CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete thi	s form. 1 Filer ID (Ethics Comm 0008027)	ission Filers)	2 Total pages filed: 23		
3 CANDIDATE /	MS / MRS / MR FIRS	Т	MI	OFFICE USE ONLY		
OFFICEHOLDER NAME	The Honorable Lynr	ı D.		Date Received		
				ELECTRONICALLY FILED		
		-	0.15517	07/03/2025		
	NICKNAME LAST		SUFFIX	01/03/2023		
	Stuc	ку				
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUIT	E#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked		
OFFICEHOLDER MAILING	P.O. Box 464			<u> </u>		
ADDRESS				Receipt # Amount		
Change of Address	Denton, TX 76202					
🖳				Date Processed		
				Data larawad		
				Date Imaged		
5 CAMPAIGN	MS / MRS / MR FIRS	т	MI			
TREASURER	Mr. Robe		IVII			
NAME	Wii.	il D.				
	NICKNAME LAST		SUFFIX			
	Seay					
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX F	PLEASE); AP	T / SUITE #; CITY;	STATE; ZIP CODE		
ADDRESS	902 N. Locust					
(Residence or Business)						
	Denton, TX 76201					
7 CAMPAIGN	AREA CODE PHONE NUM	MBER EXTENSION				
TREASURER		WIDER EXTENSION				
PHONE	(940) 387-8563 x21					
8 REPORT						
TYPE	January 15 30t	h day before election	Runoff	15th day after campaign treasurer		
		, <u> </u>	<u></u>	appointment (officeholder only)		
	X July 15 8th	day before election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)		
			reporting innit			
9 PERIOD	Month Day Year		Month Day	Year		
COVERED	01/01/2025	THROUGH	06/30/2025	5		
		i				
10 ELECTION	ELECTION DATE	_	ELECTION TYPE			
	Month Day Year	X Primary	Runoff	Other		
	05/02/2026	General	Special			
		_	<u> </u>			
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)		
	State Representative District 64	Denton	State Representa			
	1		l			
		GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 23

13 C / OH NAME Stucky, Lynn D. (The Honorable) 14 Filer ID 00080276						mission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	accepted or political expenditu may have been made without a equired to report this information	the candidate's or office	eholder's kno	wledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	E					
	GENERAL	GENERAL						
		COMMITTEE ADD	RESS					
	SPECIFIC							
		COMMITTEE CAM	PAIGN TREASURER NAME					
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER THAI CONTRIBUTIONS MADE ELE		\$	0.00		
		CAL CONTRIBUTION PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	0.00		
EXPENDITURE TOTALS	URE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					0.00		
	4. TOTAL POLITIC	CAL EXPENDITURE	S		\$	16,884.33		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		IS MAINTAINED AS OF THE L	AST DAY OF THE	\$	26,848.31		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00		
17 AFFIDAVIT								
		1	l swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
				orable Lynn D. Stuck				
			Signature of	Candidate or Officeho	iuer			
AFFIX NO	TARY STAMP / SEAL AB	OVE						
				, this the		_ day		
of	, 20, to c	ertify which, witness	my hand and seal of office.					
Cimuratura of #		Dulantl		Tid	u malani-i-t- '			
Signature of Offi	cer administering	Printed name (of officer administering	Title of office	ı auministeri	iy oatri		

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 23 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00080276 Stucky, Lynn D. (The Honorable) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 12,675.66 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 4,208.67 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

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 Salaries/Wages/Contract Labor

