strategies	
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 3002 Bryker Drive Austin, TX 78703	
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense fficeholder social media consulting
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date 03/10/2025	Payee name Purple Sage Strategies	
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 3002 Bryker Drive	
		Austin, TX 78703	
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense fficeholder social media consulting
	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

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 Comm Credit Card Payment		nmittee	Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction (als Expense		kpens /ages	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	(Ethics Commission Filers)
	Sch: 62/100 Rpt:		Leach, Jeff	C. (The Honor	able)					00067738		
4	Date	5	Payee name						_			
	05/27/2025		Purple Sag	e Strategies								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$1,500.00		3002 Bryke	r Drive								
			Austin, TX	78703 ————								
8	PURPOSE OF	(a)		ee Categories listed a	t the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Consulting	Expense				_		de of Texas. Com officeholder living		
								Campaign/off				
								. -				
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	(Office sou	ght			Office he	eld	
	Date		Payee name									
	06/13/2025		•	e Strategies								
	Amount (\$)	T	Payee addre	ss; City;	State;	; Zip Co	de					
	\$1,500.00		3002 Bryke	r Drive								
			-									
			Austin, TX	78703					_			
	PURPOSE OF	(a)		ee Categories listed a	t the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Consulting	Expense						de of Texas. Com officeholder living		
								Campaign/off				
								1 9			3	
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	iceholder name	(Office sou	ght			Office he	eld	
	Date		Payee name									
	03/03/2025		QT - Allen									
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$14.97		802 W. McI	Dermott								
			Allen, TX 7	5013								
	PURPOSE	(a)	Category (S	ee Categories listed a	t the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Travel In Di	strict						de of Texas. Com		
								Campaign/off		officeholder living		
								Campaign/011		TOTAL TUEL	90	
	Complete ONLY if direct		Candidate/Offi	iceholder name	(Office sou	ght			Office he	eld	
	expenditure to benefit C/O					-	-					

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	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: 63/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	01/23/2025	Qi Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$809.44	835 W 6th St
		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 Campaign/officeholder duties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/03/2025	Quattro Gatti Ristorante
	Amount (\$)	Payee address; City; State; Zip Code
	\$176.11	908 Congress Ave
		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
		Lunch for staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	01/10/2025	Racetrac - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.17	840 W Exchange Pkwy
		Allen, TX 75013
	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.
		Campaign/officeholder living expense Campaign/officeholder fuel charge
		Sampaign officer officer charge
	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

	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: 64/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/10/2025	Racetrac - Allen
6	Amount (\$) \$87.72	7 Payee address; City; State; Zip Code 840 W Exchange Pkwy Allen, TX 75013
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	02/26/2025	Racetrac - Allen
	Amount (\$) \$64.58	Payee address; City; State; Zip Code 840 W Exchange Pkwy Allen, TX 75013
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/19/2025	Racetrac - Allen
	Amount (\$) \$74.25	Payee address; City; State; Zip Code 840 W Exchange Pkwy
		Allen, TX 75013
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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	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: 65/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4 Date	5 Payee name
05/19/2025	Racetrac - Allen
6 Amount (\$) \$30.72	7 Payee address; City; State; Zip Code 840 W Exchange Pkwy Allen, TX 75013
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 Campaign/officeholder fuel charge
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/10/2025	Racetrac - Allen
Amount (\$) \$76.26	Payee address; City; State; Zip Code 840 W Exchange Pkwy
	Allen, TX 75013
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/12/2025	Racetrac - Allen
Amount (\$) \$76.26	Payee address; City; State; Zip Code 840 W Exchange Pkwy
	Allen, TX 75013
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
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 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: 66/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067738
4 Date 06/16/2025	5 Payee name Racetrac - Allen
6 Amount (\$) \$39.63	7 Payee address; City; State; Zip Code 840 W Exchange Pkwy Allen, TX 75013
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 03/12/2025	Payee name Ramen Tatsu -Ya
Amount (\$) \$39.78	Payee address; City; State; Zip Code 1600 6th Street Austin, TX 78702
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 Campaign/officeholder duties
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 06/03/2025	Payee name Ramirez, Michael
Amount (\$) \$250.00	Payee address; City; State; Zip Code 110 Paseo Encinal
	San Antonio, TX 78212
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff wages
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
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 for	rm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 67/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	
	06/20/2025	Rick's Chophouse	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$110.11	107 N Kentucky St	
		McKinney, TX 75069	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion
	OF EXPENDITURE	I TOOG/Develage Expense	if travel outside of Texas. Complete Schedule T.
		,	if Austin, TX, officeholder living expense g to discuss Campaign/officeholder duties
		Westing	g to discuss Campaign/omeencider daties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		Cccc.u
_	Date	Payee name	
	03/20/2025	Roaring Fork	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$109.02	701 Congress Avenue	
	4100.02	To Losing toos / Worldo	
		Austin, TX 78701	
	PURPOSE	<u> </u>	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Descript Check	IOTI if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 000/Beverage Expense	if Austin, TX, officeholder living expense
		Meeting	g to discuss Campaign/officeholder duties
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	04/17/2025	Roaring Fork	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$211.96	701 Congress Avenue	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion
	OF EXPENDITURE	1 000/Develage Expense	if travel outside of Texas. Complete Schedule T.
			if Austin, TX, officeholder living expense g to discuss Campaign/officeholder duties
		Meeting	j to discuss Campaign/onicendider duties
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office Held

