FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069799 14 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Austin Reeve NAME Date Received **ELECTRONICALLY FILED** 07/10/2025 NICKNAME LAST **SUFFIX** Jackson CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Shawn NAME NICKNAME LAST **SUFFIX** Dunn **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (405) 830-4099 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 114 Smith

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	IAME Jackson, Austin Reeve (The Honorable) 14 Filer ID 00069799								
15 NOTICE FROM POLITICAL COMMITTEE(S)	committees to sup reholder's knowled otice of such expe	dge or							
Additional Pages	COMMITTEE TYPE COMMITTEE NAME								
	GENERAL								
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASUR	ER NAME						
		COMMITTEE CAMPAIGN TREASUR	ER ADDRESS						
16 CONTRIBUTION TOTALS	\$	0.00							
		ICAL CONTRIBUTIONS		\$	0.00				
EXPENDITURE	`	PLEDGES, LOANS, OR GUARANTEE IZED POLITICAL EXPENDITURES	:S OF LOANS)		0.00				
TOTALS	\$	0.00							
		ICAL EXPENDITURES		\$	9,540.05				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED A	S OF THE LAST DAY OF THE	\$	5,660.60				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING TING PERIOD	S LOANS AS OF THE LAST DAY	\$	1,500.00				
17 AFFIDAVIT									
		l swear, or affirm, u true and correct an under Title 15, Elec	under penalty of perjury, that the ac nd includes all information required ction Code.	companying repo to be reported by	ort is me				
		TI	he Honorable Austin Reeve Jac	ckson					
			Signature of Candidate or Officeho	older					
AFFIX NO	ΓARY STAMP / SEAL AB	OVE							
Sworn to and subso	cribed before me, by the s	aid	, this the	da	ay				
of	, 20, to c	ertify which, witness my hand and seal	of office.						
Cignoture of stee	or administaring and	Drinted name of officer administra-	aring ooth Title of efficien	or administrator -					
Signature of offic	er administering oath	Printed name of officer administe	ening datin Title of office	er administering o	auı				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 14						
18 FILER NA Jackson,	ME Austin Reeve (The Honorable)	19 Filer ID 00069799	(Ethics Commission Filers)						
	NAME OF SCHEDULE								
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$						
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$						
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 8,158.39						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$						
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 1,381.66						
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ	T.1	,
1	Total pages Schedule F1:	
	Sch: 1/5 Rpt: 4/14	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	04/16/2025	Austin Reeve Jackson
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	PO Box 5474
	•	
		Tyler, TX 75712
8	PURPOSE	
°	OF	(a) Category (See Categories listed at the top of this schedule) Loan Renayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Loan Repayment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Date	Power name
	01/10/2025	Payee name CAPITAL ONE
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$578.49	PO Box 60599
L		Industry, CA 91716
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Credit Card Payment
_	0 1: 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
L	02/11/2025	CAPITAL ONE
	Amount (\$)	Payee address; City; State; Zip Code
	\$401.70	PO Box 60599
		Industry, CA 91716
	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.
	EXPENDITURE	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/OI	

SCHEDULE F1

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

Event Expense Fees Foot/Beverage Expense Git/Award/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 2/5 Rpt: 5/14	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	03/11/2025	CAPITAL ONE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.79	PO Box 60599
		Industry, CA 91716
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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Payment
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/10/2025	CAPITAL ONE
	Amount (\$)	Payee address; City; State; Zip Code
	\$148.50	PO Box 60599
		Industry, CA 91716
	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.
	ZA ZADITORZ	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/OI	
	Data	
	Date 05/12/2025	Payee name
		CAPITAL ONE
	Amount (\$)	Payee address; City; State; Zip Code
	\$253.78	PO Box 60599
		Industry, CA 91716
	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
		Great Gara Laymont
	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 Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 3/5 Rpt: 6/14	2 FILER NAME Jackson, Austin Reeve (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069799
4	Date 06/10/2025	5 Payee name CAPITAL ONE
6	Amount (\$) \$268.13	7 Payee address; City; State; Zip Code PO Box 60599
8	PURPOSE OF EXPENDITURE	Industry, CA 91716 (a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Payment
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/15/2025	Payee name Cardwell & Wansley
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 314 S Broadway Ave Tyler, TX 75702
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting/marketing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/13/2025	Payee name Cardwell & Wansley
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 314 S Broadway Ave
		Tyler, TX 75702
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting/marketing
	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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 4/5 Rpt: 7/14	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	03/21/2025	Cardwell & Wansley
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	314 S Broadway Ave
		Tyler, TX 75702
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
		Consulting/marketing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/08/2025	Cardwell & Wansley
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	314 S Broadway Ave
		Tyler, TX 75702
	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 Consulting/marketing
		Consularg/marketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/02/2025	Cardwell & Wansley
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	314 S Broadway Ave
		Tyler, TX 75702
	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
		Consulting/marketing
	Complete ONLY if direct	Candidate/Officeholder name Office county Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