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/7 Rpt: 4/23 00080276 Stucky, Lynn D. (The Honorable) 4 Date Payee name 02/06/2025 Bank of America 6 Amount (\$) Payee address; City; State; Zip Code \$3,023.38 PO Box 851001 Dallas, TX 75285 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense Payment on credit card used for campaign expenses reported on schedule F-4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/17/2025 Bank of America Amount (\$) Payee address; City; State; Zip Code \$633.65 PO Box 851001 Dallas, TX 75285 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense Payment on credit card used for campaign expenses reported on schedule F-4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/16/2025 Bank of America Amount (\$) Payee address: City; State; Zip Code \$447.65 PO Box 851001 Dallas, TX 75285 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense Payment on credit card used for campaign expenses reported on schedule F-4 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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Co	nsulting Expense ntributions/ Donations Made By Candidate/Officeholder/Politica edit Card Payment	Committee Legal Services	rials Expense Printing E	xpense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed abo	ove)
1 Tota	al pages Schedule F1:	2 FILER NAME			3 Filer ID (Ethics Commissi	on Filers)
s	sch: 2/7 Rpt: 5/23	Stucky, Lynn D. (The Ho	norable)		00080276	
4 Date	е	5 Payee name			•	
05/	17/2025	Bank of America				
6 Amo	ount (\$)	7 Payee address; City;	State; Zip Co	ode		
	\$435.15	PO Box 851001				
		Dallas, TX 75285				
8	PURPOSE	(a) Category (See Categories listed	at the top of this schedule)	(b) Description		
EX	OF (PENDITURE	Credit Card Payment		l =	l outside of Texas. Complete Schedule T.	
				. 	n, TX, officeholder living expense credit card used for campaign	expenses
					schedule F-4	
9 Con	nplete ONLY if direct	Candidate/Officeholder name	Office sou	<u>I</u> .ght	Office held	
exp	enditure to benefit C/OI					
Date	e	Payee name				
06/	17/2025	Bank of America				
Amo	ount (\$)	Payee address; City;	State; Zip Co	ode		
	\$812.23	PO Box 851001				
		Dallas, TX 75285				
	PURPOSE	(a) Category (See Categories listed	at the top of this schedule)	(b) Description		
EX	OF (PENDITURE	Credit Card Payment		. <u>–</u>	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
				l —	credit card used for campaign	expenses
					schedule F-4	
	mplete ONLY if direct	Candidate/Officeholder name	Office sou	ıght	Office held	
exp	enditure to benefit C/OI					
Date	e	Payee name				
04/	22/2025	Champions Rotary Club				
Amo	ount (\$)	Payee address; City;	State; Zip Co	ode		
	\$475.00	211 S Oak St				
		Roanoke, TX 76262				
	PURPOSE OF	, .	at the top of this schedule)	(b) Description	Louiside of Tours	
EX	(PENDITURE	Fees			I outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
					nembership dues for Rotary ser	vice
				organization		
				organization		
	nplete ONLY if direct	Candidate/Officeholder name	Office sou		Office held	
	nplete <u>ONLY</u> if direct enditure to benefit C/OI		Office sou			
			Office sou			

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		Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		/ages	s/Contract Labor	Travel Out of OTHER (ente	District r a category not listed above)
1	Total pages Schedule F1:	2				3	Filer ID	(Ethics Commission Filers)
_	Sch: 3/7 Rpt: 6/23	_	Stucky, Lynn D. (The Honorable)				00080276	
4	Date	5	Payee name					
	02/05/2025		Denton County Republican Assembly					
6	Amount (\$) \$40.00	7	Payee address; City; State; 2921 Country Club Rd #102,	; Zip Co	de			
			Denton, TX 76210					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Fees			=		omplete Schedule T.
		l				Check if Austin, T		
						Republican Ass		ership in Denton County
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name C	Office sou	ght		Office	held
	Date		Payee name					
	01/13/2025		Law Offices of Kevin C Stewart					
	Amount (\$)		Payee address; City; State;	; Zip Co	de			
	\$625.00		6801 Yaupon Drive					
		L	Austin, TX 78759					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	iedule)	(b)	Description		
	EXPENDITURE		Legal Services			Check if Austin, T		omplete Schedule T.
						—		to review campaign filings
						i ayınıcını ioi ice	gai sei vices	to review campaign mings
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght		Office	held
	Date		Payee name					
	01/02/2025		Residential Condos at Brazos Place O	wners As	sso	ciation		
	Amount (\$)		Payee address; City; State;	; Zip Co	de			
	\$592.80		8310-1 N. Capital of Texas Highway					
			Suite 225					
			Austin, TX 78731					
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	iedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					omplete Schedule T.
	LAFENDITURE		·			Check if Austin, TX		
						Homeowners a apartment in Au		dues for candidate's
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght		Office	held
	expenditure to benefit C/OI	Н						