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

	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: 68/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	04/23/2025	Roaring Fork
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$81.29	701 Congress Avenue
		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 Campaign/officeholder duties
		Meeting to discuss Campaign/onicenduct duties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
⊨	Date	Daysa nama
		Payee name
	04/30/2025	Roaring Fork
	Amount (\$)	Payee address; City; State; Zip Code
	\$104.95	701 Congress Avenue
		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 Campaign/officeholder duties
		ivieeting to discuss Campaign/onicenduel duties
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Data	Davida dama
	Date 05/30/2025	Payee name Roaring Fork
		9
	Amount (\$)	Payee address; City; State; Zip Code
	\$357.64	701 Congress Avenue
		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 Campaign/officeholder duties
		incoming to discuss Campaign/onicentities
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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 comp	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 69/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		·
	01/13/2025	Royal Blue Grocery - Austin		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$166.11	609 Congress Ave		
		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 Refreshments for Capitol office
				Treffestiments for Suprior Since
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI			Cindo noid
-	Date	Payee name		
	04/30/2025	Royal Blue Grocery - Austin		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$67.50	609 Congress Ave	•	
	Ψ01.00	000 00.ng/0007/W0		
		Austin, TX 78701		
_	PURPOSE	T	n)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	ر. ا	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Toda/Bavarage Expense	j	Check if Austin, TX, officeholder living expense
				Refreshments for Capitol office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Date	Payee name		
	05/27/2025	Royal Blue Grocery - Austin		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$60.90	609 Congress Ave		
		Austin, TX 78701		
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	b)	Description
	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Refreshments for Capitol office
				·
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	4		
_				

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: 70/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067738
4	Date 05/22/2025	5 Payee name Rtic
6	Amount (\$) \$398.12	7 Payee address; City; State; Zip Code 3900 Peek Rd
		Katy, TX 77449
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 Gifts for staff
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/04/2025	Payee name Ruth's Chris Steakhouse - Austin
	Amount (\$) \$134.33	Payee address; City; State; Zip Code 107 W 6th Street
		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 Campaign/officeholder duties
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/16/2025	Payee name Scott, Charles
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 11209 Readvill Lane
		Austin, TX 78739
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff wages
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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 com	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 71/100 Rpt:	Leach, Jeff C. (The Honorable)		00067738
4	Date	5 Payee name		'
	02/24/2025	Second Bar + Kitchen - Austin Airport		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$192.63	3600 Presidential Blvd		
		Austin, TX 78719		
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.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Meal during Campaign/officeholder travel
Ļ	Complete ONLY if direct	Condidate (Office helder name	la 4	Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	nt	Office held
_				
	Date	Payee name		
	04/28/2025	Second Bar + Kitchen - Austin Airport	_	
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$101.19	3600 Presidential Blvd		
		Austin, TX 78719		
	PURPOSE OF	5 (cor canagement and to per a min concerns)	(b)	Description
	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Meal during Campaign/officeholder travel
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	01/27/2025	Shell Gasoline - Allen		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$63.90	301 S Federal		
		Allen, TX 75013		
	PURPOSE		(b)	Description
	OF	Travel In District	,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Campaign/officeholder fuel charge
L	0 1: 0:::::::::::::::::::::::::::::::::			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	nt	Office held
L				

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 72/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/03/2025	Shell Gasoline - Allen
6	Amount (\$) \$66.16	7 Payee address; City; State; Zip Code 301 S Federal
		Allen, TX 75013
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/17/2025	Shell Gasoline - Allen
	Amount (\$) \$68.38	Payee address; City; State; Zip Code 301 S Federal
		Allen, TX 75013
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 03/31/2025	Payee name Shell Gasoline - Allen
	Amount (\$) \$89.51	Payee address; City; State; Zip Code 301 S Federal
		Allen, TX 75013
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign/officeholder fuel charge
	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

1 Total pages Schedule F1:2 FILER NAME3 Filer ID(Ethics Commission of Schedule F1: Deach, Jeff C. (The Honorable)3 Filer ID00067738	on Filers)
Sch: 73/100 Rpt: Leach, Jeff C. (The Honorable) 00067738	,
4 Date 5 Payee name	
05/07/2025 Shell Gasoline - Allen	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$71.79 301 S Federal	
Allen, TX 75013	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Travel In District Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense	
Campaign/officeholder fuel charge	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
·	
Date Payee name	
01/24/2025 Shell Gasoline - Jarrell	
Amount (\$) Payee address; City; State; Zip Code	
\$96.48 11710 N I 35	
Jarrell, TX 76537	
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 Campaign/officeholder fuel charge	
Campaign/onicenduer der charge	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Days and Days an	
Date Payee name 01/30/2025 Shell Gasoline - Jarrell	
Amount (\$) Payee address; City; State; Zip Code	
\$97.71 11710 N I 35	
1	
Jarrell, TX 76537	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas Complete Schedule Texas C	
Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Campaign/officeholder fuel charge	
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

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

	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: 74/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/28/2025	Shell Gasoline - Jarrell
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.34	11710 N I 35
L		Jarrell, TX 76537
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
		Campaign/officeholder fuel charge
		Campaign/oincertoider ider charge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Davida marra
		Payee name
	05/13/2025	Shipley Do-Nuts
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.43	2113-A W Anderson Lane
		Austin, TX 78757
	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 Breakfast for Capitol office staff
		breaklast for Capitor office staff
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	D-4-	
	Date	Payee name
	03/31/2025	Southfork Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.63	3700 Hogge Dr
		Parker, TX 75002
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Refreshments during Campaign/officeholder event
		Refreshments during campaign/oincerioider event
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
1		
l		

