FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084447 3 COMMITTEE NAME **OFFICE USE ONLY** Fair Shot Texas PAC Date Received **ELECTRONICALLY FILED** 07/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1106 Lavaca Suite 200 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Rick NAME NICKNAME LAST **SUFFIX** Levy STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1106 Lavaca St. Ste. 200 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1106 Lavaca St. Ste. 200 MAILING **ADDRESS** Austin, TX 78701 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 922-6506 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Fair Shot Texas PAC			00084447	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICAL (OTHER THAN PLE	IL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	525.77
	4. TOTAL POLITICA	L EXPENDITURES	\$	34,300.65
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	226,202.72
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			•	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Rio	ck Levy	
		Signature of Car	ກpaign Treasເ	irer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
		, t	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of office	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

			3 of 22		
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commission Filers)		
	Texas PAC	00084447	(1 11 11 11 11 11 11 11 11 11 11 11 11		
19 SCHEDUL NAME OF		SUBTOTAL AMOUNT			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	DR	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$		
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$ 500.00		
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$		
9.	SCHEDULE E: LOANS		\$		
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 33,072.27		
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 1,228.38		
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			SCHEDULE	C4
	The Instruction Guide explains how to complete this form.	1	Total pages Sch: 1/1 Rp	es Schedule C4: Rpt: 4/22	
2	FILER NAME Fair Shot Texas PAC	3	Filer ID 00084447	(Ethics Commission Filer	rs)
4	Date 5 Corporation / Labor Organization name 6 Texas AFL-CIO				500.00

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) 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: 1/15 Rpt: 5/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
01/06/2025	AFL-CIO Health and Welfare Fund
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,145.26	230 Lexington Green Circle
Expenditure from	Lexington, KY 40503
corporate funds	
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
	Health insurance
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/01/2025	AFL-CIO Health and Welfare Fund
Amount (\$)	Payee address; City; State; Zip Code
\$1,145.26	230 Lexington Green Circle
Expenditure from corporate funds	Lexington, KY 40503
•	
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
	Health insurance
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
01/09/2025	American Express
Amount (\$)	Payee address; City; State; Zip Code
\$244.66	200 Vesey St
Expenditure from corporate funds	New York, NY 10285
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit card payment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/15 Rpt: 6/22	Fair Shot Texas PAC	00084447
4 Date	5 Payee name	
05/09/2025	American Express	
6 Amount (\$)	7 Payee address; City; State; Zip Code	e
\$457.48	200 Vesey St	
- Evnanditura from		
Expenditure from corporate funds	New York, NY 10285	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Credit Card Payment	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit card payment
		Credit card payment
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI		it Office field
Date	Davis name	
06/09/2025	Payee name American Express	
	·	
Amount (\$)	Payee address; City; State; Zip Code	3
\$101.93	200 Vesey St	
Expenditure from corporate funds	New York, NY 10285	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Credit Card Payment	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card payment
		and polymonia
Complete ONLY if direct	Candidate/Officeholder name Office sough	ht Office held
expenditure to benefit C/OI		
Date	Payee name	
04/09/2025	American Express	
Amount (\$)	Payee address; City; State; Zip Code	e
\$88.45	200 Vesey St	
400.10		
Expenditure from corporate funds	New York, NY 10285	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Credit Card Payment	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card payment
		Credit dard payment
Complete ONLY if direct	Candidate/Officeholder name Office sough	ht Office held
expenditure to benefit C/OI	•	it Singe held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 3/15 Rpt: 7/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
03/08/2025	American Express
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$188.33	200 Vesey St
Expenditure from corporate funds	New York, NY 10285
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	Credit card payment
	Credit card payment
O Complete ONLY if alice -	Candidate/Officeholder name Office acusht
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/08/2025	American Express
Amount (\$)	Payee address; City; State; Zip Code
\$188.33	200 Vesey St
Expenditure from corporate funds	New York, NY 10285
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Credit card payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialiture to beliefit C/O	1
Date	Payee name
01/22/2025	Brady & Peavey
Amount (\$)	Payee address; City; State; Zip Code
\$875.00	Box 12715, Capitol Station
70.0.00	
X Expenditure from corporate funds	Austin, TX 78711
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Legal Services Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Legal retainer
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/15 Rpt: 8/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
03/06/2025	Brady & Peavey
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$875.00	Box 12715, Capitol Station
Expenditure from corporate funds	Austin, TX 78711
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Legal retainer
	Legal letaillei
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	
Date	Payee name
04/03/2025	Brady & Peavey
Amount (\$)	Payee address; City; State; Zip Code
\$875.00	Box 12715, Capitol Station
Expenditure from corporate funds	Austin, TX 78711
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Legal retainer
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/14/2025	Brady & Peavey
Amount (\$)	Payee address; City; State; Zip Code
\$875.00	Box 12715, Capitol Station
φοτο.00	Box 12/13, Capitol Station
Expenditure from	
corporate funds	Austin, TX 78711
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense Legal retainer
	Leyai letaillei
Complete CNII V if alia	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political 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		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	П
Sch: 5/15 Rpt: 9/22	Fair Shot Texas PAC 00084447	
4 Date	5 Payee name	
06/12/2025	Brady & Peavey	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$875.00	Box 12715, Capitol Station	
Expenditure from corporate funds	Austin, TX 78711	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Legal retainer	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	=
01/13/2025	Gutierrez, Sarah	
Amount (\$)	Payee address; City; State; Zip Code	_
\$1,000.00	401 Middle Creek Drive	
\$1,000.00	401 Middle Creek Drive	
X Expenditure from corporate funds	Buda, TX 78610	
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.	
LAFENDITORE	Check if Austin, TX, officeholder living expense	
	Operations consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	=
02/19/2025	Gutierrez, Sarah	
	·	_
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	401 Middle Creek Drive	
Expenditure from		
corporate funds	Buda, TX 78610	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Operations consulting	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	1	
		+

