# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Comm 00062790		2 Total pages filed: 93
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Christopher G			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2025
	Chris	Turner		33.1.01	
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	V·	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P. O. Box 182093	73011E#, GIT	',	ZII CODE	Receipt # Amount
Change of Address	Arlington TV 76006				
Change of Address	Arlington, TX 76096				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-
TREASURER NAME	Mr.	William D.			
	NICKNAME	LAST		SUFFIX	
	Dan	Dipert			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	PT / SUITE #; CITY	; STATE; ZIP CODE
TREASURER ADDRESS	7301 W. Pioneer Pkwy.				
(Residence or Business)	Arlington, TX 76013				
7 CAMPAIGN	AREA CODE PHON	NE NUMBER E	EXTENSION		
TREASURER PHONE	(817) 543-3700				
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurer
		_		L -	appointment (officeholder only)
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	
COVERED	01/01/2025	TH	IROUGH	06/30/20	25
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Year	XPI	rimary	Runoff	Other
	03/03/2026	G	Seneral	Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	T (if known)
	State Representative Dist	rict 101			tative District 101
		GO T	O PAGE 2		

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 93

13 C / OH NAME	Turner, Christopher (	G. (The Honorable	e)	14 Filer ID 00062790	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus may have been made without equired to report this information	the candidate's or offi	ceholder's kr	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ME			
Ш	GENERAL					
		COMMITTEE ADD	DRESS			
	SPECIFIC					
		COMMITTEE CAN	MPAIGN TREASURER NAME			
		COMMITTEE CAN	MPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS						
	5)	\$	40,166.49			
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	4,787.75		
	4. TOTAL POLITIC	CAL EXPENDITURE	ES		\$	139,220.23
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	354,264.32
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
				ole Christopher G. 7 Candidate or Officeh		
			Signature of	Candidate of Officers	oluei	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		day
of	, 20, to co	ertify which, witness	my hand and seal of office.			
Signature of office	cer administering	Printed name	of officer administering	Title of offic	er administe	ring oath

# **SUBTOTALS - C/OH**

# FORM COH **COVER SHEET PG 3**

					3 of 93
_	ER NAM	nristopher G. (The Honorable)	19 Filer ID 00062790	(Ethi	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	39,786.49
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	380.00	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.		SCHEDULE E: LOANS	\$		
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	94,608.02	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	42,855.44
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,756.77
10		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ons	\$	
12	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	3,857.50

	MONEI	ARY POLITICAL C	NS		SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/93	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Turner, Chris	stopher G. (The Honorable)				00062790	
4	Date 06/30/2025	5 Full name of contributor Balsom, Jim	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$50.00
		6 Contributor address; City; Sta	ate; Zip Code				
_	Delicate at a con-	Arlington, TX 76002-5416	1,	) F	$\overline{\Gamma}$		
8	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/30/2025	Blackridge					\$2,500.00
	Contributor address; City; State; Zip Code						
		Austin, TX 78701-2161					
	Principal occupation / Job title (See Instructions)  Employer (See Instructions)				)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/30/2025	06/30/2025 Clevenger, Don J.					\$1,000.00
	Contributor address; City; State; Zip Code		ate; Zip Code				
		Dallas, TX 75201					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	<u>.                                    </u>		
	Senior Vice I	President/CFO		Oncor			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/30/2025	Conyngham, Karen Contributor address; City; Sta			\$20.85		
		Austin, TX 78746-4115					
	Principal occu Researcher	pation / Job title (See Instructions)		Employer (See Instructions Self employed	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/30/2025	Danburg, Debra	<del></del>				\$100.00
	Contributor address; City; State; Zip Code						
		Austin, TX 78704-4611					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Attorney/Sta	e Rep.		Retired			

	MONET	ARY POLITICAL CONTRIBUTIO	Ν	S		SCHEDULE A1	_
	The Instruc	ction Guide explains how to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/93	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062790	)
4	Date 06/30/2025	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$) \$51	83
8	Dringing occu	Arlington, TX 76013-5706	0	Employer (See Instructions	<u> </u>		
•	Retired	pation / Job title (See Instructions)	э 	Employer (See Instructions Retired	·)		
	Date 06/30/2025			•	Amount of Contribution (\$) \$103	3.45	
	Deire sin al access	Dallas, TX 75238-1850		Formula and (On a london attended on			
	Principal occupation / Job title (See Instructions)  Retired  Employer (See In Retired			Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$) \$2,500	0.00	
		Austin, TX 78746-6773					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Gandy, Shirlee  Contributor address; City; State; Zip Code  Fort Worth, TX 76109-4732		)	•	Amount of Contribution (\$) \$500	).00
	Principal occu Real estate i	pation / Job title (See Instructions) nvestor		Employer (See Instructions Self-employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  06/30/2025 Garnett, Richard  Contributor address; City; State; Zip Code  Fort Worth, TX 76109-5233			•	Amount of Contribution (\$) \$500	0.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	E A1
	The Instru	ction Guide explains hov	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/93	
2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)
	Turner, Chris	stopher G. (The Honorable)					00062790	
4	Date 06/30/2025	<ul><li>5 Full name of contributor</li><li>Greer, James A.</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		)	7	Amount of Contribution (\$)	\$1,000.00
		Keller, TX 76262-4306	iaie, Zip Coue					
8	Principal occu	pation / Job title (See Instructions	5)	9	Employer (See Instructions	5)		
	Executive Vi	ce President/COO			Oncor			
	Date	Full name of contributor	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	
	06/30/2025	Haliburton, Nita (Ms.)						\$103.45
		Contributor address; City; S	tate; Zip Code			1		
		Arlington, TX 76018-2022	<del>-</del>			<u> </u>		
		pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Teacher Tarrant County College							
	Date	Full name of contributor	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	
	06/30/2025	Henry, Matt						\$1,000.00
		Contributor address; City; S	tate; Zip Code					
		Dallas, TX 75218-4340						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u>		
	Senior Vice I		-,		ONCOR	,		
	Date	Full name of contributor	out-of-state PAC (ID#:			Г	Amount of Contribution (\$)	
	06/30/2025	Moak Casey PAC	Under of State 1 AC (ID#				ranount of Continuation (¢)	\$250.00
	00/00/2020	Contributor address; City; S	tate: 7in Code					7200.00
		Contributor address, City, S	idie, zip Gode					
		Austin, TX 78746-5776						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	
	06/29/2025	Monroe, Mary Catherine	(Ms.)					\$51.83
		Contributor address; City; S	tate; Zip Code			İ		
		Arlington, TX 76013-1336						
		pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Retired				Retired			

	MONEI	ARY POLITICAL CONTRIBUT	IOI	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete thi	is for	m.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/93	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Turner, Chris	stopher G. (The Honorable)				00062790	
4	Date 06/30/2025	<ul> <li>Full name of contributor  out-of-state PAC (II Moore, William (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	D#:		7	Amount of Contribution (\$)	\$100.00
		Bethesda, MD 20817-6247					
8	Principal occu Partner	pation / Job title (See Instructions)	9	Employer (See Instructions Vianovo	5)		
	Date	Full name of contributor  ut-of-state PAC (II	D#:	)		Amount of Contribution (\$)	
	06/30/2025	Morales, Sandra					\$155.08
	Contributor address; City; State; Zip Code						
		Dallas, TX 75219-2047					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired Retired						
	Date	Full name of contributor  ut-of-state PAC (II	D#:	)		Amount of Contribution (\$)	
	06/30/2025 Ressl, Robert						\$50.00
		Contributor address; City; State; Zip Code					
		Arlington, TX 76013-6446					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (II	D#:	)		Amount of Contribution (\$)	
	06/30/2025	Texans for Truth & Liberty PAC  Contributor address; City; State; Zip Code				:	\$10,000.00
		Austin, TX 78701-1819					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date	Full name of contributor  ut-of-state PAC (II	D#:	)		Amount of Contribution (\$)	
	06/30/2025	Texas Medical Association PAC (TexPAC)					\$2,500.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78701-1624					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 5/5 Rpt: 8/93	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	Filer ID (Ethics Commission 00062790	on Filers)
4	Date 06/30/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>		7	Amount of Contribution (\$)	\$10,000.00
_	Deignaignal	Austin, TX 78768-2246	2. Employer (Co. Instructions	_		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78767-0788 pation / Job title (See Instructions)	Employer (See Instructions	-, 		
	i illicipai occu	oution / Job title (See manuchons)	Employer (See manuchons	')		
	Date Full name of contributor out-of-state PAC (ID#: C00284885 )  The Home Depot Inc. Political Action Committee  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20004-1346 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor  out-of-state PAC (ID#: Wholesale Beer Distributors of Texas PAC  Contributor address; City; State; Zip Code  Austin, TX 78701-2434	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		I				

# NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 9/93 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Turner, Christopher G. (The Honorable) 00062790 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/27/2025 Second Floor Strategies \$380.00 Fundraising event email 7 Contributor address; City; State; Zip Code distribution Austin, TX 78701-1726 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 1/23 Rpt: 10/93	Turner, Christopher G. (The Honorable)	00062790
4	Date 03/25/2025	5 Payee name	
-		AMM Political Strategies	
6	Amount (\$) \$918.96	7 Payee address; City; State; Zip Code 507 N Sylvania Ave	
	Ψ010.00		
		Fort Worth, TX 76111-2317	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	l outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense ice for Town Hall event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Н	
	Date	Payee name	
	06/10/2025	AMM Political Strategies	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$125.79	507 N Sylvania Ave	
		5 (Marth TV 70444 0047	
	PURPOSE	Fort Worth, TX 76111-2317	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	l outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense
		GOTV textin	g
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office Held
H	Date	Payee name	
	02/03/2025	American Express	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7,722.64	200 Vesey St	
		New York, NY 10281-5525	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	I outside of Texas. Complete Schedule T.
	EXPENDITURE	T Credit Card i ayinchi	n, TX, officeholder living expense
		Credit card p	
	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

Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment		mmittee	Gift/Awards/Memo Legal Services  The Instruction	rials Expense  n Guide explains		Vages	s/Contract Labor		Travel Out of D OTHER (enter	oistrict a category not listed above)		
_	Total manage Calculated	<u></u>	Ell ED MAN				p.		_	Ella - ID	(Ethiop Commission Ethio)	
1	Total pages Schedule F1:	2							3		(Ethics Commission Filers)	
	Sch: 2/23 Rpt: 11/93	$oxed{oxed}$		istopher G. (	The Honorab	ie) ———				00062790		
4	Date	5	Payee name									
L	03/03/2025	L	American E	xpress								
6	Amount (\$)	7	Payee addre	ss; City;	State	e; Zip Co	de					
	\$5,512.57		200 Vesey	St								
			New York, I	NY 10281-55	25							
8	PURPOSE	(a)			d at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE	Γ΄	Credit Card		a.o top of tillo 50		•	_ `	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE			,				_		officeholder livir	ng expense	
								Credit card pa	ayr	ment		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	•	Office sou	ght			Office h	neld	
L	expenditure to benefit C/O	H										
	Date	Γ	Payee name									
	04/03/2025		American E	xpress								
	Amount (\$)	Γ	Payee addre	ss; City;	State	e; Zip Co	de					
	\$11,384.49		200 Vesey	St								
			,									
			New York, I	NY 10281-55	25							
	PURPOSE	(a)	Category (Se	e Categories listed	d at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Credit Card	Payment							mplete Schedule T.	
	-							<b>—</b>		officeholder livir	ng expense	
								Credit card pa	ayí	neni		
	Complete ONLY if direct	Ļ	`andidata/Offi	ceholder name		Office sou	abt			Office h	aold	
	Complete ONLY if direct expenditure to benefit C/OH		Janunate/UIII	cenoidei Haffi(	=	Onice Sou	ynı			Office f	ICIU	
	Data	_					_					
	Date		Payee name									
	05/05/2025		American E	xpress								
	Amount (\$)		Payee addre		State	e; Zip Co	de					
	\$6,859.08		200 Vesey	St								
			New York, I	NY 10281-55	25							
	PURPOSE	(a)	Category (Se	e Categories listed	d at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Credit Card		,	,		_			mplete Schedule T.	
	LAFENDITURE							_		officeholder livir	ng expense	
								Credit card pa	ayr	nent		
		L										
	Complete ONLY if direct		Candidate/Offi	ceholder name	9	Office sou	ght			Office h	neld	
	expenditure to benefit C/O	_										

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations N

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: 3/23 Rpt: 12/93	Turner, Christopher G. (The Honorable)  00062790
4 Date	5 Payee name
06/02/2025	American Express
6 Amount (\$) \$6,475.53	7 Payee address; City; State; Zip Code 200 Vesey St
φο, 11 ο.00	200 1000) 51
	New York, NY 10281-5525
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
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 expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
06/27/2025	American Express
Amount (\$)	Payee address; City; State; Zip Code
\$5,476.80	200 Vesey St
	New York, NY 10281-5525
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
	Great eard payment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
01/03/2025	Amli on 2nd
Amount (\$)	Payee address; City; State; Zip Code
\$2,107.72	421 W 3rd St
	Austin, TX 78701-4052
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	To Check if Austin, TX, officeholder living expense
	Austin apartment rent and utilities
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	п
,	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commiss	sion Filers)	
	Sch: 4/23 Rpt: 13/93	1	- ristopher G. (The Honorab	le)				00062790		,	
4	Date	5 Payee name	1								
	02/04/2025	Amli on 2nd									
6	Amount (\$)	7 Payee addre	ess; City; Stat	e; Zip Co	de						
	\$2,591.31	421 W 3rd	•	•							
	• •										
		Austin, TX	78701-4052								
8	PURPOSE	(a) Category (S	See Categories listed at the top of this s	chedule)	(b)	Description					
	OF EXPENDITURE	Office Over	rhead/Rental Expense			므		de of Texas. Com			
						Austin apartn		officeholder living			
						Austin apartii	ici	it rent and at	unues		
<u>a</u>	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht			Office he	ald.		
9	expenditure to benefit C/O		icenduel name	Office sou	gnt			Office fie			
	Date	Payee name									
	03/04/2025	Amli on 2nd	d								
	Amount (\$)	Payee addre	ess; City; Stat	e; Zip Co	de						
	\$2,661.32	421 W 3rd	St								
		Austin, TX	78701-4052								
	PURPOSE OF	(a) Category (S	See Categories listed at the top of this se	chedule)	(b)	Description					
	EXPENDITURE	Office Over	rhead/Rental Expense			ш		de of Texas. Comp officeholder living			
						Austin apartn					
						πασιιπ αραπιπ	ici	it rent and at	initics		
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht			Office he	eld		
	expenditure to benefit C/OI				3						
	Date	Payee name	1								
	04/03/2025	Amli on 2nd									
	Amount (\$)	Payee addre		e; Zip Co	,do						
	\$2,731.40	421 W 3rd	•	.e, Zip Co	ue						
	Ψ2,731.40	421 W 310	Ji								
		Austin, TX	78701-4052								
	PURPOSE	(a) Category (S	See Categories listed at the top of this s	chedule)	(b)	Description					
	OF EXPENDITURE	Office Ove	rhead/Rental Expense			$\Box$		de of Texas. Com			
	EXI ENDITORE							officeholder living			
						Austin apartn	ier	ıı rent and ut	unties		
	Operation ONE VIII II	0		Offi-				0‴ :	.1-1		
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ght			Office he	eid		

### 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 Ma Candidate/Officeholder/F Credit Card Payment	
1 Total pages Cabastula	
1 Total pages Schedule	
Sch: 5/23 Rpt: 14/9	Turner, Christopher G. (The Honorable) 00062790
4 Date	5 Payee name
05/05/2025	Amli on 2nd
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,732	
<del>+=</del> ,. <del>-</del> =	
	Augin TV 70701 4052
	Austin, TX 78701-4052
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	X Check if Austin, TX, officeholder living expense
	Austin apartment rent and utilities
9 Complete <u>ONLY</u> if dire expenditure to benefit	
experientare to benefit	
Date	Payee name
06/03/2025	Amli on 2nd
Amount (\$)	Payee address; City; State; Zip Code
\$2,754	71 421 W 3rd St
, , -	
	Augtin TV 70701 40F2
	Austin, TX 78701-4052
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
	Austin apartment rent and utilities
	Austin apartment rent and atmites
Complete ONLY if dire	ct Candidate/Officeholder name Office sought Office held
Complete ONLY if dire expenditure to benefit	
,	
Date	Payee name
04/08/2025	Clayton Spangler Photographic Design
Amount (\$)	Payee address; City; State; Zip Code
\$429.	00 235 Point Lick Dr
	Charleston, WV 25306-6785
DUDDOCE	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Printing Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Session panoramic photo
Complete ONLY if dire	ct Candidate/Officeholder name Office sought Office held
expenditure to benefit	• • • • • • • • • • • • • • • • • • •

### SCHEDULE F1

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

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

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

	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: 6/23 Rpt: 15/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	02/28/2025	First Data Merchant Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.02	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
8	PURPOSE	To a second seco
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Merchant account fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/03/2025	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
		1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Merchant account fee
		Moranan account 100
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	5.	
	Date	Payee name
	01/03/2025	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$129.10	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Merchant account fee
	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: 7/23 Rpt: 16/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	01/03/2025	First Data Merchant Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$27.05	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
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  Merchant account fee
		Welchant account lee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	01/03/2025	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.57	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Merchant account fee
		Welchart account lee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to benefit Gree	
	Date	Payee name
	02/03/2025	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.37	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	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
		Merchant account fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/23 Rpt: 17/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	02/03/2025	First Data Merchant Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$26.90	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
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  Merchant account fee
		Merchant account ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/03/2025	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	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  Merchant account fee
		Merchant account lee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/03/2025	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.88	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	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.
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Merchant account fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 9/23 Rpt: 18/93	Turner, Christopher G. (The Honorable)	
4	Date	5 Payee name	
	03/03/2025	First Data Merchant Services	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$0.10	5565 Glenridge Connector NE	
		Ste 2000	
		Atlanta, GA 30342-1651	
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.	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Merchant account fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	•		_
	Date	Payee name	
	05/05/2025	First Data Merchant Services	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	5565 Glenridge Connector NE	
		Ste 2000	
		Atlanta, GA 30342-1651	
	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  Merchant account fee	
		Welchant account lee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	
L	05/05/2025	First Data Merchant Services	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.95	5565 Glenridge Connector NE	
		Ste 2000	
		Atlanta, GA 30342-1651	
	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.	
	ZA ZABITORZ	Check if Austin, TX, officeholder living expense	
		Merchant account fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
			_

# SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/23 Rpt: 19/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
L	06/03/2025	First Data Merchant Services
	Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 5565 Glenridge Connector NE Ste 2000 Atlanta, GA 30342-1651
8	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  Merchant account fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	06/03/2025	First Data Merchant Services
	Amount (\$) \$19.95	Payee address; City; State; Zip Code 5565 Glenridge Connector NE Ste 2000 Atlanta, GA 30342-1651
	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  Merchant account fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
_	01/07/2025	Gutierrez, Sarah
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 401 Middle Crk
		Buda, TX 78610-2765
	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  Campaign operations consulting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 11/23 Rpt: 20/93	Turner, Christopher G. (The Honorable)	00062790
4	Date	5 Payee name	•
	02/05/2025	Gutierrez, Sarah	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
Ĭ	\$2,000.00	401 Middle Crk	
	Ψ2,000.00	401 Middle Cik	
		Buda, TX 78610-2765	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consuming Expense	rel outside of Texas. Complete Schedule T.
			stin, TX, officeholder living expense
		Campaign	operations consulting
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to benefit C/Oi	7	
	Date	Payee name	
	03/06/2025	Gutierrez, Sarah	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	401 Middle Crk	
	Ψ2,000.00	401 Middle Cik	
		Buda, TX 78610-2765	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consuming Expense	rel outside of Texas. Complete Schedule T.
			stin, TX, officeholder living expense
		Campaign	operations consulting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experialitate to betterit eyes	·	
	Date	Payee name	
	04/03/2025	Gutierrez, Sarah	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	401 Middle Crk	
		Dudo TV 70610 2765	
		Buda, TX 78610-2765	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consuling Expense	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
		l — — — — — — — — — — — — — — — — — — —	operations consulting
		Campaign	operations consuming
	0 1: 0 1: 0		000
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Ec	rms provided by Tevas E	thics Commission www.athics state ty us	Version VA 1.0 f10d0fd9