SCHEDULE F1

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

Event Expense 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/Officenoider/Politica	The Instruction Guide explains how to com	plete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
	Sch: 75/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	1
	02/04/2025	Southwest Airlines	
6	Amount (\$)	7 Payee address; City; State; Zip Code	9
	\$5.60	2702 Love Field Dr	
		Dallas, TX 75235	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	-		Check if Austin, TX, officeholder living expense Campaign/officeholder airline fee
			Campaign/omeendaer anime rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
·	expenditure to benefit C/O		i. Oinde heid
_	Date	Payee name	
	03/10/2025	Southwest Airlines	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.46	2702 Love Field Dr	
	,		
		Dallas, TX 75235	
	PURPOSE		P) Description
	OF	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Campaign/officeholder airline charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held
	•		
	Date	Payee name	
	03/25/2025	Southwest Airlines	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$213.19	2702 Love Field Dr	
		Dallas, TX 75235	
	PURPOSE OF	, , ,	D) Description
	EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign/officeholder airline charge
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
	expenditure to benefit C/O	Н	

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 76/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	05/06/2025	Spec's - Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$56.92	4970 W Highway 290
		Austin, TX 78735
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
		Refreshments for Capitol office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/27/2025	Stag Provisions
	Amount (\$)	Payee address; City; State; Zip Code
	\$581.92	1423 S Congress
	4001.32	1-20 0 0011g1033
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for Legislators
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	н
	Date	Payee name
	06/24/2025	Starbucks #06321 - Allen
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.77	904 W McDermott
		Allen, TX 75013
	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 Campaign/officeholder duties
		weeting to discuss earnpaign/onicenoider duties
	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

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 Exp Legal Services The Instruction Guide	ense Printir Salari	-	se s/Contract Labor	Trav	el in District el Out of Dis ER (enter a	
1	Total pages Schedule F1:	2 FILER	NAME				3 File	r ID	(Ethics Commission Filers)
	Sch: 77/100 Rpt:	Leach	n, Jeff C. (The Honorable))			000	67738	
4	Date	5 Payee	name						
	03/12/2025	Starb	ucks - Austin						
6	Amount (\$)	7 Payee	address; City;	State; Zip	Code				
	\$30.04	600 C	Congress Ave - Ste G270						
		Austir	n, TX 78701						
8	PURPOSE	(a) Catego	Ory (See Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/	Beverage Expense			Check if travel of Check if Austin			plete Schedule T.
						ш			n/officeholder duties
						J == 5			
9	Complete ONLY if direct		ate/Officeholder name	Office	ought			Office he	eld
	expenditure to benefit C/OI	1							
Г	Date	Payee	name						
	03/13/2025	Starb	ucks - Austin						
	Amount (\$)	Payee	address; City;	State; Zip	Code				
	\$6.44	600 C	Congress Ave - Ste G270						
		Austir	ı, TX 78701						
	PURPOSE	(a) Catego	Ory (See Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/	Beverage Expense			Check if travel of Check if Austin			plete Schedule T.
						ш			n/officeholder duties
								- 18	,
\vdash	Complete ONLY if direct		ate/Officeholder name	Office	ought			Office he	eld
	expenditure to benefit C/OI	1							
F	Date	Payee	name						
	03/14/2025	Starb	ucks - Austin						
	Amount (\$)	Payee	address; City;	State; Zip	Code				
	\$16.62	600 C	congress Ave - Ste G270						
		Austir	ı, TX 78701						
	PURPOSE	(a) Catego	Ory (See Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/	Beverage Expense			Check if travel of Check if Austin			plete Schedule T.
									g expense gn/officeholder duties
								parg	, 5cooidoi dulloo
	Complete ONLY if direct	Candida	ate/Officeholder name	Office s	ought			Office he	eld
	expenditure to benefit C/O	1			-				

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	
1	Total pages Schedule F1:	
	Sch: 78/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	04/25/2025	Starbucks - Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.99	600 Congress Ave - Ste G270
		Austin, TX 78701
Ļ		
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 Campaign/officeholder duties
		mooning to allocate Campaign and action
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	06/23/2025	Stripe
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,329.44	510 Townsend St
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign online donation fees - June 23-June 30
		Campaign online donation lees - suite 25-suite 50
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	y
	Date	Payee name
	05/28/2025	Sunoco
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.92	5960 Dallas Parkway
	Ψ10.0L	· · · · · · · · · · · · · · · · · · ·
		Plano, TX 75093
	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
		Campaign/officeholder fuel charge
_	Operation ONE VIII II	Open Hights (Office health a group of the seconds)
	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