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		
_	Total manne Coloradolo 54		250)
1	Total pages Schedule F1: Sch: 4/7 Rpt: 7/23	2 FILER NAME Stucky, Lynn D. (The Honorable) 3 Filer ID (Ethics Commission File 00080276	ers)
4	Date	5 Payee name	
	01/03/2025	Residential Condos at Brazos Place Owners Association	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$91.20	8310-1 N. Capital of Texas Highway Suite 225	
		Austin, TX 78731	
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	
		Homeowners association dues for candidate's apartment in Austin	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_			
	Date	Payee name	
	02/03/2025	Residential Condos at Brazos Place Owners Association	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$684.00	8310-1 N. Capital of Texas Highway	
		Suite 225	
		Austin, TX 78731	
	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	
		Homeowners association dues for candidate's	
		apartment in Austin	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	04/30/2025	Residential Condos at Brazos Place Owners Association	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,626.50	8310-1 N. Capital of Texas Highway	
		Suite 225	
		Austin, TX 78731	
	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	
		Homeowners association dues for candidate's	
		apartment in Austin	
	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/Opnations Made

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

	Contributing 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: 5/7 Rpt: 8/23	Stucky, Lynn D. (The Honorable) 00080276
4	Date	5 Payee name
	05/22/2025	Residential Condos at Brazos Place Owners Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$684.00	8310-1 N. Capital of Texas Highway
		Suite 225
		Austin, TX 78731
8	PURPOSE	I
ľ	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
		Homeowners association dues for candidate's
		apartment in Austin
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	Date	Davas nams
	06/25/2025	Payee name Residential Condos at Brazos Place Owners Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,299.40	8310-1 N. Capital of Texas Highway
		Suite 225
		Austin, TX 78731
	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
		Homeowners association dues for candidate's apartment in Austin
_	Complete ONLY if direct	
	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	02/13/2025	Wise County 4-H Council
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	206 S State St # A
		Decatur, TX 76234
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	-	Candidate/Officeholder/Political Committee
		Campaign charitable donation
_	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:	
	Sch: 6/7 Rpt: 9/23	Stucky, Lynn D. (The Honorable) 00080276
4	Date	5 Payee name
	01/02/2025	Yardi
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.95	430 S Fairview Avenue
		Santa Barbara, CA 93117
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fee for online payment of homeowners association
		dues for candidate's apartment in Austin
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2025	Yardi
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.95	430 S Fairview Avenue
		Santa Barbara, CA 93117
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fee for online payment of homeowners association
		dues for candidate's apartment in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/03/2025	Yardi
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.95	430 S Fairview Avenue
		Santa Barbara, CA 93117
	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
		Fee for online payment of homeowners association
		dues for candidate's apartment in Austin
	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 -

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: 7/7 Rpt: 10/23	Stucky, Lynn D. (The Honorable) 00080276
4	Date	5 Payee name
	04/30/2025	Yardi
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.95	430 S Fairview Avenue
		Santa Barbara, CA 93117
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fee for online payment of homeowners association
		dues for candidate's apartment in Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<u> </u>	<u> </u>	
	Date	Payee name
	05/22/2025	Yardi
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.95	430 S Fairview Avenue
		Santa Barbara, CA 93117
	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
		Fee for online payment of homeowners association
		dues for candidate's apartment in Austin
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
 	Data	
	Date	Payee name
	06/25/2025	Yardi
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.95	430 S Fairview Avenue
		Santa Barbara, CA 93117
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fee for online payment of homeowners association
		dues for candidate's apartment in Austin
<u> </u>	Complete ONLY if direct	
	expenditure to benefit C/O	

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

se Travel in District
nse Travel Out of District
OTHER (enter a category)

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1 Total	pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
Sch:	1/13 Rpt: 11/23	Stucky, Lynn D. (Th	ne Honorable)			00080276		
4 CREI ISSU	DIT CARD ER		ncial institution America	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYI	MENT	(a) Amount Charged \$27.18	\$27.18 05/18/2025 06/17/2025			r Paid		
7 PAY	EE	(a) Payee name Allsups	601 Ave F NW				State,	Zip Code
EXPI	POSE OF ENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District Childress, TX 79201 (b) Description Fuel for trip to tour Texas				Tech Veterina	rian Scho	ool
ΙĒ	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u>I</u>	Check if Austin, TX,	officeholder living exp	ense	
	olete <u>ONLY</u> if direct	Candidate/Officeholder	name Office	e sought		Office held		
	iture to benefit C/OH							
PAYI	MENT	(a) Amount Charged \$254.39	(b) Date of Charge 04/01/2025	(c) Date(s) 04/16/20) Credit Card Issuei 025	r Paid		
PAYI	EE	(a) Payee name Capitol TWR		(b) Payee 701 Braz Suite GR Austin, T	zos RG	City,	State,	Zip Code
EXPI	POSE OF ENDITURE Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly parking fee for Candidate's apartment in Austin				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	olete <u>ONLY</u> if direct iture to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAY	MENT	(a) Amount Charged \$254.39	(b) Date of Charge 05/01/2025	(c) Date(s) 06/17/20) Credit Card Issuei 025	r Paid		
PAY	EE	(a) Payee name Capitol TWR		(b) Payee 701 Braz Suite GR Austin, T	zos RG TX 78701	City,	State,	Zip Code
EXPI	POSE OF ENDITURE Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ption parking fee for Ca	andidate's apai	rtment in	Austin
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	olete <u>ONLY</u> if direct iture to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
		<u> </u>	<u> </u>					