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Total manage Coloradula 54	,
1 Total pages Schedule F1:	
Sch: 12/23 Rpt: 21/93	Turner, Christopher G. (The Honorable) 00062790
4 Date	5 Payee name
05/06/2025	Gutierrez, Sarah
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	401 Middle Crk
Ψ2,000.00	401 Middle Off
	Buda, TX 78610-2765
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
	Campaign operations consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	1
Date	Payee name
06/06/2025	Gutierrez, Sarah
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	401 Middle Crk
Ψ2,000.00	TOT IMIGAIC OIK
	D. d. TV 70040 0705
	Buda, TX 78610-2765
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.
	Compaign appretions consulting
	Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to serious experi	
Date	Payee name
03/03/2025	Historic West Mansfield Texas Community Development Corporation
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1188 W Broad St
	Mansfield, TX 76063-4508
DUDDOCE	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Check if ravel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
	Fotal pages Schedule F1: Sch: 13/23 Rpt: 22/93	2 FILER NAME Turner, Christopher G. (The Honorable) 3 Filer ID (Ethics Commission Filer) 00062790	s)
_			
	Date 01/31/2025	5 Payee name Internal Revenue Service	
6 /	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$82.50	PO Box 970030	
		Saint Louis, MO 63197-0030	
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  Payroll taxes	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
[	Date	Payee name	
	02/28/2025	Internal Revenue Service	
A	Amount (\$)	Payee address; City; State; Zip Code	
	\$82.50	PO Box 970030	
		Saint Louis, MO 63197-0030	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Payroll taxes	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
[	Date	Payee name	
	03/31/2025	Internal Revenue Service	
-	Amount (\$)	Payee address; City; State; Zip Code	
	\$82.50	PO Box 970030	
		Saint Louis, MO 63197-0030	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
		Payroll taxes	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	

#### 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 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: 14/23 Rpt: 23/93 Turner, Christopher G. (The Honorable) 00062790 4 Date Payee name 04/30/2025 Internal Revenue Service 6 Amount (\$) Payee address; City; State; Zip Code \$82.50 PO Box 970030 Saint Louis, MO 63197-0030 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. Salaries/Wages/Contract Labor **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/OH Date Payee name 05/30/2025 Internal Revenue Service Amount (\$) Payee address; City; State; Zip Code \$82.50 PO Box 970030 Saint Louis, MO 63197-0030 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **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/OH Date Payee name 06/30/2025 Internal Revenue Service Amount (\$) Payee address: City; State; Zip Code \$82.50 PO Box 970030 Saint Louis, MO 63197-0030 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **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/OH

## SCHEDULE F1

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

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: 15/23 Rpt: 24/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	01/16/2025	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$85.28	2632 Marine Way
		Mountain View, CA 94043-1126
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payroll processing fee
		r dyron processing ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<b>—</b>	Data	David and the second se
	Date	Payee name
	02/18/2025	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$91.67	2632 Marine Way
		Mountain View, CA 94043-1126
	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
		Payroll processing fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	01/27/2025	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.16	2632 Marine Way
		Mountain View, CA 94043-1126
	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.
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		1099 Processing
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/23 Rpt: 25/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	04/16/2025	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$78.88	2632 Marine Way
		Mountain View, CA 94043-1126
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll processing fee
		Tayron processing too
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
<b>—</b>	Data	David and the second se
	Date	Payee name
	05/16/2025	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.88	2632 Marine Way
		Mountain View, CA 94043-1126
	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
		Payroll processing fee
	Operation ONLY if allowed	On didn't Office helds
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/16/2025	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.88	2632 Marine Way
		Mountain View, CA 94043-1126
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll processing fee
		i dyroli processing lee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	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: 17/23 Rpt: 26/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	03/03/2025	John Lopez Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	2603 Florence St
		Grand Prairie, TX 75052-3013
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		1 ontical contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
_	Date	Dougo nama
	05/28/2025	Payee name
		John Lopez Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2603 Florence St
		Grand Prairie, TX 75052-3013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Folitical contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Davies same
	Date 04/14/2025	Payee name  Lone Star Project Non-Federal Account
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	6 E St SE
		Washington, DC 20003-2611
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		1 ontical contribution
_	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 Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
_	Total manus Oct 11 51			
1	Total pages Schedule F1:			
L	Sch: 18/23 Rpt: 27/93	Turner, Christopher G. (The Honorable) 00062790		
4	Date	5 Payee name		
	02/20/2025	Mansfield ISD Education Foundation		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$500.00	609 E Broad St		
	Ψ300.00	003 E Bload St		
		Mansfield, TX 76063-1766		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
		Candidate/Officeholder/Political Committee		
		Event sponsorship		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
L	CAPCHURUIC TO DEFICIR C/OF	<u> </u>		
	Date	Payee name		
	01/03/2025	NGP Van		
	Amount (\$)	Payee address; City; State; Zip Code		
\$469.04 655 15th St NW				
		Ste 650		
		Washington, DC 20005-5738		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description		
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Campaign database subscription		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·		
<u> </u>	Data			
	Date	Payee name		
	02/07/2025	NGP Van		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$469.04	655 15th St NW		
		Ste 650		
		Washington, DC 20005-5738		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Campaign database subscription		
L				
	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 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	
-	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 19/23 Rpt: 28/93	Turner, Christopher G. (The Honorable)  Certifics Continues Contin
4	Date 03/05/2025	5 Payee name NGP Van
6	Amount (\$) \$469.04	7 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign database subscription
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/03/2025	NGP Van
	Amount (\$) \$469.04	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign database subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 05/05/2025	Payee name NGP Van
	Amount (\$) \$469.04	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign database subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political 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/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: 20/23 Rpt: 29/93	Turner, Christopher G. (The Honorable) 00062790		
4	Date	5 Payee name		
	06/04/2025	NGP Van		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$469.04	655 15th St NW		
		Ste 650		
		Washington, DC 20005-5738		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
		Campaign database subscription		
	l	Campaigh database subscription		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
	Date	Payee name		
	02/28/2025	Peterson, Kelly		
	Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00 1000 San Marcos St				
		Unit 155		
		Austin, TX 78702-2659		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Salaries/Wages/Contract Labor		
		Compaign colory		
	l	Campaign salary		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	<b>S</b>		
	Date	Payee name		
	01/31/2025	Peterson, Kelly		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$1,000.00	1000 San Marcos St		
	Ψ1,000.00	Unit 155		
		Austin, TX 78702-2659		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Mages/Contract Lahor  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		
		Campaign salary		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	H		

### SCHEDULE F1

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

Candidate/Officeholder/Politic Credit Card Payment			nmittee Legal Services Salaries/Wag	Salaries/Wages/Contract Labor				OTHER (enter a category not listed above)		
			The Instruction Guide explains how to comp	ple	te this form.					
1	Total pages Schedule F1:	2	FILER NAME					(Ethics Commission F	ilers)	
	Sch: 21/23 Rpt: 30/93		Turner, Christopher G. (The Honorable)				00062790			
4	Date	5	Payee name		•					
	03/31/2025	Peterson, Kelly								
6	Amount (\$)	7	Payee address; City; State; Zip Code	e						
•	\$1,000.00		1000 San Marcos St	-						
Unit 155										
		l								
		⊢	Austin, TX 78702-2659							
8	PURPOSE OF	(a)	(	b)	Description					
	EXPENDITURE		Salaries/Wages/Contract Labor		<b>=</b>		de of Texas. Comp officeholder living			
					Campaign sal			СМРСПОС		
					μ		'			
9	Complete ONLY if direct		L Candidate/Officeholder name Office sough	ht			Office he	-id		
Ĭ	expenditure to benefit C/OI		and date, emberioder name				Omoc ne			
_	Data	Г								
	Date		Payee name							
	02/28/2025		Peterson, Kelly							
	Amount (\$)		Payee address; City; State; Zip Code	е						
\$245.63			1000 San Marcos St							
			Unit 155							
			Austin, TX 78702-2659							
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	b)	Description					
	OF EXPENDITURE		Travel Out of District		<b>느</b>		de of Texas. Com			
	EXI ENDITORE			Check if Austin, TX, officeholder living expense  Mileage reimbursement						
					Mileage reimb	ur	sement			
	Operation ONLY if dispose	<u> </u>		l- 4			O#: I	I al		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sough	nt			Office he	eia		
	·	_								
	Date		Payee name							
	04/30/2025		Peterson, Kelly							
	Amount (\$)		Payee address; City; State; Zip Code	е						
	\$1,000.00		1000 San Marcos St							
			Unit 155							
			Austin, TX 78702-2659							
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	b)	Description					
	OF EXPENDITURE		Salaries/Wages/Contract Labor			utsi	de of Texas. Com	olete Schedule T.		
	EXPENDITURE		-				officeholder living	expense		
					Campaign sal	ary	/			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sough	ht			Office he	eld		
	experiulture to beliefit C/OI	1		_						
_		_		_						

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment									
L	Creuit 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: 22/23 Rpt: 31/93	Turner, Christopher G. (The Honorable) 00062790							
4	Date	5 Payee name	_						
	05/30/2025	Peterson, Kelly							
6	Amount (\$)	7 Payee address; City; State; Zip Code	_						
	\$1,000.00	1000 San Marcos St							
	,	Unit 155							
		Austin, TX 78702-2659							
8	PURPOSE		_						
0	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Campaign salary							
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
_	Date	Payee name	_						
	06/30/2025	Peterson, Kelly							
	Amount (\$)	Payee address; City; State; Zip Code	_						
	\$1,000.00	1000 San Marcos St							
	Ψ2,000.00	Unit 155							
		Austin, TX 78702-2659	_						
	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							
		Campaign salary							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_						
	expenditure to benefit C/OI	1							
	Date	Payee name	=						
	03/31/2025	Turner, Chris							
	Amount (\$)	Payee address; City; State; Zip Code	-						
	\$611.17	3060 Nadar							
	+								
		Grand Prairie, TX 75054-6792							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if Austin, TX, officeholder living expense							
		Expense Check if Austin, TX, officeholder living expense Mileage reimbursement							
		Timoago rominarooment							
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_						
	expenditure to benefit C/O								
			_						