	Credit Card Payment	The Instruction Guide explains how to complete this form	i.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 79/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	-
l	06/27/2025	Sunoco	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$79.08	5960 Dallas Parkway	
		Plano, TX 75093	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descriptio	n
	OF EXPENDITURE	Travel In District	travel outside of Texas. Complete Schedule T.
	EXPENDITURE	,	Austin, TX, officeholder living expense
l		Campaig	n/officeholder fuel charge
Ļ	0 1: 0 1: 0		0.00
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
┡		T	
	Date	Payee name	
L	04/24/2025	Sushi Junai	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$106.54	315 Congress Ave	
l			
L		Austin, TX 78701	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	EXPENDITURE	T T OOU/Develage Expense	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
l		,	to discuss Campaign/officeholder duties
l			, 3
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
l	expenditure to benefit C/OI	Н	
F	Date	Payee name	
l	01/02/2025	TD Auto	
H	Amount (\$)	Payee address; City; State; Zip Code	
l	\$15,000.00	PO Box 100295	
l			
l		Columbiz, SC 29202	
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descriptio	n
l	OF	, , ,	travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Expense Check if	Austin, TX, officeholder living expense
l		Venicle e	xpense - apportioned
\vdash	Complete ONLY !f allower	Condidate/Officeholder name	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	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		mmittee I	Legal Services			/ages	/Contract Labor		OTHER (enter a	strict a category not listed ab	ove)
				The Instruction Gu	ide explains ho	w to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 80/100 Rpt:		Leach, Jeff (C. (The Honorab	ole)					00067738		
4	Date	5	Payee name									
	03/27/2025		Take 5 Austi	in								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de					
	\$283.85		5400 Balcon	es Drive								
			Austin, TX 7	8731								
8	PURPOSE	⊢		e Categories listed at th	o top of this school	ulo)	(b)	Description				
	OF	``		on Equipment A		uie)	(- ,		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		Expense	on Equipmont 7	ara reolatoa			Check if Austin,	TX,	officeholder livin	g expense	
			•					Campaign/off	ice	holder vehi	cle expense -	
								apportioned				
9	Complete ONLY if direct		Candidate/Offic	eholder name	Off	fice sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
	Date		Payee name									
	01/10/2025		Target T000	2 - Austin								
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de					
	\$602.13		12901 N IH3	35, Suite 3-300								
			Austin, TX 7	8753								
	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this sched	ule)	(b)	Description				
	OF			age Expense		,		Check if travel of	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE							—		officeholder livin		
								Refreshments	s fo	or Capitol of	fice	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Off	fice sou	ght			Office h	eld	
	experialiture to beliefit C/OI											
	Date		Payee name									
	01/28/2025		Target T000	2 - Austin								
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de					
	\$54.07		12901 N IH3	35, Suite 3-300								
			Austin, TX 7	8753								
	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this sched	ule)	(b)	Description				
	OF EXPENDITURE			age Expense	•	ĺ		ш			nplete Schedule T.	
	EXPENDITORE							ш		officeholder livin		
								Refreshments	s fo	or Capitol of	fice	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	Off	fice sou	ght			Office h	eld	
L	experiorale to belieff C/Of	1										
		_							_			