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

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		mmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 6/15 Rpt: 10/22		Fair Shot To	exas PAC						00084447		
4	Date	5	Payee name		<u></u>							
L	03/12/2025	L	Gutierrez, S	Sarah								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode					
	\$1,000.00		401 Middle	Creek Drive								
Х	Expenditure from corporate funds		Buda, TX 7	8610								
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Consulting	Expense				=			plete Schedule T.	
								—		officeholder living	g expense	
								Operations co	צווכ	uiuiig		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	0	Office sou	l Jaht			Office he	eld	
	expenditure to benefit C/O						gt			250 //		
	Date		Payee name									
	04/16/2025		Gutierrez, S	Sarah								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode					
	\$1,000.00		401 Middle	Creek Drive								
	- Formandiko er Conse											
Х	Expenditure from corporate funds		Buda, TX 7	8610								
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Consulting	Expense				—			plete Schedule T.	
								Operations co		officeholder living	j expense	
								Operations CC	20 וע	aiting		
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	C	Office sou	<u>I</u> ught			Office he	eld	
	Date		Payee name									
	05/13/2025		Gutierrez, S	Sarah								
	Amount (\$)		Payee addre		State;	Zip Co	ode					
	\$1,000.00		•	Creek Drive	•	•						
	·											
Χ	Expenditure from corporate funds		Buda, TX 7	8610								
	PURPOSE	(a)	Category (Si	ee Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Consulting	Expense							plete Schedule T.	
								Operations co		officeholder living	g expense	
								Operations CC	2112	uillig		
	Complete ONLY if direct	L	Candidate/Offi	ceholder name	<u> </u>	Office sou	l Jaht			Office he	eld	
	expenditure to benefit C/O				O	55 500	9111			Siliot III		

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/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/15 Rpt: 11/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
06/18/2025	Gutierrez, Sarah
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	401 Middle Creek Drive
X Expenditure from corporate funds	Buda, TX 78610
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.
	Check if Austin, TX, officeholder living expense
	Operations consulting
O Committee ONII V if discret	Our Hidde (Office helder grown
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
02/28/2025	Internal Revenue Service
Amount (\$)	Payee address; City; State; Zip Code
\$270.81	Po Box 409101
Expenditure from corporate funds	Ogden, UT 84409
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 Payroll taxes
	Fayron taxes
Commission ONII V if dispose	Condidate/Office holds
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2025	Internal Revenue Service
Amount (\$)	Payee address; City; State; Zip Code
\$270.81	Po Box 409101
Expenditure from corporate funds	Ogden, UT 84409
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 8/15 Rpt: 12/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
01/31/2025	Internal Revenue Service
6 Amount (\$) \$291.57	7 Payee address; City; State; Zip Code Po Box 409101
Expenditure from corporate funds	Ogden, UT 84409
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Payroll taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/15/2025	Internal Revenue Service
Amount (\$)	Payee address; City; State; Zip Code
\$292.05	Po Box 409101
Ψ202.00	TO BOX TOOLOT
Expenditure from corporate funds	Ogden, UT 84409
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
	Payroll taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/15/2025	Quickbooks
Amount (\$)	Payee address; City; State; Zip Code
\$8.53	2632 Marine Way
Expenditure from corporate funds	Mountain View, CA 94043
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.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	1099 processing fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/15 Rpt: 13/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
01/30/2025	Quickbooks
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$128.99	2632 Marine Way
Expenditure from	
corporate funds	Mountain View, CA 94043
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 Accounting software subscription
	Accounting software subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/03/2025	Quickbooks
Amount (\$)	Payee address; City; State; Zip Code
\$126.85	2632 Marine Way
Ψ120.00	2002 Maine Way
Expenditure from corporate funds	Mountain View, CA 94043
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 Accounting software subscription
	Accounting software subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/31/2025	Quickbooks
Amount (\$)	Payee address; City; State; Zip Code
\$122.59	2632 Marine Way
Ψ122.55	2002 Maine Way
Expenditure from corporate funds	Mountain View, CA 94043
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 Accounting software subscription
	Accounting Software Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking 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: 10/15 Rpt: 14/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
04/30/2025	Quickbooks
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$122.59	2632 Marine Way
Expenditure from corporate funds	Mountain View, CA 94043
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 Accounting software subscription
	Accounting software subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/30/2025	Quickbooks
Amount (\$)	Payee address; City; State; Zip Code
\$122.59	2632 Marine Way
Expenditure from corporate funds	Mountain View, CA 94043
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Accounting software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	
Date	Payee name
06/30/2025	Quickbooks
Amount (\$)	Payee address; City; State; Zip Code
\$122.59	2632 Marine Way
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Accounting software subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 11/15 Rpt: 15/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
01/15/2025	Texas Workforce Commission
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$90.27	101 E 15Th St
Expenditure from corporate funds	Austin, TX 78778
8 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 Payroll taxes
	rayioli laxes
O Complete ONEY'S	Condidate/Officeholder name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/31/2025	Texas Workforce Commission
Amount (\$)	Payee address; City; State; Zip Code
\$86.73	101 E 15Th St
Expenditure from corporate funds	Austin, TX 78778
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/14/2025	Texas Workforce Commission
Amount (\$)	Payee address; City; State; Zip Code
\$47.04	101 E 15Th St
Expenditure from	Austin, TX 78778
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll taxes
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