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/23 Rpt: 32/93	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	03/31/2025	Turner, Chris
6	Amount (\$) \$1,468.47	7 Payee address; City; State; Zip Code 3060 Nadar
		Grand Prairie, TX 75054-6792
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Schedule G reimbursement
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	06/30/2025	Turner, Chris
	Amount (\$) \$240.38	Payee address; City; State; Zip Code 3060 Nadar  Crand Prairie TV 75054 6703
		Grand Prairie, TX 75054-6792
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mileage reimbursement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/30/2025	Turner, Chris
	Amount (\$) \$298.30	Payee address; City; State; Zip Code 3060 Nadar
		Grand Prairie, TX 75054-6792
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Schedule G reimbursement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office 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 Inst	ruction Guide explains how	The Instruction Guide explains how to complete this form.						
2 FILER NAME		3 Filer ID (Ethics Commission Filers)						
Turner, Christopher	G. (The Honorable)	00062790						
		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00			
(a) Amount Charged	(b) Date of Charge		r Paid					
\$1,046.82	04/20/2025	06/02/2025						
(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
Hertz		8501 Williams Rd						
		Estero, FL 33928-3325						
	of this sahadula)	` '						
1 ' '	,	Car rental in Austin						
(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense				
Candidate/Officeholder	name Offic	e sought	Office held					
(a) Amount Charged \$8.66	(b) Date of Charge 01/02/2025	(c) Date(s) Credit Card Issue 02/03/2025	er Paid					
(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
Hill Country Springs	5	10019 S I 35						
(See Categories listed at the top		Office water delivery						
+·· =		<u> </u>		ense				
Candidate/Officeholder	name Offic	e sought	Office held					
(a) Amount Charged \$1,030.00	(b) Date of Charge 01/16/2025	(c) Date(s) Credit Card Issue 02/03/2025	er Paid					
(a) Payee name	L	(b) Payee address;	City,	State,	Zip Code			
Legislative Study Group		PO Box 12943						
		Austin, TX 78711-2943						
(a) Category	of this schodulo)	(b) Description						
Fees	oi tilis Scriedule)	Dues						
\(\frac{1}{2}\)   \(\frac{1}{2}\)	<u> </u>	<u> </u>		ense				
Candidate/Officeholder	name Offic	e sought	Office held					
	2 FILER NAME Turner, Christopher Name of final Americal  (a) Amount Charged \$1,046.82  (a) Payee name Hertz  (a) Category (See Categories listed at the top Transportation Equipn Expense (c) Check if travel outside Candidate/Officeholder  (a) Amount Charged \$8.66  (a) Payee name Hill Country Springs  (a) Category (See Categories listed at the top Office Overhead/Rent  (c) Check if travel outside Candidate/Officeholder  (a) Amount Charged \$1,030.00  (a) Payee name Legislative Study G  (a) Category (See Categories listed at the top Fees  (c) Check if travel outside	Turner, Christopher G. (The Honorable)  Name of financial institution American Express  (a) Amount Charged \$1,046.82  (b) Date of Charge 04/20/2025  (a) Payee name Hertz  (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office  (a) Amount Charged \$8.66  01/02/2025  (a) Payee name Hill Country Springs  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office  (a) Amount Charged \$1,030.00  (b) Date of Charge 91,030.00  01/16/2025  (a) Payee name Legislative Study Group  (a) Category (See Categories listed at the top of this schedule) Fees  (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Cofficeholder name Cofficeholde	FILER NAME   Turner, Christopher G. (The Honorable)	2 FILER NAME   Turner, Christopher G. (The Honorable)   3 Filer ID (Ethi   00062790	2 FILER NAME Turner, Christopher G. (The Honorable)  Name of financial institution American Express American Express American Express  (a) Amount Charged \$1,046.82 (b) Date of Charge 04/20/2025 (c) Date(s) Credit Card Issuer Paid 06/02/2025 (a) Payee name Hertz (b) Payee address; City, State, 8501 Williams Rd Estero, FL 33928-3325 (b) Description Car rental in Austin Candidate/Officeholder name Office sought Office Sought Office held Office water delivery Office Overhead/Rental Expense (c) Check if travel outside of Toxas. Complete Schedule) This payee address; City, State, 05 Description Car rental in Austin Cardidate/Officeholder name Office sought Office held Office			

## 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 Insti	ruction Guide explains how	to complete this form.						
1 Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)			
Sch: 2/51 Rpt: 34/93	Turner, Christopher	r G. (The Honorable)		00062790					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITED EXPENDITURES CHARGED TO A C	<b> \$</b>	<b>\$</b> 4,225.00				
6 PAYMENT	(a) Amount Charged \$397.58	(b) Date of Charge 01/09/2025	(c) Date(s) Credit Card 02/03/2025	d Issuer Paid					
7 PAYEE	(a) Payee name (b) Payee address; 110 E 2nd St  Austin, TX 78701-4649				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 Lodging in Austin for meetings						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder living e	X, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					
PAYMENT	(a) Amount Charged \$27.05	(b) Date of Charge 01/17/2025	(c) Date(s) Credit Card 02/03/2025	d Issuer Paid					
PAYEE	(a) Payee name  Amazon  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Payee address; City, State, 440 Terry Ave N  Seattle, WA 98109-5210			Zip Code			
PURPOSE OF EXPENDITURE  X Political			(b) Description Office supplies	<del></del>					
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					
PAYMENT	(a) Amount Charged \$18.74	(b) Date of Charge 01/14/2025	(c) Date(s) Credit Card 02/03/2025	d Issuer Paid					
PAYEE	(a) Payee name Uber	•	(b) Payee address; 1544 Market St Ste 400 San Francisco, CA	City, 94102-6007	State,	Zip Code			
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related Expense			(b) Description Ground transportati						
Non-Political Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	e sought	ustin, TX, officeholder living e	expense					

## 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 Insti	ruction Guide explains how	to complete this form.						
1 Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)					
Sch: 3/51 Rpt: 35/93	Turner, Christopher	G. (The Honorable)	00062790						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00			
6 PAYMENT	(a) Amount Charged \$64.93	(b) Date of Charge 01/09/2025	(c) Date(s) Credit Card Issuer 02/03/2025	r Paid					
7 PAYEE	(a) Payee name Michael's		(b) Payee address; 3201 Bee Caves Rd Austin, TX 78746-6771	City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE  X Political	EXPENDITURE (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense			(b) Description Decor for Capitol office					
Non-Political	· ·	of Texas. Complete Schedule T.		K, officeholder living expense					
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	esought	Office held					
PAYMENT	(a) Amount Charged \$345.32	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer 02/03/2025	r Paid					
PAYEE	(a) Payee name  Dell		(b) Payee address;  1 Dell Way	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	•	Round Rock, TX 78682-7000  (b) Description  Campaign computer equipment						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Check if Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	esought	Office held					
PAYMENT	(a) Amount Charged \$30.73	(b) Date of Charge 01/12/2025	(c) Date(s) Credit Card Issuer 02/03/2025	r Paid					
PAYEE	(a) Payee name HEB		(b) Payee address; 2701 E 7th St Austin, TX 78702-3907	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense		(b) Description Snacks and beverage for Austin office							
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		officeholder living expe	nse				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	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 Inst	ruction Guide explains how	to complete this forr	n.	_			
1 Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 4/51 Rpt: 36/93	Turner, Christopher	G. (The Honorable)			00062790			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UN EXPENDITURI CHARGED TO CARD				00	
6 PAYMENT	(a) Amount Charged \$400.00	(b) Date of Charge 01/17/2025	(c) Date(s) Credit 02/03/2025	Card Issuer	Paid			
7 PAYEE	(a) Payee name Texas House LGB1	<sup>-</sup> Q Caucus	(b) Payee address PO Box 2960 Austin, TX 7876		City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Caucus dues					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX,	X, officeholder living expense			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
PAYMENT	(a) Amount Charged \$402.95	(b) Date of Charge 01/19/2025	(c) Date(s) Credit 02/03/2025	Card Issuer	Paid			
PAYEE	(a) Payee name Intuit  (a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Payee address 2632 Marine W Mountain View,	ay	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  X Political			(b) Description Accounting soft					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 01/15/2025	(c) Date(s) Credit 02/03/2025	Card Issuer	Paid			
PAYEE	(a) Payee name Store More Storage	•	(b) Payee address 4660 S State H Grand Prairie, 1	ighway 360		State,	Zip Code	
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense			(b) Description Campaign stora					
Non-Political  Complete ONLY if direct expenditure to benefit C/OH	Chec e sought	ck if Austin, TX,	officeholder living expe	ense				

### 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 Insti	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 5/51 Rpt: 37/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$332.62	(b) Date of Charge 01/16/2025	(c) Date(s) 02/03/20	) Credit Card Issuei 125	r Paid		
7	PAYEE	(a) Payee name Texas Tribune		FI 6 Austin, T	gress Ave X 78701-2102	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri News su	ption bscription			
	Non-Political	<u> </u>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
<b>9</b> е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$303.02	(b) Date of Charge 01/17/2025	(c) Date(s) 02/03/20	) Credit Card Issuer 125	r Paid		
	PAYEE (a) Payee name  The Escape Game		(b) Payee 405 Red Austin, T		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$89.84	(b) Date of Charge 01/16/2025	(c) Date(s) 02/03/20	) Credit Card Issuer 125	r Paid		
	PAYEE	(a) Payee name Google			address; aphitheatre Pkwy a View, CA 94043	City, 3-1351	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Google Workspace subscription		•		
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense			
е	Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Off			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 (Ethi	cs Commiss	sion Filers)			
	Sch: 6/51 Rpt: 38/93	Turner, Christopher	G. (The Honorable)			00062790					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.0	00			
6	PAYMENT	(a) Amount Charged \$525.00	(b) Date of Charge 01/08/2025	(c) Date(s) ( 02/03/202	Credit Card Issuer 5	Paid					
7	PAYEE	(a) Payee name  Heart Led Digital		(b) Payee at 134 S Cyp	oress Ave	City,	State,	Zip Code			
L					, OH 43222-140	<u>)4                                    </u>					
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Consulting Expense	of this schedule)	(b) Descripti Campaign	ion digital consultir	ng					
	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 Office	sought		Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$64.94	(b) Date of Charge 01/17/2025	(c) Date(s) ( 02/03/202	Credit Card Issuer 5	Paid					
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
		Amazon		440 Terry	Ave N						
L				Seattle, W	'A 98109-5210						
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	officeholder living exp	noneo				
┝	Complete ONLY if direct	Candidate/Officeholder		sought	Crieck if Austiri, 1A,	Office held	Jense				
е	xpenditure to benefit C/OH	Garialdate/Officeriolder	Tiame Office	Jought		Office field					
	PAYMENT	(a) Amount Charged \$600.00	(b) Date of Charge 01/17/2025	(c) Date(s) ( 02/03/202	Credit Card Issuer 5	Paid					
	PAYEE (a) Payee name  Arlington ISD Education		Ste 103	ddress; ioneer Pkwy TX 76013-6368	City,	State,	Zip Code				
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde		(b) Descripti Event spoi							
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense					
е	Complete ONLY if direct candidate/Officeholder name expenditure to benefit C/OH			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 (Ethic	s Commiss	ion Filers)		
	Sch: 7/51 Rpt: 39/93	Turner, Christopher	G. (The Honorable)				00062790				
4	CREDIT CARD ISSUER		ncial institution revious	5	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	4,225.0	00		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$112.50	01/03/2025	0	2/03/2025	j					
7	PAYEE	(a) Payee name		(b	) Payee ad	dress;	City,	State,	Zip Code		
		Amazon		4	40 Terry A	Ave N					
				Seattle, WA 98109-5210							
8	PURPOSE OF	(a) Category		(b	) Description	on					
	EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent		0	Office supp	lies					
	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	ce so	ought	•	Office held				
expenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$30.92	01/21/2025	0	2/03/2025	j					
	PAYEE	(a) Payee name		(b	) Payee ad	dress;	City,	State,	Zip Code		
		Amazon		4	40 Terry A	Ave N					
				s	eattle, WA	98109-5210					
	PURPOSE OF	(a) Category		'	) Description						
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		0	Office supp	llies					
	X Political		iai Experies								
	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	ce so	ought		Office held				
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$3.00	01/21/2025	0	2/03/2025	)					
H	PAYEE	(a) Payee name	l	(b	) Payee ad	dress;	City,	State,	Zip Code		
				1	544 Marke	et St					
		Uber		s	ite 400						
				s	an Franci	sco, CA 94102	-6007				
	PURPOSE OF	(a) Category		(b	) Description	on					
	EXPENDITURE	(See Categories listed at the top  Transportation Equipr		G	Fround trai	nsportation					
	X Political	Expense	nont / tha related								
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 sought			ought		Office held						
е	xpenditure 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 (Ethic	cs Commiss	sion Filers)				
Sch: 8/51 Rpt: 40/93	Turner, Christopher	r G. (The Honorable)		00062790						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$21.32	01/14/2025	02/03/2025							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Uber		1544 Market St Ste 400 San Francisco, CA 94102	2-6007						
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE  X Political	(See Categories listed at the top Transportation Equipr Expense	*	Ground transportation							
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 \$15.52	(b) Date of Charge 01/14/2025	(c) Date(s) Credit Card Issue 02/03/2025	r Paid						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Uber		1544 Market St Ste 400 San Francisco, CA 94102	2-6007						
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE  X Political	(See Categories listed at the top Transportation Equipr Expense		Ground transportation							
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense					
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$140.71	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issue 02/03/2025	r Paid						
PAYEE	(a) Payee name	l .	(b) Payee address;	City,	State,	Zip Code				
			1 Dell Way							
	Dell									
			Round Rock, TX 78682-7	000						
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign computer equi	pment						
X Political	X Political Office Overhead/Kental Expense									
Non-Political (c) Check if travel outside of Texas. Complete Schedule			ule 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						