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 forn	n.				
1 Total pages Schedule F4:	2 FILER NAME			[3	3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 2/13 Rpt: 12/23	Stucky, Lynn D. (Th	ne Honorable)	00080276					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UN EXPENDITURE CHARGED TO CARD	ES S	\$			
6 PAYMENT	(a) Amount Charged \$32.30	(b) Date of Charge 05/18/2025	(c) Date(s) Credit 06/17/2025	Card Issuer F	Paid			
7 PAYEE	(a) Payee name Murphy 7843		(b) Payee address 3802 US-287 Vernon, TX 763		City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Fuel for trip to to	our Texas T	ech Veterina	rian Scho	ool	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX, of	fficeholder living exp	ense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
PAYMENT	(a) Amount Charged \$36.32	(b) Date of Charge 05/18/2025	(c) Date(s) Credit 06/17/2025	Card Issuer I	Paid			
PAYEE	(a) Payee name PMC Paid Parking		(b) Payee address 2406 Broadway Lubbock, TX 79	,	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Parking fee to a School		of Texas Tech	Veterina	ırian	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX, of	fficeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
PAYMENT	(a) Amount Charged \$68.36	(b) Date of Charge 04/06/2025	(c) Date(s) Credit 04/16/2025	Card Issuer F	Paid			
PAYEE	(a) Payee name Spectrum	,	(b) Payee address PO Box 60074 City of Industry,		City, -0074	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Ren	tal Expense	(b) Description Cable and interraction Austin			te's apart	ment in	
Non-Political	(*) –	of Texas. Complete Schedule T.		ck if Austin, TX, of	fficeholder living exp	iense		
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 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 (Et	thics Commiss	sion Filers)	
	Sch: 3/13 Rpt: 13/23	Stucky, Lynn D. (Th	ne Honorable)			00080276			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$			
6	PAYMENT	(a) Amount Charged \$68.36	(b) Date of Charge 05/06/2025	(c) Date(s 06/17/20) Credit Card Issu 125	er Paid			
7	PAYEE	(a) Payee name Spectrum		(b) Payee PO Box	60074	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense City of Industry, CA 91716 (b) Description Cable and internet expense Austin				late's apart	ment in		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	ζ, officeholder living ε	expense		
	9 Complete ONLY if direct Candidate/Officeholder name Offi expenditure to benefit C/OH					Office held			
	PAYMENT	(a) Amount Charged \$68.36	(b) Date of Charge 06/06/2025	(c) Date(s 06/17/20) Credit Card Issud 125	er Paid			
	PAYEE	(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code PO Box 60074 City of Industry, CA 91716-0074					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Cable and internet expense for Candidate's apartment in Austin					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$37.80	(b) Date of Charge 06/30/2025	(c) Date(s) Credit Card Issu	er Paid			
	PAYEE	(a) Payee name Squarespace		(b) Payee 225 Vario		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Advertising Expense	,	(b) Descri	fee to maintain o				
L		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX	C, officeholder living of Office held	expense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	c souyiil		Onice 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 Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)
	Sch: 4/13 Rpt: 14/23	Stucky, Lynn D. (Th	ne Honorable)			00080276		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$1.10	(b) Date of Charge 01/14/2025	02/06/2025				
7	PAYEE	(a) Payee name USPS			cKinney St	City,	State,	Zip Code
Ļ	PURPOSE OF	(a) Catagony			TX 76201			
8	EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Postage for corresponder				nce to campaigr	n suppor	ter.
	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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$43.09	01/28/2025	06/06/20				
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Bank of America		PO Box	851001			
L				Dallas, T	X 75285			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Fee for credit card used for campaign expenses				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	officeholder living expe	oneo	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	Check ii Addini, 174,	Office held		
F		(a) Amount Charged	(h) Data of Charge	(a) Data(a	Cradit Card Issue	r Doid		
	PAYMENT	(a) Amount Charged \$13.93	(b) Date of Charge 02/28/2025	03/17/20) Credit Card Issue 125	i Palu		
	PAYEE	(a) Payee name	ı	(b) Payee PO Box		City,	State,	Zip Code
		Bank of America		Dallas, T	X 75285			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri	ption redit card used fo	or campaign ex	penses	
	X Political							
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
H								