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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 81/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/20/2025	Target T0002 - Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$331.85	12901 N IH35, Suite 3-300
		Austin, TX 78753
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
		Refreshments for Capitol office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	03/26/2025	Target T0002 - Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$587.77	12901 N IH35, Suite 3-300
	Ψ301.11	12301 W 11 103, Suite 3-000
		Austin, TX 78753
	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 Refreshments for Capitol office
		Kelleshillents for Capitor office
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date 04/24/2025	Payee name Torget T0002 Auctin
		Target T0002 - Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$313.89	12901 N IH35, Suite 3-300
		Austin, TX 78753
	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
		Refreshments for Capitol 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 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	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: 82/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	05/20/2025	Target T0002 - Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$135.57	12901 N IH35, Suite 3-300
		Austin, TX 78753
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 Refreshments for Capitol office
		The itestiments for explicit office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
\vdash	Date	Payee name
	06/02/2025	Target T0002 - Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$188.32	12901 N IH35, Suite 3-300
		Austin, TX 78753
	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 Gifts for committee members, legislators and staff
		Onto for committee members, registators and stair
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Davies same
	Date 01/22/2025	Payee name Targeted Mistan
		Targeted Victory
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,029.84	2311 Wilson Blvd
		Suite 200
		Arlington, VA 22201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Campaign/officeholder living expense Campaign/officeholder website maintenance and
		graphic design
	Complete ONLY if direct	
	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/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 83/100 Rpt:	2 FILER NAME Leach, Jeff C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067738
4 Date	5 Payee name
01/22/2025	Targeted Victory
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$243.60	2311 Wilson Blvd
	Suite 200
	Arlington, VA 22201
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 website maintenance and graphic design
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/22/2025	Targeted Victory
Amount (\$)	Payee address; City; State; Zip Code
\$818.49	2311 Wilson Blvd
	Suite 200
	Arlington, VA 22201
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
	Campaign website maintenance and graphic design
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/30/2025	Targeted Victory
Amount (\$)	Payee address; City; State; Zip Code
\$249.00	2311 Wilson Blvd
	Suite 200
	Arlington, VA 22201
PURPOSE OF	Arlington, VA 22201 (a) Category (See Categories listed at the top of this schedule) (b) Description
	Arlington, VA 22201
OF	Arlington, VA 22201 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Arlington, VA 22201 (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/officeholder website maintenance
OF	Arlington, VA 22201 (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/officeholder website maintenance Candidate/Officeholder name Office sought Office held
OF EXPENDITURE Complete ONLY if direct	Arlington, VA 22201 (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/officeholder website maintenance Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B 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: 84/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/28/2025	Targeted Victory
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$314.75	2311 Wilson Blvd
		Suite 200
		Arlington, VA 22201
8	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/officeholder website maintenance
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/18/2025	Targeted Victory
	Amount (\$)	Payee address; City; State; Zip Code
	\$249.00	2311 Wilson Blvd
		Suite 200
		Arlington, VA 22201
	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/officeholder website maintenance
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/18/2025	Targeted Victory
	Amount (\$)	Payee address; City; State; Zip Code
	\$224.84	2311 Wilson Blvd
		Suite 200
		Arlington, VA 22201
	DUDDOOF	
	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
		Campaign/officeholder website maintenance
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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		ittee Le	gal Services ne Instruction Gu	·		ages/	Contract Labor		OTHER (enter	a category not lis	ted above)
1	Total pages Cabadula F1:	2 5							_	Filor ID	(Ethios Com	mission Filors)
1	Total pages Schedule F1:	l		(The Henry	-1-1				3	Filer ID	(Ethics Con	mission Filers)
	Sch: 85/100 Rpt:	LE	eacn, Jeπ C.	(The Honoral	oie)					00067738		
4	Date	5 Pa	ayee name									
	06/25/2025	Ta	argeted Victo	ory								
6	Amount (\$)	7 Pa	ayee address;	City;	State:	Zip Cod	de					
•	\$249.00	l	311 Wilson E	-	Otato,	p 000						
	Ψ2-13.00			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
			uite 200									
		Ar	rlington, VA	22201								
8	PURPOSE	(a) Ca	ategory (See (Categories listed at th	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		dvertising Ex					Check if travel of	outsi	de of Texas. Cor	nplete Schedule	Т.
	LAFENDITORE							_		officeholder livin		
								Campaign we	ebs	ite mainten	ance	
9	Complete ONLY if direct		ndidate/Office	nolder name	С	Office soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date	Pa	ayee name									
	01/02/2025	Te	exans for Va	ccine Choice								
	Amount (\$)	Pa	ayee address;	City;	State;	Zip Cod	de					
	\$10,000.00	15	540 Keller Pa	arkway								
	. ,		uite 108 #16	•								
		N.	eller, TX 762	.46								
	PURPOSE	(a) Ca	ategory (See (Categories listed at th	e top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			Donations Ma				=			nplete Schedule	Γ.
		C	andidate/Off	iceholder/Poli	tical Comm	ittee		—		officeholder livin	g expense	
								Campaign do	IIIa	uon		
	0 1: 0:::::::::::::::::::::::::::::::::	<u> </u>	" I							055		
	Complete ONLY if direct expenditure to benefit C/OI		ndidate/Office	noider name	Ü	Office soug	ynı			Office h	eia	
	Date	Pa	ayee name									
	01/21/2025	Te	exas Dept of	Criminal Just	ice							
	Amount (\$)	Pa	ayee address;	City;	State;	Zip Cod	de					
	\$503.04	86	61-B Intersta	te 45 North								
		ا ا	untsville, TX	77220								
	PURPOSE OF			Categories listed at th		edule)	(b)	Description				_
	EXPENDITURE	0	ffice Overhe	ad/Rental Exp	ense			므		de of Texas. Cor , officeholder livin	nplete Schedule	1.
								Office decor f				
								Office decol 1	OI.	Capitol Offic		
	Complete ONLY if direct		ndidate/Office	aoldor nama		Office cours	nh+			Office h	old	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ndidate/Office	ioidei name	C	Office soug	JIIL			Office h	eiu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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: 86/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	03/14/2025	Texas Federation of Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$94.06	515 Capitol of Tx Hwy, Suite 133
		Austin, TX 78746
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Sponsorship of event
		Sponsoreinp of Grant
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/04/2025	Texas House GOP Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 13305
		Austin, TX 78711
	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 travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Gampaig. someonetae.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/16/2025	Texas House of Representatives
	Amount (\$)	Payee address; City; State; Zip Code
	\$204.00	PO Box 2910
		Austin, TX 78768
	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
		Officeholder account for meetings with Legislators
_	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 Cou

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/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: 87/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	06/02/2025	Texas House of Representatives
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.00	PO Box 2910
		Austin, TX 78768
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
		Officeholder account for meetings with Legislators
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	03/12/2025	Texas House of Representatives
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	PO Box 2910
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Officeholder account for meetings with Legislators
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/31/2025	Texas House of Representatives
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.51	PO Box 2910