## 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 (Ethic	s Commis	sion Filers)				
	Sch: 9/51 Rpt: 41/93	Turner, Christopher	G. (The Honorable)		00062790						
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$	4,225.0	20				
	ISSUER	see pi	revious	CHARGED TO A CREDIT		4,223.0	50				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
		\$253.40	01/11/2025	02/03/2025							
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		HEB		2701 E 7th St							
L				Austin, TX 78702-3907							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cobodule)	(b) Description							
	X Political	Office Overhead/Rent		Supplies for first day of se	ession						
	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						
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
		\$20.00	01/02/2025	02/03/2025							
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		AT&T		208 S Akard St							
				Dallas, TX 75202-4206							
	PURPOSE OF	(a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Austin apartment utilities							
	X Political		<u>-</u> ,,peee								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense					
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	(c) Date(s) Credit Card Issue	r Paid						
		\$50.66	01/16/2025	02/03/2025							
Г	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
		AT0T		208 S Akard St							
		AT&T									
L				Dallas, TX 75202-4206							
	PURPOSE OF (a) Category  EXPENDITURE (See Categories listed at the top of this schedule)		of this schedule)	(b) Description							
		Office Overhead/Rent		Austin apartment utilities							
	X Political										
<u> </u>	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	X Check if Austin, TX,		ense					
_ ا	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
L e	xpenditure 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 Insti	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 10/51 Rpt: 42/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 01/04/2025	(c) Date(s) 02/03/20	) Credit Card Issuer 25	Paid		
7	PAYEE	(a) Payee name  Verizon Wireless			throw Park Ln	City,	State,	Zip Code
Ļ	DUDDOCE OF	(a) Category		(b) Descrip	ry, FL 32746-561			
8	PURPOSE OF EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent			n hotspot service	•		
	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 Office	e sought		Office held		
Э	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$63.64	(b) Date of Charge 02/03/2025	(c) Date(s) 03/03/20	) Credit Card Issuer 25	<sup>*</sup> Paid		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Hill Country Springs		5	10019 S	l 35			
L				Austin, T	X 78747			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	otion ater delivery			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$151.54	(b) Date of Charge 02/01/2025	(c) Date(s) 03/03/20	) Credit Card Issuer 25	Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee 440 Terry Seattle, \		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office supplies				
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense		
E	Complete ONLY if direct candidate/Officeholder name over expenditure to benefit C/OH			e sought		Office held		
l _								

## 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 (Ethic	s Commiss	sion Filers)		
	Sch: 11/51 Rpt: 43/93	Turner, Christopher	G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.0	00		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid				
		\$21.86	02/12/2025	03/03/202	5					
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
				1544 Mark	cet St					
		Uber		Ste 400						
				San Franc	isco, CA 94102-	-6007				
8	PURPOSE OF	(a) Category		(b) Descript						
	EXPENDITURE  X Political	(See Categories listed at the top Transportation Equipr	*	Ground tra	ansportation					
	Non-Political	Expense  (c) Check if travel outside	of Texas. Complete Schedule T.		Chook if Austin, TV	officeholder living exp	0000			
┡	Complete ONLY if direct	Candidate/Officeholder	·	<u>L</u> e sought	Crieck if Austin, TX,	Office held	ense			
	expenditure to benefit C/OH			o oougint		Omoo noid				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	Paid				
		\$218.52	02/11/2025	03/03/202						
		\$218.52	02/11/2025							
	PAYEE	(a) Payee name		(b) Payee a	ddress:	City,	State,	Zip Code		
		(a) i a) se mame		3201 Bee	·	0.09,	Otato,	p		
		Michael's		0202200	- Car 55 . ta					
				Austin, TX	78746-6771					
	PURPOSE OF	(a) Category		(b) Descript						
	EXPENDITURE	(See Categories listed at the top		Frames fo	r constituent cer	rtificates				
	X Political	Gift/Awards/Memorial	s Expense							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
ex	penditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid				
		\$323.45	02/04/2025	03/03/202	5					
	PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code		
		Cort Furniture Rent	·al		al Creek Blvd					
		Cont i difficare recit	a	Ste 400						
				<del> </del>	78757-6853					
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)		of this schedule)	(b) Descript		un matal				
		Office Overhead/Rent	*	Austin apa	artment furniture	rentai				
	X Political									
	Non-Political	(c) constant action outside of routine complete constant :			Check if Austin, TX,	officeholder living exp	ense			
				e sought		Office held				
ex	kpenditure 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

	I ne insti	ruction Guide explains now	to complete ti	nis torm.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 12/51 Rpt: 44/93	Turner, Christopher	G. (The Honorable)			00062790		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.0	00
6 PAYMENT	(a) Amount Charged \$184.01	(b) Date of Charge 01/24/2025	(c) Date(s) 03/03/202	Credit Card Issuer 25	Paid		
7 PAYEE	(a) Payee name Target			address; een White Blvd < 78704-7525	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Office sup				
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 \$47.07	(b) Date of Charge 01/25/2025	(c) Date(s) 03/03/202	Credit Card Issuer 25	<sup>*</sup> Paid		
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
	AT&T		208 S Aka	ard St < 75202-4206			
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Campaigr	tion n phone service			
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		
PAYMENT	(a) Amount Charged \$2,700.00	(b) Date of Charge 02/17/2025	(c) Date(s) 03/03/202	Credit Card Issuer 25	Paid		
PAYEE	(a) Payee name  Dan Dipert Coache	S		address; rioneer Pkwy TX 76013-2802	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Descrip Buses for	tion District 101 Day	,		
Non-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 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 (Ethi	cs Commiss	sion Filers)		
l	Sch: 13/51 Rpt: 45/93	Turner, Christopher	r G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER	1	ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	4,225.0	00		
6	PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 02/04/2025	(c) Date(s) ( 03/03/202	Credit Card Issuer 5	Paid				
7	PAYEE	(a) Payee name  Verizon Wireless			row Park Ln	City,	State,	Zip Code		
L		( ) -			, FL 32746-561	2				
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Campaign	notspot service					
	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 Office	e sought		Office held				
€	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$210.56	(b) Date of Charge 02/17/2025	(c) Date(s) ( 03/03/202	Credit Card Issuer 5	Paid				
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code		
		Target		2300 W Be	en White Blvd					
L				<del> </del>	78704-7525					
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	officeholder living exp	noneo			
⊢	Complete ONLY if direct	Candidate/Officeholder		<u>L</u> e sought	Check if Austin, 1A,	Office held	Jense			
e	expenditure to benefit C/OH	Garrandato, Girisonolasi		o coug		Cinec neid				
	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 01/22/2025	(c) Date(s) 0 03/03/202	Credit Card Issuer 5	Paid				
Г	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
		Shay Cathey for DN	NC	928 Stillme	eadow Rd					
L				<del> </del>	75232-2528					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Contributions/Donatio		(b) Descripti						
	X Political	Candidate/Officeriolder/1 official Committee								
L	Non-Political	(c) and an action detailed on the Action described and the			Check if Austin, TX,	officeholder living exp	ense			
e	Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name			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:	es Schedule F4: 2 FILER NAME					s Commiss	sion Filers)		
	Sch: 14/51 Rpt: 46/93	Turner, Christophe	r G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.0	00		
6	PAYMENT	(a) Amount Charged \$519.23	(b) Date of Charge 02/13/2025	(c) Date(s) 0 03/03/202	Credit Card Issuer 5	r Paid				
7	PAYEE	(a) Payee name  Mansfield ISD Educ	cation	(b) Payee at 609 E Broad Mansfield,		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde		(b) Descripti Rally Day						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct xpenditure to benefit C/OH					Office held				
	PAYMENT	(a) Amount Charged \$585.00	(b) Date of Charge 01/22/2025	(c) Date(s) ( 03/03/202		r Paid				
	PAYEE	YEE (a) Payee name  Texas AFL-CIO Young Active		(b) Payee at 1106 Lava		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees		(b) Descripti Conference	ion e fee					
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.	L	Check if Austin, TX,	officeholder living exp	ense			
e:	Complete ONLY if direct complete to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 02/17/2025	(c) Date(s) ( 03/03/202	Credit Card Issuer 5	r Paid				
	PAYEE	(a) Payee name  Dan Dipert Coache	s		ddress; oneer Pkwy TX 76013-2802	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  X Political	PENDITURE (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Descripti Buses for	District 101 Day					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense				
e	Complete ONLY if direct expenditure to benefit C/OH			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 Insti	ruction Guide explains how	to complete	this form.	(	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 15/51 Rpt: 47/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 02/15/2025	(c) Date(s) 03/03/20	Credit Card Issue 25	er Paid		
7	PAYEE	(a) Payee name Store More Storage			address; state Highway 36 airie, TX 75052-		State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri		4432		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	x, officeholder living exp	ense	
<b>9</b> e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$237.07	(b) Date of Charge 02/04/2025	(c) Date(s) 03/03/20	Credit Card Issue 25	er Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee 440 Terry		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$156.00	(b) Date of Charge 02/15/2025	(c) Date(s) 03/03/20	Credit Card Issue 25	er Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee 440 Terry Seattle, V		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	al Expense	(b) Descrip Office su	pplies			
	Non-Political				Check if Austin, TX	, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought					Office held			
l								