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:	e F4: 2 FILER NAME			3 Filer ID (Ethio	s Commis	sion Filers)	
	Sch: 5/13 Rpt: 15/23	Stucky, Lynn D. (The Honorable)			00080276			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$196.10	(b) Date of Charge 05/18/2025	(c) Date(s) 06/17/20) Credit Card Issuei 125	Paid		
7	PAYEE	(a) Payee name Embassy Suites		(b) Payee 5215 S L		City,	State,	Zip Code
8	PURPOSE OF	(a) Category		(b) Descrip				
ľ	EXPENDITURE X Political	(See Categories listed at the top of this schedule) Travel Out of District Travel Out of District (b) Description Hotel stay during visit to tou School		our the Texas T	ech Vet	erinarian		
	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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$87.10	(b) Date of Charge 03/21/2025	(c) Date(s) 04/16/20) Credit Card Issuer 125	Paid		
	PAYEE	(a) Payee name Minol-USA		Ste 100	address; ddison Road TX 75001	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Utilities for	ption or candidates apa	artment in Austi	in	
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$96.13	(b) Date of Charge 06/23/2025	(c) Date(s)) Credit Card Issuei	Paid		
	PAYEE	(a) Payee name Minol-USA		Ste 100	address; ddison Road TX 75001	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Utilities for	ption or candidates apa	artment in Austi	in	
L	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
e	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 Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)		sion Filers)	
	Sch: 6/13 Rpt: 16/23	Stucky, Lynn D. (Th	00080276					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$37.80	(b) Date of Charge 01/28/2025	(c) Date(s) 03/17/202	Credit Card Issuer 25	r Paid		
7	PAYEE	(a) Payee name Squarespace		(b) Payee a	k Street	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense New York City, NY 10014 (b) Description Monthly fee to maintain ca			e			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
	expenditure to benefit C/OH			e sought		Office held		
	PAYMENT	(a) Amount Charged \$37.80	(b) Date of Charge 03/28/2025	(c) Date(s) 04/16/202	Credit Card Issuer 25	r Paid		
PAYEE (a		(a) Payee name	•	(b) Payee a	address;	City,	State,	Zip Code
		Squarespace		225 Vario				
					City, NY 10014			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descrip Monthly fo	ition ee to maintain ca	ampaign websit	e	
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$37.80	(b) Date of Charge 05/28/2025	(c) Date(s)	Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name Squarespace		(b) Payee a 225 Vario		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Monthly fee to maintain campaign website					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct							