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: 12/15 Rpt: 16/22	Fair Shot Texas PAC 00084447						
•	L						
	5 Payee name						
02/10/2025	Waters, Katy						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$1,190.00	401 Little Texas Ln						
Expenditure from	Apt 1931						
corporate funds	Austin, TX 78745						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Salaries/Wages/Contract Labor						
LAFLINDITUKE	Check if Austin, TX, officeholder living expense						
	Retirement contribution						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
experialitie to beliefft C/OI	•						
Date	Payee name						
02/27/2025	Waters, Katy						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,190.00	401 Little Texas Ln						
	Apt 1931						
Expenditure from corporate funds	Austin, TX 78745						
PURPOSE							
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	Retirement contribution						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI	1						
Date	Payee name						
02/28/2025	Waters, Katy						
Amount (\$)	Payee address; City; State; Zip Code						
\$3,540.00	401 Little Texas Ln						
Ψ0,0-10.00							
Expenditure from	Apt 1931						
corporate funds	Austin, TX 78745						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Salaries/Wages/Contract Labor						
	Salary						
Complete <u>ONLY</u> 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 -

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

Printing Expense

Candidate/Officenoider/Politica	The Instruction Guide explains how to	o complete this form.								
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)								
Sch: 13/15 Rpt: 17/22	Fair Shot Texas PAC 00084447									
4 Date	5 Payee name									
02/14/2025	Waters, Katy									
6 Amount (\$)	7 Payee address; City; State; Zip	Code								
\$3,540.00	401 Little Texas Ln									
	Apt 1931									
Expenditure from corporate funds	Austin, TX 78745	·								
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 Salary								
		Salaly								
O Commission ONLY if dispose	Condidate/Officeholder regree	Office hold								
Complete ONLY if direct expenditure to benefit C/Ol		sought Office held								
Date	Payee name									
01/31/2025	Waters, Katy									
Amount (\$)	Payee address; City; State; Zip	Code								
\$3,540.00	401 Little Texas Ln									
	Apt 1931									
Expenditure from corporate funds	Austin, TX 78745									
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description								
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.								
EXPENDITURE	Check if Austin, TX, officeholder living expense									
	Salary									
Complete ONLY if direct		sought Office held								
expenditure to benefit C/O	7									
Date	Payee name									
01/15/2025	Waters, Katy									
Amount (\$)	Payee address; City; State; Zip	Code								
\$3,540.00	401 Little Texas Ln									
	Apt 1931									
Expenditure from corporate funds	Austin, TX 78745									
PURPOSE		(b) Description								
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.								
EXPENDITURE	Jaianes/wages/Johnnact Labor	Check if Austin, TX, officeholder living expense								
Salary										
Complete ONLY if direct		sought Office held								
expenditure to benefit C/O	1									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 14/15 Rpt: 18/22	2 FILER NAME Fair Shot Texas PAC 3 Filer ID (Ethics Commission Filers) 00084447						
4 Date 02/14/2025	5 Payee name Waters, Katy						
6 Amount (\$) \$93.10	7 Payee address; City; State; Zip Code 401 Little Texas Ln Apt 1931						
Expenditure from corporate funds	Austin, TX 78745						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage reimbursement						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date 03/03/2025	Payee name bill.com						
Amount (\$) \$59.14	Payee address; City; State; Zip Code 6220 America Center Dr Ste 100						
Expenditure from corporate funds	San Jose, CA 95002						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting software subscription						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date 03/31/2025	Payee name bill.com						
Amount (\$) \$59.68 Expenditure from corporate funds	Payee address; City; State; Zip Code 6220 America Center Dr Ste 100 San Jose, CA 95002						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting software subscription						
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 15/15 Rpt: 19/22	Fair Shot Texas PAC 00084447
4 Date	5 Payee name
04/29/2025	bill.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$59.14	6220 America Center Dr
	Ste 100
Expenditure from corporate funds	San Jose, CA 95002
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 Accounting software subscription
	Accounting software subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