		Austin, TX 78768
	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/officeholder office supplies
	Complete ONE Wife direct	Condidate Office helder name
	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 (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
_	Sch: 88/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/19/2025	Texas State Directory
-	Amount (\$)	7 Payee address; City; State; Zip Code
U	\$151.55	1800 Nueces St
	Ψ131.33	1000 Nueces St
		Austin TV 70701
		Austin, TX 78701
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
		Officeholder phone directory
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/16/2025	The Beerdrop
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.82	3600 Presidential Blvd
	φ33.02	3000 Presidential bivu
		Austin, TX 78719
	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
		Meal during Campaign/officeholder travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Dougo namo
	06/26/2025	Payee name The Beerdrop
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.73	3600 Presidential Blvd
		Austin, TX 78719
	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 Meal during Campaign/officeholder travel
		wear during Campaign/onicentiaer traver
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	•		Vages	/Contract Labor		OTHER (enter		t listed above)
		_		The Instruction G	uiue expiairis ric	OW to Co	mpie	ete tilis iorili.	_			
1	Total pages Schedule F1:	ı							3	Filer ID	(Ethics C	Commission Filers)
	Sch: 89/100 Rpt:		Leach, Jeff (C. (The Honora	ble)					00067738		
4	Date	5	Payee name									
	01/27/2025		The Hub Alle	en								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$94.35		1289 Johnso	on Road								
			Allen, TX 75	013								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	dule)	(b)	Description				
	OF EXPENDITURE			age Expense	•	,		Check if travel of	outsi	de of Texas. Co	mplete Schedi	ule T.
	EXPENDITURE							_		officeholder livir		
								Meeting to dis	scu	ss Campai	gn/officel	nolder duties
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	eld	
	experiorare to berieff C/Or	Н										
	Date		Payee name									
	01/03/2025		The Hunting	ton National Ba	ank							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$2,250.00		PO Box 182	519								
			Columbus, C	DH 43218								
	PURPOSE	(a)	Category (Se	e Categories listed at t	the top of this sched	dule)	(b)	Description				
	OF EXPENDITURE			on Equipment <i>i</i>	And Related			<u></u>		de of Texas. Co		ule T.
			Expense					ш		officeholder livir		
								Campaign/off apportioned	iice	nolaer ven	icie transį	portation -
								аррогионоа				
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	ield	
	·	_										
	Date	ı	Payee name									
	01/28/2025		Tiff's Treats	- Austin								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$47.34		1806 Nuece	es St								
			Austin, TX 7	8701								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	dule)	(b)	Description				
	OF EXPENDITURE			age Expense						de of Texas. Co		ule T.
	EXI ENDITORE							_		officeholder livir	ng expense	
								Birthday gift f	or o	constituent		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	eld	
	experience to beliefft C/Of	'										

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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 90/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	02/19/2025	Tiger Mart - Italy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$107.05	101 L R Campbell Rd
		Italy , TX 76651
8	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
		Campaign/officeholder fuel charge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	03/31/2025	Tiny's Milk & Cookies
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.05	1515 W 35th Street
		Building C
		Austin, TX 78703
	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
		Refreshments for Capitol office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/19/2025	Tiny's Milk & Cookies
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.57	1515 W 35th Street
		Building C
		Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if the polyment 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
		Refreshments for Capitol office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Con Credit Card Payment		/ - Il Committee	-					Travel in District Travel Out of District OTHER (enter a category not listed above)				
	Credit Card Payment		The Instruction Guide 6	explains how to co	omple	ete this form.						
1	Total pages Schedule F1: Sch: 91/100 Rpt:	l	E C. (The Honorable)				3	Filer ID 00067738	(Ethics Commission Filers)			
4	Date	5 Payee name					<u> </u>					
-	04/11/2025	Tom Thum										
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode							
	\$4.00	900 W McE Allen, TX 7										
_	DUDDOCE				(6)							
8	PURPOSE OF EXPENDITURE		ee Categories listed at the top head/Rental Expens		(0)		ı, TX,	, officeholder living				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		iceholder name	Office sou	ught			Office h	eld			
	Date	Payee name										
	06/02/2025	Total Wine	- Austin Research B	lvd								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode							
	\$643.59	10001 Res	earch Blvd									
		Suite 300										
		Austin, TX	78723									
	PURPOSE OF		ee Categories listed at the top		(b)	Description						
	EXPENDITURE	Gift/Awards	s/Memorials Expense	9				ide of Texas. Com , officeholder living	nplete Schedule T. Dexpense			
						ш			s, legislators and staff			
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	<u>l</u> ught			Office h	eld			
	Date	Payee name										
	06/10/2025	Tullis, John										
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode							
	\$250.00	2414 San (Sabriel St									
		Apt 108										
		Austin, TX	78705									
	PURPOSE OF EXPENDITURE		ee Categories listed at the top ages/Contract Labor		(b)	<u> </u>		ide of Texas. Com, officeholder living	nplete Schedule T. g expense			
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ught			Office h	eld			
	me provided by Tayas E	thios Commiss	00	othice state ty i	10	_			Version V// 1 0 f10d0fd9			

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	ete this form.
1		2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 92/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738
4	Date	5 Payee name	
	02/04/2025	Twin Liquors - Austin	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$70.10	1600 Lavaca St	
		Austin TV 70701	
Ļ		Austin, TX 78701	
8	PURPOSE OF	, ,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense
			Refreshments for Capitol office
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experialture to beriefft C/O	1	
	Date	Payee name	
	02/13/2025	Twin Liquors - Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.31	1600 Lavaca St	
		Austin, TX 78701	
	PURPOSE OF	, , ,	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Refreshments for Capitol office
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	04/10/2025	Twin Liquors - Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$34.94	1600 Lavaca 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
			Refreshments for Capitol office
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
l			