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

l	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
l	Sch: 7/13 Rpt: 17/23	Stucky, Lynn D. (Th	ne Honorable)		00080276			
4	CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$			
6	PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 02/26/2025	(c) Date(s) Credit Card Issu 03/17/2025	uer Paid			
7	PAYEE	(a) Payee name (b) Payee address; 604 N Trinity St		City, State, Zip Code				
L		() 2 :		Decatur, TX 76234				
8	PURPOSE OF EXPENDITURE X Political	URE (See Categories listed at the top of this schedule) Contributions/Donations Made By Campaign charitable contri		ntribution				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$8.10	(b) Date of Charge 05/18/2025	(c) Date(s) Credit Card Issu 06/17/2025	uer Paid			
	PAYEE (a) Payee name Braums			(b) Payee address; 4220 College Dr Vernon, TX 76384	City, State, Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	,	(b) Description	as Tech Veterinarian School			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$25.00	(b) Date of Charge 01/25/2025	(c) Date(s) Credit Card Issu 02/06/2025	ıer Paid			
	PAYEE	(a) Payee name Bank of America		(b) Payee address; PO Box 851001 Dallas, TX 75285	City, State, Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees			(b) Description Fee for credit card used for campaign expenses				
L	Non-Political	\'	of Texas. Complete Schedule T.	<u> </u>	X, officeholder living expense			
ε	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office 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:	F4: 2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 8/13 Rpt: 18/23	Stucky, Lynn D. (Th	ne Honorable)	00080276				
4	CREDIT CARD ISSUER	Name of financial institution See previous 5 TOTAL OF U EXPENDITUE CHARGED TO CARD			\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid		
		\$254.39	01/01/2025	02/06/202	5			
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Capitol TWR 701 Brazos Suite GRG Austin, TX 78701						
8	PURPOSE OF	(a) Category		(b) Descripti	ion			
	EXPENDITURE X Political	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense Monthly parking fee for Car		andidate's apar	tment in	Austin		
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, o		officeholder living expe	ense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid		
		\$254.39	02/01/2025	02/06/202	5			
PAYEE		(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Conital TMD		701 Brazo	S			
		Capitol TWR		Suite GRG				
L				Austin, TX				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti			t	Augtin
	X Political	Office Overhead/Rent		Monthly parking fee for Candidate's apartment in Austin				Ausun
	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 Office	e sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid		
		\$254.39	03/01/2025	03/17/202	5			
	PAYEE	(a) Payee name	<u> </u>	(b) Payee a	ddress;	City,	State,	Zip Code
				701 Brazo	S			
		Capitol TWR	Capitol TWR Suite GRG					
				Austin, TX	78701			
	PURPOSE OF	(a) Category		(b) Descripti	ion			
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	Monthly pa	arking fee for Ca	andidate's apar	tment in	Austin
	X Political	Onice Overhead/Nerital Expense						
	Non-Political	al (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
e	expenditure to benefit C/OH							

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

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	ages Schedule F4: 2 FILER NAME			3 Filer ID (Ethics Commis	ssion Filers)		
Sch: 9/13 Rpt: 19/23	Stucky, Lynn D. (Th	e Honorable)		00080276	,		
4 CREDIT CARD ISSUER	Name of finan	•	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
	\$254.39	06/01/2025					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	Capitol TWR 701 Brazos Suite GRG Austin, TX 78701						
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	Office Overhead/Rental Expense		Monthly parking fee for Candidate's apartment in Austin				
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, T	X, 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 Issu	er Paid			
	\$310.89	01/13/2025	02/06/2025				
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	Denton County Rep	ublican Party	2921 Country Club Rd #102 Denton, TX 76210				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top of	of this schedule)	Fee to attend annual Lin	coln/Reagan Denton Co	ounty		
X Political	Fees		Republican Fundraiser				
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$617.00	(b) Date of Charge 01/03/2025	(c) Date(s) Credit Card Issu 02/06/2025	er Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
Foremost Insurance		P.O. Box 0915					
			Carol Stream, IL 60132-0915				
PURPOSE OF	(a) Category	of this color dulc)	(b) Description				
EXPENDITURE	(See Categories listed at the top of Office Overhead/Rental		Insurance for Candidate	's apartment in Austin			
X Political							
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, T.	X, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	ı						

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 Commission Filers)					
	Sch: 10/13 Rpt: 20/23	Stucky, Lynn D. (Th	ne Honorable)		00080276				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6	PAYMENT	(a) Amount Charged \$68.69	(b) Date of Charge 01/20/2025	(c) Date(s) Credit Card Issue 02/06/2025	r Paid				
7	PAYEE	(a) Payee name (b) Payee address; 15280 Addison Road Ste 100 Addison, TX 75001			City, State	, Zip Code			
8	PURPOSE OF EXPENDITURE X Political	ITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Utilities for candidates apa		artment in Austin					
	Non-Political	(*) –	of Texas. Complete Schedule T.		, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
e	expenditure to benefit C/OH	() 1	L (1) D (1) (1)	1() 5 : () 6 . 12 6 . 14	D : 1				
	PAYMENT	(a) Amount Charged \$59.17	(b) Date of Charge 02/21/2025	(c) Date(s) Credit Card Issue 03/17/2025	r Paid				
	PAYEE (a) Payee name Minol-USA			(b) Payee address; 15280 Addison Road Ste 100 Addison, TX 75001	City, State	, Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Utilities for candidates apa	artment in Austin				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	PAYMENT	(a) Amount Charged \$74.60	(b) Date of Charge 04/20/2025	(c) Date(s) Credit Card Issue 06/17/2025	r Paid				
	PAYEE	(a) Payee name Minol-USA		(b) Payee address; 15280 Addison Road Ste 100 Addison, TX 75001	City, State	, Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Utilities for candidates apa	artment in Austin				
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	_	, officeholder living expense				
е	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								