05/29/2025	bill.com
Amount (\$)	Payee address; City; State; Zip Code
\$59.25	6220 America Center Dr
	Ste 100
Expenditure from corporate funds	San Jose, CA 95002
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 Accounting software subscription
	Accounting software subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
Sch: 1/3 Rpt: 20/22	Fair Shot Texas PA	AC .	00084447					
4 CREDIT CARD ISSUER		ncial institution n Express	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 362.52				
6 PAYMENT Expenditure from corporate funds	(a) Amount Charged \$61.40	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issue 04/09/2025	Paid				
7 PAYEE	(a) Payee name Google		(b) Payee address; 1600 Amphitheatre Pkwy Mountain View, CA 94043					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	cription						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	K, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
PAYMENT Expenditure from corporate funds	(a) Amount Charged \$53.72	(b) Date of Charge 04/01/2025	(c) Date(s) Credit Card Issue 05/09/2025	er Paid				
PAYEE	(a) Payee name Google		(b) Payee address; 1600 Amphitheatre Pkwy Mountain View, CA 9404;					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Google Workspace subscription					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought			Office held				
PAYMENT Expenditure from corporate funds	(a) Amount Charged \$107.45	(b) Date of Charge 01/01/2025	(c) Date(s) Credit Card Issue 02/08/2025	er Paid				
PAYEE	(a) Payee name Google		(b) Payee address; 1600 Amphitheatre Pkwy Mountain View, CA 9404					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	· · · · · · · · · · · · · · · · · · ·	(b) Description Google Workspace subso					
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held							

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
	Sch: 2/3 Rpt: 21/22	Fair Shot Texas PAC				00084447				
4	CREDIT CARD ISSUER		Name of financial institution See previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 362.52				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	Paid				
	Expenditure from corporate funds	\$71.80	02/01/2025	03/08/20)25					
7	PAYEE	(a) Payee name Google			nphitheatre Pkwy	City,	State,	Zip Code		
L					n View, CA 94043	}				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descri	ption Workspace subsc	ription				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expense				
9 e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issuer	⁻ Paid				
	Expenditure from corporate funds	\$49.89	05/01/2025	06/09/20)25					
	PAYEE (a) Payee name (b) Payee address;		City,	State,	Zip Code					
		Google		1600 Amphitheatre Pkwy						
L		Mountain View, CA 94043			B					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Google Workspace subscription						
					_					
L	Non-Political	` 1	of Texas. Complete Schedule T.	a aquabt	Check if Austin, TX,	, officeholder living expense Office held				
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	Paid				
	Expenditure from corporate funds	\$49.89	06/01/2025							
	PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip 1600 Amphitheatre Pkwy			Zip Code			
					Mountain View, CA 94043					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Descrip Google V	ption Workspace subsc	ription				
	Non-Political									
\vdash	Ш	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held								
_ ا	Complete ONLY if direct xpenditure to benefit C/OH	Sandidate/Officeriolder	name Office	Jougist		Omoc nelu				
F	,									

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete t	his form.	(* ** ** ******************************	,	,	
1 Total pages Schedule F4:	: 2 FILER NAME			3 Filer ID (Ethic	cs Commis	sion Filers)		
Sch: 3/3 Rpt: 22/22	Fair Shot Texas PAC			00084447				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$ 362.52			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid			
Expenditure from corporate funds	\$376.71	04/06/2025	05/09/202					
7 PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code	
	Wix		500 Terry	A Francois Blvd	i			
				cisco, CA 94158	i			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descrip		_			
X Political	Advertising Expense	or this scriedule)	Committe	e website hostin	g and developr	nent		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
Expenditure from corporate funds	\$95.00	06/24/2025						
PAYEE	PAYEE (a) Payee name (b) Payee address;				City,	State,	Zip Code	
	American Express		200 Vese	y St				
			New York	, NY 10285				
PURPOSE OF	(a) Category		(b) Descrip					
EXPENDITURE X Political	(See Categories listed at the top Fees	of this schedule)	Credit card membership fee					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								