## 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 (Ethic	s Commis	sion Filers)		
	Sch: 16/51 Rpt: 48/93	Turner, Christopher	G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	4,225.0	00		
6	PAYMENT	(a) Amount Charged \$10.81	(b) Date of Charge 01/28/2025	(c) Date(s) 03/03/20	Credit Card Issue 25	r Paid				
7	PAYEE	(a) Payee name Amazon		(b) Payee 440 Terry Seattle, V		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descrip	otion					
	Non-Political		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 \$99.57	(b) Date of Charge 01/23/2025	(c) Date(s) 03/03/20	Credit Card Issue 25	r Paid				
	PAYEE (a) Payee name  Snarfs Sandwiches				address; dical Arts St X 78705-3332	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip	otion					
	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 \$29.27	(b) Date of Charge 01/30/2025	(c) Date(s) 03/03/20	Credit Card Issue 25	r Paid				
	PAYEE	(a) Payee name Amazon		(b) Payee 440 Terry Seattle, V		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  X Political Non-Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Office supplies						
(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c				0 001:24	Check if Austin, TX,	officeholder living expe	ense			
е	Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name enditure to benefit C/OH				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 Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:						sion Filers)
Sch: 17/51 Rpt: 49/93	Turner, Christopher	G. (The Honorable)		00062790		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD	\$	4,225.0	00
6 PAYMENT	(a) Amount Charged \$39.00	(b) Date of Charge 02/01/2025	(c) Date(s) Credit Card 03/03/2025	Issuer Paid		
7 PAYEE	(a) Payee name Amazon		(b) Payee address; 440 Terry Ave N Seattle, WA 98109-5	State,	Zip Code	
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office supplies			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aus	stin, TX, officeholder living e	expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$70.27	(b) Date of Charge 01/23/2025	(c) Date(s) Credit Card 03/03/2025	Issuer Paid		
PAYEE	(a) Payee name Uber Eats		(b) Payee address; 1455 Market St San Francisco, CA 9	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Description Meal for staff	71200 1301		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aus	stin, TX, officeholder living e	xpense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$6.37	(b) Date of Charge 01/23/2025	(c) Date(s) Credit Card 03/03/2025	Issuer Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 9	City, 94102-6007	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political     Non-Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	ment And Related	(b) Description Ground transportation			
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Offic	Office sought  Check if Austin, TX, officeholder living expens 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 Inst	ruction Guide explains how	to complete th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	s Commiss	sion Filers)
	Sch: 18/51 Rpt: 50/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
		\$22.80	01/23/2025	03/03/202	5			
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
				1544 Mark	cet St			
		Uber		Ste 400				
				San Franc	isco, CA 94102	-6007		
8	PURPOSE OF	(a) Category	601	(b) Descripti				
	EXPENDITURE  X Political	(See Categories listed at the top Transportation Equipr Expense	*	Ground tra	ansportation			
				officeholder living expe	ense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
ex	penditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	. , ,	Credit Card Issuer	Paid		
		\$30.37	02/12/2025	03/03/202	5			
	PAYEE	TEE (a) Payee name (b) Payee address;			City,	State,	Zip Code	
				1544 Mark				
		Uber		Ste 400				
				San Franc	isco, CA 94102	-6007		
	PURPOSE OF	(a) Category		(b) Descripti	ion			
	EXPENDITURE	(See Categories listed at the top		Ground tra	ansportation			
	X Political	Transportation Equipr Expense	Hent And Neiated					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Ĺ	Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
ex	kpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
		\$12.52	01/23/2025	03/03/202	5			
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Uber		1544 Mark	et St			
		Obei		Ste 400				
					isco, CA 94102	-6007		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
		Transportation Equipr	· ·	Ground tra	ansportation			
	X Political	Expense						
	Non-Political				Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct					Office held		
ex	kpenditure 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

l		The Inst	ruction Guide explains how	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)						
	Sch: 19/51 Rpt: 51/93	Turner, Christopher	G. (The Honorable)		00062790								
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00						
6	PAYMENT	(a) Amount Charged \$31.86	(b) Date of Charge 01/22/2025	(c) Date(s) Credit Card Issue 03/03/2025	r Paid								
7	PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102	City, 2-6007	State,	Zip Code						
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Ground transportation									
	Non-Political				, officeholder living exp	ense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held									
	PAYMENT	(a) Amount Charged \$5.00	(b) Date of Charge 02/11/2025	(c) Date(s) Credit Card Issue 03/03/2025	r Paid								
	PAYEE	(a) Payee name Uber	(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 94102	City, 2-6007	State,	Zip Code							
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Ground transportation									
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	ense							
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held								
	PAYMENT	(a) Amount Charged \$70.66	(b) Date of Charge 02/16/2025	(c) Date(s) Credit Card Issue 03/03/2025	r Paid								
	PAYEE	(a) Payee name AT&T		(b) Payee address; 208 S Akard St Dallas, TX 75202-4206	City,	State,	Zip Code						
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Austin apartment utilities									
L	Non-Political	(*) <b>—</b>	of Texas. Complete Schedule T.		, officeholder living exp	ense							
ε	Complete ONLY 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 -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 (Ethi	cs Commis	sion Filers)
	Sch: 20/51 Rpt: 52/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$89.84	(b) Date of Charge 02/16/2025	(c) Date(s) 03/03/20	Credit Card Issuer 25	Paid		
7	PAYEE	(a) Payee name Google		(b) Payee address; City, State, 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351				
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Google Workspace Subscription				
				Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct expenditure to benefit C/OH					Office held		
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(a) Data(s)	Cradit Card Issuer	Doid		
	PATMENT	(a) Amount Charged \$1,188.00	(b) Date of Charge 02/10/2025	03/03/20	Credit Card Issuer 25	Palu		
	PAYEE	(a) Payee name Gain		(b) Payee 1101 Brid Ph S Miami. F		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descrip		it platform subs	scription	
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$1,606.16	(b) Date of Charge 02/18/2025	(c) Date(s) 03/03/20	Credit Card Issuer 25	Paid		
	PAYEE	(a) Payee name Fajita Pete's	<u> </u>		address; salcones Dr X 78731-4907	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	nse	(b) Descrip Catering	for District 101 D			
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	o cought	Check if Austin, TX,	Office hold	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
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## 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 thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	s Commiss	sion Filers)
	Sch: 21/51 Rpt: 53/93	Turner, Christophe	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 03/04/2025	(c) Date(s) C 04/03/2025	Credit Card Issuer	r Paid		
7	PAYEE	(a) Payee name  Verizon Wireless		(b) Payee address; City, State, 899 Heathrow Park Ln  Lake Mary, FL 32746-5612				
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Reni	tal Expense	(b) Description Campaign hotspot service				
					Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$15.69	(b) Date of Charge 02/24/2025	(c) Date(s) C 04/03/2025	Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee ac 440 Terry A		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Reni	tal Expense	(b) Description Office supp	on olies			
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.	L	Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$156.00	(b) Date of Charge 03/18/2025	(c) Date(s) C 04/03/2025	Credit Card Issuer	Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee ac 440 Terry A		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Office supp	olies			
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure 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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 22/51 Rpt: 54/93	Turner, Christopher	r G. (The Honorable)		00062790			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$47.05	02/24/2025	04/03/2025				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	AT&T		208 S Akard St				
			Dallas, TX 75202-4206				
8 PURPOSE OF	(a) Category	(4)	(b) Description				
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent		Campaign phone service				
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			
	\$386.76	03/04/2025	04/03/2025				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Cort Furniture Don	·ol	8900 Shoal Creek Blvd				
	Cort Furniture Rent	al	Ste 400				
			Austin, TX 78757-6853				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u>—</u>	Office Overhead/Rent		Austin apartment furniture	e rental			
X Political							
Non-Political	· · · —	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH		I	T				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 04/03/2025	r Paid			
	\$12.00	03/19/2025	04/03/2023				
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code	
			1544 Market St				
	Uber		Ste 400				
			San Francisco, CA 94102	2-6007			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Transportation Equipr	,	Ground transportation				
X Political	Expense						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	E.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			

## 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 th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 23/51 Rpt: 55/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED VITURES ED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 03/14/2025	(c) Date(s) ( 04/03/202	Credit Card Issuer 5	Paid		
7	PAYEE	(a) Payee name Store More Storage	·		ate Highway 360		State,	Zip Code
L					irie, TX 75052-4	1492		
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign storage				
				Check if Austin, TX,	officeholder living exp	oense		
9	9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held			
expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$1,053.57	(b) Date of Charge 02/19/2025	(c) Date(s) ( 04/03/202	Credit Card Issuer 5	Paid		
PAYEE (a) Payee name		•	(b) Payee a	ddress;	City,	State,	Zip Code	
		Hertz		8501 Willia	ams Rd			
				Estero, FL	33928-3325			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr	•	(b) Descripti Car rental				
	Non-Political	Expense			7			
┡		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	<u>L</u> e sought	Check if Austin, TX,	officeholder living exp	oense	
е	Complete ONLY if direct expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$1,046.82	(b) Date of Charge 03/21/2025	(c) Date(s) 0 05/05/202	Credit Card Issuer 5	Paid		
	PAYEE	(a) Payee name Hertz		(b) Payee at 8501 Willia		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense  (b) Description Car rental in		ion				
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
				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