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:	F4: 2 FILER NAME				3 Filer ID (Eth	cs Commiss	sion Filers)
Sch: 11/13 Rpt: 21/23	Stucky, Lynn D. (Th	ne Honorable)			00080276		
4 CREDIT CARD ISSUER	Name of financial institution see previous		EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issue	r Paid		
	\$94.34	05/23/2025	06/17/2025	5			
7 PAYEE	(a) Payee name	•	(b) Payee ad	ldress;	City,	State,	Zip Code
	Minol-USA Minol-USA 15280 Addison Ro Ste 100 Addison, TX 7500						
8 PURPOSE OF	(a) Category		(b) Description	on			
EXPENDITURE X Political				candidates apa	artment in Aus	tin	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
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	1 ' ' ' ' ' '	redit Card Issue	r Paid		
	\$65.33	01/06/2025	02/26/2025	5			
PAYEE	(a) Payee name		(b) Payee ad	ldress;	City,	State,	Zip Code
	Spectrum		PO Box 60		2.0074		
DUDDOOT 05	(a) Cataman.		City of Industry, CA 91716-0074				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Internet and cable expenses for Candidate's apartment in Austin				
X Political			7.03011				
Non-Political	1 (*) –	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 \$68.36	(b) Date of Charge 02/06/2025	(c) Date(s) C 03/17/2025	redit Card Issuel	r Paid		
PAYEE	(a) Payee name		(b) Payee ad	ldress;	City,	State,	Zip Code
	_		PO Box 60	074			
	Spectrum						
			City of Industry, CA 91716-0074				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense				d cable expens	ses for Candida	ate's apar	tment in
X Political	X Political Austin						
Non-Political	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							

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 Commission Filers)					
Sch: 12/13 Rpt: 22/23	Stucky, Lynn D. (Th	ne Honorable)		00080276			
4 CREDIT CARD ISSUER	Name of financial institution 5 see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$68.36	(b) Date of Charge 03/06/2025	(c) Date(s) Credit Card Issuer 04/16/2025	Paid			
7 PAYEE	(a) Payee name (b) Payee address; PO Box 60074		City, State, Zip Code				
			City of Industry, CA 91716	6-0074			
8 PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Cable and internet exper		se for Candidate's apartment in				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$37.80	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Card Issuer 04/16/2025	^r Paid			
PAYEE	PAYEE (a) Payee name Squarespace		(b) Payee address; 225 Varick Street New York City, NY 10014	City, State, Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Monthly fee to maintain ca	ampaign website			
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 \$37.80	(b) Date of Charge 04/28/2025	(c) Date(s) Credit Card Issuer 06/17/2025	^r Paid			
PAYEE	(a) Payee name Squarespace		(b) Payee address; 225 Varick Street New York City, NY 10014	City, State, Zip Code			
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense			(b) Description Monthly fee to maintain campaign website				
Non-Political	(*) —	of Texas. Complete Schedule T.		officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office 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

Candidate/Officenoider/Politica	-	ruction Guide explains how		HER (enter a category not listed above)		
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 13/13 Rpt: 23/23	Stucky, Lynn D. (Th	ne Honorable)		00080276		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$32.00	(b) Date of Charge 05/18/2025	(c) Date(s) Credit Card Issuel 06/17/2025	r Paid		
7 PAYEE	(a) Payee name Villa Grande		(b) Payee address; 2025 US-287 Decatur, TX 76234	City, State, Zip Code		
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE X Political	(See Categories listed at the top of this schedule) Food/Beverage Expense			ck to tour the Texas Tech		
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 \$25.36	(b) Date of Charge 05/17/2025	(c) Date(s) Credit Card Issuel 06/17/2025	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Whataburger		1040 Central E Fwy			
			Wichita Falls, TX 76306			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Food during trip to Lubbock to attend tour of Texas Tech Veterinarian School			
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		