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			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 F	FILER NAME						3	Filer ID	(Ethics Commission Filers)	
	Sch: 93/100 Rpt:	1	Leach, Jeff	C. (The Honoral	ole)					00067738		
4	Date	5 F	Payee name						•			
	06/02/2025	ι	UPS Store A	Austin								
6	Amount (\$)	7 F	Payee addres	ss; City;	State;	; Zip Co	de					
	\$21.00	2	2407 S Con	gress								
		/	Austin, TX 7	'8704								
8	PURPOSE	(a) (Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exp				<u> </u>		de of Texas. Com		
								Campaign/off		officeholder living		
								Campaign/011		oidei post	ago onponoc	
9	Complete ONLY if direct	L Ca	andidate/Offic	ceholder name	C	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI								_			
	Date	F	Payee name									
	06/16/2025	(USPS									
	Amount (\$)	F	Payee addres	ss; City;	State;	; Zip Co	de					
	\$14.60	2	2901 W PAI	RKER RD								
		F	Plano, TX 7	5023								
	PURPOSE	(a) (Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE	(Office Overl	head/Rental Exp	ense			=		de of Texas. Comp		
								Campaign/off		officeholder living		
								Campaign/011	,,,,,	oidei post	.go .co	
	Complete ONLY if direct	L Ca	andidate/Offic	ceholder name		<u> </u>	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date	F	Payee name									
	02/04/2025	ι	Uber									
	Amount (\$)	F	Payee addres	ss; City;	State;	; Zip Co	de					
	\$29.47] 1	1455 Marke	t St #400								
		9	San Francis	sco, CA 94103								
	PURPOSE	(a) (Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE	1	Travel Out o	of District				ш		de of Texas. Comp		
								_		officeholder living	expense and transportation	
								-ampaign/on		groui	.a .anoportation	
	Complete ONLY if direct	Cá	andidate/Offic	ceholder name			ght			Office he	eld	
	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		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: 94/100 Rpt:	Leach, Jeff C. (The Honorable)	00067738			
4	Date	5 Payee name	•			
	02/06/2025	Uber				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
_	\$25.13	1455 Market St #400				
	420.20					
		Con Francisco CA 04102				
		San Francisco, CA 94103				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Traver out or District	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense			
			n/officeholder ground transportation			
		1,10	3			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
•	expenditure to benefit C/O		Office field			
_	Data					
	Date	Payee name				
	02/24/2025	Uber				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$160.59	1455 Market St #400				
		San Francisco, CA 94103				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Traver out or District	avel outside of Texas. Complete Schedule T.			
			ustin, TX, officeholder living expense n/officeholder ground transportation			
		Campaigi	noniceriolder ground transportation			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O		Office field			
	Date	Payee name				
	02/26/2025	Uber				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$40.76	1455 Market St #400				
		San Francisco, CA 94103				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel Out of District	avel outside of Texas. Complete Schedule T.			
	EXI ENDITORE		ustin, TX, officeholder living expense			
		Campaigr	n/officeholder ground transportation			
	0 1. 0		000			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held			
	S. portantare to borient 0/01					

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

Ca	ibutions/ Donations Made By andidate/Officeholder/Politica t Card Payment		
1 Total	pages Schedule F1:		s)
	ch: 95/100 Rpt:	Leach, Jeff C. (The Honorable) Continues to the least of the least	<i>3)</i>
4 Date		5 Payee name	
04/04	4/2025	Uber	
6 Amoւ	` '	7 Payee address; City; State; Zip Code	
	\$197.56	1455 Market St #400	
		San Francisco, CA 94103	
8 P	URPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXP	ENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Campaign/officeholder ground transportation	
		Campaign/onicenduel ground transportation	
0 0	Nata ONI V Station :	Condidate/Officeholder norse	
	olete <u>ONLY</u> if direct nditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
Date		Payee name	
04/04	4/2025	Uber	
Amou	ınt (\$)	Payee address; City; State; Zip Code	
	\$14.00	1455 Market St #400	
		San Francisco, CA 94103	
P	URPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXP	ENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign/officeholder ground transportation	
		Sampaign/oincertoider ground transportation	
Comp	olete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
	nditure to benefit C/O		
Date		Payee name	
04/07	7/2025	Uber	
Amou	ınt (\$)	Payee address; City; State; Zip Code	
	\$130.27	1455 Market St #400	
		San Francisco, CA 94103	
P	URPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXP	OF ENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Campaign/officeholder ground transportation	
		Campaign/onicenduel ground transportation	
Comr	olete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
	nditure to benefit C/O		

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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 96/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	04/07/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$132.71	1455 Market St #400
		San Francisco, CA 94103
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 Campaign/officeholder ground transportation
		Campaign/onicentide ground transportation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	04/28/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$171.24	1455 Market St #400
		San Francisco, CA 94103
	PURPOSE OF	(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 Campaign/officeholder ground transportation
		Campaign/onicended ground transportation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	05/01/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.69	1455 Market St #400
		San Francisco, CA 94103
	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 Campaign/officeholder ground transportation
		Campaign/onicenduel ground transportation
	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
	·	

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 Com Credit Card Payment			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:			,					Filer ID	(Ethics Commission Filers)			
	Sch: 97/100 Rpt:	Leach, Jeff	C. (The Honorable	e) 					00067738				
4	Date	5 Payee name											
	06/16/2025	Uber											
6	Amount (\$)	7 Payee addre		State;	Zip Cod	de							
	\$60.48	1455 Marke	et St #400										
		San Franci	sco, CA 94103										
8	PURPOSE	(a) Category (S	ee Categories listed at the	top of this sched	lule)	(b) D	Description						
	OF EXPENDITURE	Travel Out	of District			Ē	Check if travel o			nplete Schedule T.			
						L	_			g expense Ind transportation			
							I 9 3		2 2 3 3 3 3 4	I			
9	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Off	I fice soug	jht			Office h	eld			
H	Date	Payee name											
	06/16/2025	Uber											
	Amount (\$)	Payee addre	ess; City;	State;	Zip Cod	de							
	\$43.07	1455 Marke		Ť	·								
			sco, CA 94103										
	PURPOSE OF		ee Categories listed at the	top of this sched	lule)	(b) [Description	outoid	lo of Toyac Car	anlata Schadula T			
	EXPENDITURE	Travel Out	ot District			Ļ	Check if travel of Check if Austin,			nplete Schedule T. g expense			
						Ċ	_ Campaign/offi	icel	nolder grou	ınd transportation			
L													
	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Off	fice soug	jht			Office h	eld			
	Date	Payee name											
	06/26/2025	Uber											
	Amount (\$)	Payee addre	ess; City;	State;	Zip Cod	de							
	\$125.30	1455 Marke	et St #400										
		San Franci	sco, CA 94103										
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this sched	lule)	(b) [Description						
	OF EXPENDITURE	Travel Out				Ē				nplete Schedule T.			
						L	Check if Austin,			g expense Ind transportation			
								.501					
	Complete ONLY if direct	Candidate/Off	iceholder name	Off	fice soug	jht			Office h	eld			
	expenditure to benefit C/O				3	-							