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	/ - Il Cor	mmittee	Legal Service	Memorials Exp es			xpens Vages	e /Contract Labor ete this form.		Travel in District Travel Out of Dis OTHER (enter a	strict category not liste	d above)
1	Total pages Schedule F1:	2	FILER NAM	IE						3	Filer ID	(Ethics Comr	nission Filers)
	Sch: 5/5 Rpt: 8/14		Jackson, A	Austin Reev	ve (The F	Ionorable	e)				00069799		
4	Date	5	Payee name	е									
	06/09/2025		Cardwell &	& Wansley									
6	Amount (\$)	7	Payee addr	ess; Cit	y;	State;	Zip Co	ode					
	\$250.00		314 S Broa	adway Ave	:								
			Tyler, TX 7	75702									
8	PURPOSE	(a)	Category (See Categories	listed at the to	op of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Consulting						ш		ide of Texas. Com		
	-								Consulting/n		, officeholder living	j expense	
									Consulting/ii	iiair	Curig		
9	Computate ONLY if direct	<u> </u>	Canadidata/Of				\ff:				Office he	a lal	
"	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Of	iliceriolder fi	anie	C	Office sou	igni			Office In	eiu	

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 Comr	nission Filers)				
Sch: 1/6 Rpt: 9/14	Jackson, Austin Re	eve (The Honorable)		00069799				
4 CREDIT CARD ISSUER		ncial institution al One	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$7.79	01/29/2025	02/10/2025					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State	e, Zip Code			
	Squarespace		225 Varick Street 12th Floor New York, NY 10014					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent	*	Website Hosting					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$140.71	(b) Date of Charge 02/17/2025	(c) Date(s) Credit Card Issue 03/10/2025	er Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, Stat	e, Zip Code			
	Microsoft		One Microsoft Way					
			Redmon, WA 98052					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Subscription Service					
X Political	Office Overhead/Ren	tal Expense	Subscription Service					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$7.79	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issue 03/10/2025	er Paid				
PAYEE	(a) Payee name	1	(b) Payee address;	City, Stat	e, Zip Code			
			225 Varick Street					
	Squarespace		12th Floor					
			New York, NY 10014					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Website Hosting					
X Political								
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 Offic	e sought	Office held				
1								

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 Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethio	cs Commis	sion Filers)			
Sch: 2/6 Rpt: 10/14	Jackson, Austin Re	eve (The Honorable)						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$59.99	04/09/2025						
7 PAYEE	(a) Payee name Dashlane		(b) Payee address; City, State, Zip Coo 44 W 18th St. 4th Floor New York, NY 10011					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Se							
Non-Political	(*) —	of Texas. Complete Schedule T.	_	, officeholder living exp	ense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$186.00	(b) Date of Charge 03/25/2025	(c) Date(s) Credit Card Issue 04/09/2025					
PAYEE	(a) Payee name Progressive		(b) Payee address; 6300 Wilson Mills Rd. Mayfield Village, OH 441	City, 43	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Insurance					
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	e sought	Office held				
PAYMENT	(a) Amount Charged \$7.79	(b) Date of Charge 03/29/2025	(c) Date(s) Credit Card Issue 04/09/2025	er Paid				
PAYEE	PAYEE (a) Payee name Squarespace		(b) Payee address; 225 Varick Street 12th Floor New York, NY 10014	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Website Hosting					
Non-Political	`	of Texas. Complete Schedule T.		, officeholder living exp	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