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 Commiss	sion Filers)	
	Sch: 24/51 Rpt: 56/93	Turner, Christopher	G. (The Honorable)		00062790			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00	
6	PAYMENT	(a) Amount Charged \$94.71	(b) Date of Charge 02/24/2025	(c) Date(s) Credit Card Issuer 04/03/2025	Paid			
7	PAYEE	(a) Payee name HEB		(b) Payee address; City, State, 2701 E 7th St  Austin, TX 78702-3907				
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Snacks and beverage for Austin office				
					officeholder living expe	ense		
	Complete ONLY if direct Candidate/Officeholder name Office sought				Office held			
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	. Daid			
	PATMENT	\$70.66	03/15/2025	04/03/2025	raiu			
	PAYEE	(a) Payee name		(b) Payee address; 208 S Akard St	City,	State,	Zip Code	
L				Dallas, TX 75202-4206				
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Austin apartment utilities				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X 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 \$58.65	(b) Date of Charge 03/03/2025	(c) Date(s) Credit Card Issuer 04/03/2025	Paid			
	PAYEE	(a) Payee name Hill Country Springs	5	(b) Payee address; 10019 S I 35 Austin, TX 78747	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Office water delivery				
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense		
е	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 th	is form.			
1 7	otal pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
5	Sch: 25/51 Rpt: 57/93	Turner, Christopher	G. (The Honorable)			00062790		
	CREDIT CARD SSUER	1	ncial institution revious	EXPEND	OF UNITEMIZED VITURES ED TO A CREDIT	\$	4,225.0	00
6 F	PAYMENT	(a) Amount Charged \$1,030.00	(b) Date of Charge 02/22/2025	(c) Date(s) 0 04/03/202	Credit Card Issuer 5	Paid		
7 F	PAYEE	(a) Payee name  Arlington Mansfield	YMCA	(b) Payee at 2200 S Da		City,	State,	Zip Code
8 F	PURPOSE OF	(a) Category		(b) Descripti				
	EXPENDITURE    X   Political	(See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	Contributiion				
	Non-Political	<del>                                     </del>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 (	Complete ONLY if direct			Office held				
	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$83.49	(b) Date of Charge 03/05/2025	(c) Date(s) ( 04/03/202	Credit Card Issuei 5	Paid		
F	PAYEE	(a) Payee name HEB		(b) Payee at 2701 E 7th		City,	State,	Zip Code
⊢.	PURPOSE OF	(a) Category		(b) Descripti				
	EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent			d beverage for	Austin office		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	- Γ	Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct penditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
F	PAYMENT	(a) Amount Charged \$33.19	(b) Date of Charge 03/02/2025	(c) Date(s) 0 04/03/202	Credit Card Issuei 5	<sup>*</sup> Paid		
ī	PAYEE	(a) Payee name HEB		(b) Payee at 2701 E 7th Austin, TX		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descripti		Austin office		
L	Non-Political	on-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX				officeholder living exp	ense	
	Complete <u>ONLY</u> if direct penditure 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 -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

	i ne insti	ruction Guide explains now	to complete ti	nis form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 26/51 Rpt: 58/93	Turner, Christopher	r G. (The Honorable)			00062790		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.00	
6 PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 02/22/2025	(c) Date(s) 04/03/202	Credit Card Issuer 25	Paid		
7 PAYEE	(a) Payee name Elizabeth Beck Can	npaign	(b) Payee a PO Box 1 Fort Worth		City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Descrip Contributi				
Non-Political	(c) Shekiri dave baside of Texas. Complete Schedule 1.			Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct candidate/Officeholder name office sought expenditure to benefit C/OH				Office held			
PAYMENT	(a) Amount Charged \$121.21	02/24/2025 04/03/2025			Paid		
PAYEE	(a) Payee name From You Flowers		(b) Payee address; 143 Mill Rock Rd E Old Saybrook, CT 06475			State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Descrip Flowers fo	tion or constituent			
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 Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 02/22/2025	(c) Date(s) 04/03/202	Credit Card Issuer 25	Paid		
PAYEE	(a) Payee name  Daryl Davis Campa	iign	(b) Payee address; 9216 Vineyard Ln Fort Worth, TX 76123-27		City,	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ons Made By er/Political Committee	(b) Descrip Contributi	on			
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.	o cought	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY 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 -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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME	FILER NAME				sion Filers)			
Sch: 27/51 Rpt: 59/93	Turner, Christopher	G. (The Honorable)		00062790					
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	<b>6</b>	4 225 (	20			
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	JO			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid					
	\$250.00	02/27/2025	04/03/2025						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Mansfield Business	Alliance	601 S Main St						
			Mansfield, TX 76063-3112	2					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Dues						
X Political	Fees	,	Dues						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expe	ense				
9 Complete ONLY if direct	Candidate/Officeholder	Candidate/Officeholder name Office sought							
expenditure to benefit C/OH	(a) Amazunt Charrend	(h) Data of Charge	(a) Data(a) Cradit Cand Inc.	- Daid					
PAYMENT	(a) Amount Charged	(b) Date of Charge	04/03/2025						
	\$89.84	03/16/2025	0 ,100,2020						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Google		1600 Amphitheatre Pkwy						
	Coogic			1054					
PURPOSE OF	(a) Category		Mountain View, CA 94043 (b) Description	3-1351					
EXPENDITURE	(See Categories listed at the top		Google workspace subscr	ription					
X Political	Office Overhead/Rent	al Expense	l coogie memopaco casco.						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chock if Austin TV	officeholder living expe	oneo				
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid					
	\$45.93	04/08/2025	05/05/2025						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Uber Eats		1455 Market St						
	Obel Lats								
DUDDOOF OF	(a) Catagoni		San Francisco, CA 94103	-1331					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description  Meal for staff						
X Political	Food/Beverage Expe	nse	modifier staff						
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	•	e sought	Office held	711SC				
expenditure to benefit C/OH		3110	g	555 Hold					
	I								
Ī									

## 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 thi	s form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 28/51 Rpt: 60/93	Turner, Christopher	G. (The Honorable)			00062790			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED TURES D TO A CREDIT	\$	4,225.0	00	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	r Paid			
	\$121.56	04/15/2025	05/05/2025	)				
7 PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code	
	Amazon		440 Terry A	Ave N				
				4 98109-5210				
8 PURPOSE OF	(a) Category	-£41-1	(b) Description					
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent		Office supp	olies				
Non-Political	(c) description compare constant :				officeholder living exp	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						
	\$67.15	03/29/2025	05/05/2025	5				
PAYEE	YEE (a) Payee name (b) Payee address;			ldress;	City,	State,	Zip Code	
			1544 Mark	et St				
	Uber		Ste 400					
			San Franci	sco, CA 94102	-6007			
PURPOSE OF	(a) Category	of this cobody (a)	(b) Description					
EXPENDITURE	(See Categories listed at the top Transportation Equipr		Ground tra	nsportation				
X Political	Expense							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
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		redit Card Issuer	r Paid			
	\$11.81	04/10/2025	05/05/2025	)				
PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code	
			1544 Mark	et St				
	Uber		Ste 400					
			San Franci	sco, CA 94102	-6007			
PURPOSE OF		(b) Description	on					
EXPENDITURE	(See Categories listed at the top  Transportation Equipr		Ground tra	nsportation				
X Political	Expense	nont / tha related						
Non-Political	· ·	of Texas. Complete Schedule T.	<del>.</del> Г	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	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	FILER NAME 3				sion Filers)			
Sch: 29/51 Rpt: 61/93	Turner, Christopher	G. (The Honorable)		00062790					
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED		4.005.4				
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$20.00	04/09/2025	05/05/2025						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
			1544 Market St						
	Uber		Ste 400						
			San Francisco, CA 94102	-6007					
8 PURPOSE OF	(a) Category	(4)	(b) Description						
EXPENDITURE	(See Categories listed at the top Transportation Equip		Ground transportation						
X Political	Expense	none / wid i tolatod							
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 sought C			Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$60.02	03/30/2025							
PAYEE	(a) Payee name (b) Payee address;			City,	State,	Zip Code			
	l Us an		1544 Market St						
	Uber		Ste 400						
			San Francisco, CA 94102	-6007					
PURPOSE OF	(a) Category	of this calcadula)	(b) Description						
EXPENDITURE	(See Categories listed at the top  Transportation Equipr	•	Ground transportation						
X Political	Expense								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse				
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					
	\$3.00	03/28/2025	05/05/2025						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Uber		1544 Market St						
	Obei		Ste 400						
			San Francisco, CA 94102	-6007					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	Transportation Equip	*	Ground transportation						
X Political	Expense								
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									

## 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 Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME					sion Filers)
Sch: 30/51 Rpt: 62/93	Turner, Christopher	G. (The Honorable)		00062790		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREE CARD	\$	<b>\$</b> 4,225.00	
6 PAYMENT	(a) Amount Charged \$15.67	(b) Date of Charge 04/10/2025	(c) Date(s) Credit Card Iss 05/05/2025	suer Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 941	City, .02-6007	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	Transportation Equipr	Categories listed at the top of this schedule) Ansportation Equipment And Related pense				
Non-Political	(c) Check if travel outside	<u> </u>	<u>L</u>	TX, officeholder living exp	ense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	ndidate/Officeholder name Office sought				
PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 04/04/2025	(c) Date(s) Credit Card Iss 05/05/2025	suer Paid		
PAYEE	(a) Payee name  Verizon Wireless		(b) Payee address; 899 Heathrow Park Ln Lake Mary, FL 32746-5	City,	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign hotspot serv			
Non-Political	· , <b>–</b>	of Texas. Complete Schedule T.	<u>L</u>	TX, officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$13.43	(b) Date of Charge 03/30/2025	(c) Date(s) Credit Card Iss 05/05/2025	suer Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA 941	City, .02-6007	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political Non-Political	(a) Category (See Categories listed at the top Transportation Equipm Expense  (c) Check if travel outside		(b) Description Ground transportation  Check if Austin,	TX, officeholder living exp	pense	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	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 Inst	ruction Guide explains how	to complete	this form.	(5 15 15 15 15 15 15 15 15 15 15 15 15 15	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commis	sion Filers)
	Sch: 31/51 Rpt: 63/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$47.05	(b) Date of Charge 03/24/2025	(c) Date(s) 05/05/20	) Credit Card Issuei 125	r Paid		
7	PAYEE	(a) Payee name		(b) Payee 208 S Ak	kard St	City,	State,	Zip Code
Ļ	DUDDOCE OF	(a) Catagony			X 75202-4206			
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	n phone service			
	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				Office held			
е	xpenditure to benefit C/OH			1				
	PAYMENT	(a) Amount Charged \$89.19	(b) Date of Charge 03/30/2025	(c) Date(s 05/05/20	) Credit Card Issuei 125	r Paid		
	PAYEE	(a) Payee name	(b) Payee address;			City,	State,	Zip Code
		HEB		2701 E 7	th St			
				Austin, T	X 78702-3907			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Snacks and beverage for Austin office				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	e sought	encount recent, 174,	Office held		
	PAYMENT	(a) Amount Charged \$70.66	(b) Date of Charge 04/15/2025	(c) Date(s 05/05/20	) Credit Card Issuei 125	r Paid		
	PAYEE	(a) Payee name		(b) Payee 208 S Ak Dallas, T		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri				
	Non-Political	` 1	of Texas. Complete Schedule T.		X Check if Austin, TX,		ense	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l _								