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			Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	ense F	`	ense ges/Contract Labor	Travel in Distr Travel Out of OTHER (ente	
1	Total pages Schedule F1:	2 FILER NAI	ME				3 Filer ID	(Ethics Commission Filers)
	Sch: 98/100 Rpt:	Leach, Je	eff C. (The Honorable))			00067738	3
4	Date	5 Payee nan	ne				<u> </u>	
	01/08/2025	University	/ Со-Ор					
6	Amount (\$)	7 Payee add	lress; City;	State;	Zip Code)		
	\$382.78	2246 Gua	adelupe St					
		Austin, T	x 78705					
8	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedu	ule) (k	b) Description		
	OF EXPENDITURE		ds/Memorials Expens				outside of Texas. Co	·
						Check if Austin	n, TX, officeholder liv	ring expense
						UIIS IUI SIAII		
9	Complete ONLY if direct	Candidate/C	Officeholder name	Off	fice sough		Office	held
	expenditure to benefit C/OF	Η			Jouyi			
	Date	Payee nan						
L	02/28/2025	Velvet Ta						
	Amount (\$)	Payee add	•	State;	Zip Code	9		
	\$36.36	522 Cong	gress Ave					
		Austin, T	X 78701					
	PURPOSE OF		(See Categories listed at the to	p of this schedu	ule) (I	Description	_	
	EXPENDITURE	Food/Bev	verage Expense			<u> </u>	outside of Texas. Co n, TX, officeholder liv	· ·
						ш		aign/officeholder duties
						-	·	
	Complete ONLY if direct		Officeholder name	Off	fice sough	nt	Office	held
	expenditure to benefit C/OF	-						
	Date	Payee nan	ne					
	01/08/2025	Walmart -	- Allen					
	Amount (\$)	Payee add	lress; City;	State;	Zip Code	э		
	\$127.09	730 W Ex	change Pkwy					
		Allen, TX	75013					
	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedu	ule) (k	b) Description		
	OF EXPENDITURE		erhead/Rental Expen				outside of Texas. Co	
							n, TX, officeholder liv fficeholder offi	
						Campaign/01	moenoidei Ulli	ου σαμμίτου
	Complete ONLY if direct	Candidate/C	Officeholder name	Off	fice sough		Office	held
	expenditure to benefit C/Oh		Tario	311	se sougi	•	Scc	
								İ

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense 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

	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: 99/100 Rpt:	Leach, Jeff C. (The Honorable) 00067738
4	Date	5 Payee name
	06/11/2025	Walmart - Allen
6	Amount (\$) \$164.91	7 Payee address; City; State; Zip Code 730 W Exchange Pkwy Allen, TX 75013
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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense Campaign/officeholder office supplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	Walmart - Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.86	1030 Norwood Park Blvd
		Austin, TX 78753
	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	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for committee members, legislators and staff
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2025	Whole Foods
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.77	525 N Lamar Blvd
		Austin, TX 78703
	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 Refreshments for Capitol office
		Refresiments for Capitor 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

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		Legal Services The Instruction Guide	Salaries	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 100/100 Rpt:	Leach, Jeff	C. (The Honorable)					00067738	
4	Date	5 Payee name							
	05/12/2025	Whole Foo	ds						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode				
	\$241.35	525 N Lam	ar Blvd						
		Austin, TX	78703						
8	PURPOSE OF		ee Categories listed at the top	of this schedule)	(b)	Description			
	EXPENDITURE	Food/Beve	age Expense					de of Texas. Com officeholder living	plete Schedule T.
						Refreshments			
						r con commone	0 .0	, ouplior on	
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	<u>l</u> ught			Office he	eld
	expenditure to benefit C/O				9				
	Date	Payee name							
	01/24/2025	Winstead's	Funeral Home						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$215.40	500 Wildca	t Drive						
		Portland, T	X 78374						
	PURPOSE OF		ee Categories listed at the top		(b)	Description			
	EXPENDITURE	Gift/Awards	:/Memorials Expense	е		=		de of Texas. Com officeholder living	plete Schedule T.
						Flower arrang			
							<i>3</i> -		
\vdash	Complete ONLY if direct	Candidate/Off	ceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	Н							
	Date	Payee name		<u> </u>					
	04/10/2025	Zazzle							
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$17.07	1200 Ches	nut St						
		Menlo Park	, CA 94025						
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Over	head/Rental Expens	se					plete Schedule T.
						Campaign/off		officeholder living	
						Campaiyii/011	iice	noidel Unice	ε ουμμιίσο
\vdash	Complete ONLY if direct	Candidate/Off	ceholder name	Office so	<u>l</u> ught			Office he	eld
	expenditure to benefit C/OI				5				