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

Candidate/Officenoider/Politica	· ·	ruction Guide explains how		THER (enter a category n	ot listed ab	iove)
1 Total pages Schedule F4:		·	<u> </u>	3 Filer ID (Ethics	Commiss	ion Filers)
Sch: 3/6 Rpt: 11/14		eve (The Honorable)		•		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$115.13	(b) Date of Charge 04/16/2025	(c) Date(s) Credit Card Issuel 05/09/2025	r Paid		
7 PAYEE 8 PURPOSE OF EXPENDITURE	(a) Payee name Mailchimp (a) Category (See Categories listed at the top	of this schedule)	(b) Payee address; 675 Ponce de Leon Ave N Suite 5000 Atlanta, GA 30308 (b) Description Advertising	City, NE	State,	Zip Code
X Political	Advertising Expense	·	Advertising			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$7.79	(b) Date of Charge 04/29/2025	(c) Date(s) Credit Card Issuer 05/09/2025	r Paid		
PAYEE	(a) Payee name Squarespace		(b) Payee address; 225 Varick Street 12th Floor New York, NY 10014	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Website Hosting			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$105.53	(b) Date of Charge 05/25/2025	(c) Date(s) Credit Card Issuel 06/09/2025	r Paid		
PAYEE	(a) Payee name Back Blaze		(b) Payee address; 201 Baldwin Ave. San Mateo, CA 94401	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Subscription Service			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expens	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
1						

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: 4/6 Rpt: 12/14	Jackson, Austin Re	eve (The Honorable)		00069799				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$7.79	06/09/2025						
7 PAYEE	(a) Payee name Squarespace		(b) Payee address; City, State, Zip Cod 225 Varick Street 12th Floor New York, NY 10014					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Website Hosting					
Non-Political	(1)	of Texas. Complete Schedule T.		, officeholder living expe	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH	() 4 () 4	L (1) D (1) (1)	1() 5 : () 6 : 11					
PAYMENT	(a) Amount Charged \$143.91	(b) Date of Charge 05/10/2025	(c) Date(s) Credit Card Issue 06/09/2025	er Paid				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
	Mailchimp		675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Advertising					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$226.00	(b) Date of Charge 06/17/2025	(c) Date(s) Credit Card Issue	er Paid				
PAYEE	(a) Payee name USPS		(b) Payee address; 2627 S Broadway Ave Tyler, TX 75701	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Post Office Box					
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		, officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held				

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 Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Com				sion Filers)		
Sch: 5/6 Rpt: 13/14	Jackson, Austin Re	eve (The Honorable)	00069799						
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$13.86	06/10/2025							
7 PAYEE	(a) Payee name	(b) Payee a	ddress;	City,	State,	Zip Code			
	Mailchimp		675 Ponce Suite 5000 Atlanta, G		NE				
8 PURPOSE OF	(a) Category		(b) Descript	ion					
EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)	Advertisin	g					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	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				
	\$50.00	06/19/2025							
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Lindala Araa Cham	shor of	205 S. Ma	in St.					
	Lindale Area Cham	iber or	P.O. Box 670						
			Lindale, TX 75771						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descript Membersh						
X Political									
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH		1	1	-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$149.88	06/24/2025							
PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code		
			60 E Rio S	Salado Pkwy					
	Norton Life Lock		Suite 1000						
			Tempe, A	Z 85281					
PURPOSE OF	(a) Category		(b) Descript						
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren	•	Subscripti	on Service					
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held				
	,-								

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica		ices Sal ruction Guide explains how		THER (enter a category not listed	above)	
L				2 Filor ID (Ethics Comm	3 Filer ID (Ethics Commission Filers)	
Sch: 6/6 Rpt: 14/14		eve (The Honorable)		00069799	13310111 11613)	
			E TOTAL OF UNITEMIZED	00009799		
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES	\$		
10002.1			CHARGED TO A CREDIT			
		T	CARD	<u> </u>		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$7.79	06/30/2025				
7 PAYEE	(a) Payee name Squarespace		(b) Payee address;	City, State	, Zip Code	
			225 Varick Street			
			12th Floor	12th Floor		
			New York, NY 10014			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description			
EXPENDITURE			Website Hosting			
X Political	Onice Overnead/Nem	ar Experioe				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense		
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		
	\$143.91	01/10/2025	02/10/2025			
	42.0.02	02/20/2020				
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code	
	Mailchimp		675 Ponce de Leon Ave N	NE		
			Suite 5000			
			Atlanta, GA 30308			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of this schedule)		Advertising			
X Political	Advertising Expense					
Non-Political				officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OH						