## 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 (Ethi	cs Commiss	sion Filers)				
Sch: 32/51 Rpt: 64/93	Turner, Christopher	G. (The Honorable)		00062790						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$3.00	04/09/2025	05/05/2025							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Uber		1544 Market St Ste 400 San Francisco, CA 94102	2-6007						
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE  X Political	(See Categories listed at the top Transportation Equipr Expense	· · · · · · · · · · · · · · · · · · ·	Ground transportation							
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 \$40.65	(b) Date of Charge 04/01/2025	(c) Date(s) Credit Card Issue 05/05/2025	r Paid						
PAYEE (a) Payee name			(b) Payee address;	City,	State,	Zip Code				
	Hill Country Springs	S	10019 S I 35							
	(a) Oatawari		Austin, TX 78747							
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office water delivery							
X Political Non-Political										
	· · · —	of Texas. Complete Schedule T.	e sought	, officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		•	Office held						
PAYMENT	(a) Amount Charged \$1,500.00	(b) Date of Charge 04/14/2025	(c) Date(s) Credit Card Issue 05/05/2025	er Paid						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	MISD Future PAC		3540 E Broad St							
			Mansfield, TX 76063-563	3						
PURPOSE OF	(a) Category	of this schodule)	(b) Description Political contribution							
l <u> </u>	XPENDITURE (See Categories listed at the top of this schedule) Contributions/Donations Made By									
X Political	Candidate/Officeholde									
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 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 (Ethio	cs Commis	sion Filers)
	Sch: 33/51 Rpt: 65/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 04/14/2025	(c) Date(s 05/05/20	) Credit Card Issue 125	r Paid		
7	PAYEE	(a) Payee name  Michael Evans Can	npaign	(b) Payee PO Box		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Political contribution				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held		
	PAYMENT	(a) Amount Charged \$1,488.81	(b) Date of Charge 03/27/2025	(c) Date(s) 05/05/20	) Credit Card Issue 125	r Paid		
	PAYEE	(a) Payee name  American Printing			address; adway Cir X 78754-5123	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Printing Expense	of this schedule)	(b) Descri		ict 101 Day		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$386.76	(b) Date of Charge 04/02/2025	(c) Date(s 05/05/20	) Credit Card Issue 025	r Paid		
	PAYEE	(a) Payee name  Cort Furniture Rent	al	Ste 400	address; oal Creek Blvd X 78757-6853	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Austin ap	partment furniture			
lacksquare	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0 001:24	X Check if Austin, TX,		ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Offici	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 Inst	ruction Guide explains how	to complete	this form.	(1 11 11 11 11 11 11 11 11 11 11 11 11 1	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Sch: 34/51 Rpt: 66/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$469.70	(b) Date of Charge 04/17/2025	(c) Date(s) 05/05/20	Credit Card Issuer 25	Paid		
7	PAYEE	(a) Payee name  Bob's Steak and Ch	nop House	(b) Payee 301 Lava		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 e	Complete ONLY if direct expenditure to benefit C/OH					Office held		
	PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 04/15/2025	(c) Date(s) 05/05/20	Credit Card Issuer 25	Paid		
	PAYEE	(a) Payee name Store More Storage	3		tate Highway 360		State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	airie, TX 75052-4 otion n storage	1492		
	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 Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$198.32	(b) Date of Charge 04/15/2025	(c) Date(s) 05/05/20	Credit Card Issuer 25	Paid		
	PAYEE	(a) Payee name From You Flowers			address; Rock Rd E Irook, CT 06475-	City, 4217	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	s Expense	(b) Descrip Flowers 1	otion For constituent			
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

## 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 th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	ion Filers)
	Sch: 35/51 Rpt: 67/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
		\$238.10	05/01/2025	06/02/202	5			
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Norton		350 Ellis S				
L		( ) 0 :		<del> </del>	View, CA 94043	-2202		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti		ara subscription	1	
	X Political	Office Overhead/Rent	tal Expense	Campaign antivirus software subscription				
	Non-Political	\(\frac{1}{2}\)	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		
e	xpenditure to benefit C/OH	( )	T (1) 2	1435434				
	PAYMENT	(a) Amount Charged \$145.46	(b) Date of Charge 04/22/2025	(c) Date(s) ( 06/02/202	Credit Card Issuer 5	Paid		
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code
		Snarfs Sandwiches		2901 Medi	ical Arts St			
				<del> </del>	78705-3332			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
	X Political	Food/Beverage Expe		Meal for st	ali			
	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 xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 05/04/2025	(c) Date(s) ( 06/02/202	Credit Card Issuer 5	Paid		
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Verizon Wireless		899 Heath	row Park Ln			
				Lake Mary	, FL 32746-561	2		
	PURPOSE OF	(a) Category	of this cohodula)	(b) Descripti				
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign	hotspot service	!		
	X Political		•					
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
$\vdash$		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 (Ethic	s Commiss	sion Filers)	
Sch: 36/51 Rpt: 68/93	Turner, Christopher	G. (The Honorable)		00062790			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00	
6 PAYMENT	(a) Amount Charged \$57.51	(b) Date of Charge 05/11/2025	(c) Date(s) Credit Card Issuer 06/02/2025	Paid			
7 PAYEE	(a) Payee name  Target		(b) Payee address; 2300 W Ben White Blvd	City,	State,	Zip Code	
	() 0 :		Austin, TX 78704-7525				
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office supplies				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
			e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$45.00	(b) Date of Charge 05/19/2025	(c) Date(s) Credit Card Issuer 06/02/2025	<sup>r</sup> Paid			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	American Express		200 Vesey St				
			New York, NY 10281-552	5			
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Membership fee				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX.	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held			
expenditure to benefit C/OH			· ·				
PAYMENT	(a) Amount Charged \$117.00	(b) Date of Charge 05/05/2025	(c) Date(s) Credit Card Issuer 06/02/2025	Paid			
PAYEE	(a) Payee name Amazon	ı	(b) Payee address; 440 Terry Ave N Seattle, WA 98109-5210	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Office supplies				
Non-Political	Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	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

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 (Ethic	s Commiss	sion Filers)			
Sch: 37/51 Rpt: 69/93	Turner, Christopher	G. (The Honorable)		00062790					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$	4,225.0	00			
6 PAYMENT	(a) Amount Charged \$47.05	(b) Date of Charge 04/24/2025	(c) Date(s) Credit Card Issue 06/02/2025	er Paid					
7 PAYEE	(a) Payee name		(b) Payee address; 208 S Akard St Dallas, TX 75202-4206	City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Campaign phone service						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 05/15/2025	(c) Date(s) Credit Card Issue 06/02/2025	er Paid					
PAYEE	(a) Payee name (b) Payee address;			City,	State,	Zip Code			
	Store More Storage	)	4660 S State Highway 36						
	() 0 :		Grand Prairie, TX 75052	-4492					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
X Political	Office Overhead/Ren		Campaign storage						
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 Office	e sought	Office held					
PAYMENT	(a) Amount Charged \$1,046.82	(b) Date of Charge 05/20/2025	(c) Date(s) Credit Card Issue 06/02/2025	er Paid					
PAYEE	(a) Payee name Hertz		(b) Payee address; 8501 Williams Rd Estero, FL 33928-3325	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Transportation Equipn Expense	ment And Related	(b) Description Car rental in Austin						
Non-Political	+·· —	of Texas. Complete Schedule T.	<u> </u>	K, officeholder living exp	ense				
Complete ONLY 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 -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	s Commiss	sion Filers)		
	Sch: 38/51 Rpt: 70/93	Turner, Christopher	G. (The Honorable)			00062790				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.0	00		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid				
		\$24.77	05/20/2025	06/02/202	25					
7	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code		
		LIED		2701 E 7t	h St					
		HEB								
					K 78702-3907					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip						
	X Political	Office Overhead/Rent		Snacks a	nd beverages for	r Austin office				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		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				
		\$76.04	04/29/2025	06/02/2025						
	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code		
		HEB		2701 E 7t	h St					
		1125		l						
L	DUDDOS 05	(a) Cataman		Austin, TX 78702-3907 (b) Description						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Snacks and beverage for Austin office						
	X Political	Office Overhead/Rent	tal Expense	Shacks a	na beverage for	Austin office				
	Non-Political				_					
L		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	o oought	Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeriolder	name Onice	e sought		Office field				
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Data(s)	Credit Card Issuer	r Daid				
	FATMENT	.,		06/02/202		raiu				
		\$386.76	05/02/2025							
$\vdash$	PAYEE	(a) Payee name		(b) Payee a	address:	City,	State,	Zip Code		
		(a) i ayoo namo			al Creek Blvd	Oity,	Otato,	Zip Code		
		Cort Furniture Rent	al	Ste 400	a. 0.001. 2.7a					
				Austin, TX	K 78757-6853					
厂	PURPOSE OF	(a) Category		(b) Descrip						
	EXPENDITURE	(See Categories listed at the top	· ·	Austin ap	artment furniture	rental				
	X Political	Office Overhead/Rent	ат шхрензе							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·i	X Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held				
e	xpenditure 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 Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:					cs Commiss	sion Filers)
Sch: 39/51 Rpt: 71/93	Turner, Christopher	G. (The Honorable)		00062790		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZER EXPENDITURES CHARGED TO A CRED CARD	\$	4,225.0	00
6 PAYMENT	(a) Amount Charged \$89.84	(b) Date of Charge 05/16/2025	(c) Date(s) Credit Card Issu 06/02/2025	uer Paid		
7 PAYEE	(a) Payee name Google		(b) Payee address; 1600 Amphitheatre Pkw Mountain View, CA 940	•	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Google workspace subs			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living exp	ense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$25.51	(b) Date of Charge 04/27/2025	(c) Date(s) Credit Card Issu 06/02/2025	uer Paid		
PAYEE	(a) Payee name HEB		(b) Payee address; 2701 E 7th St Austin, TX 78702-3907	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Snacks and beverage for	or Austin office		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$457.12	(b) Date of Charge 05/10/2025	(c) Date(s) Credit Card Issu 06/02/2025	uer Paid		
PAYEE	(a) Payee name Truluck's		(b) Payee address; 300 Colorado St Austin, TX 78701-4889	City,	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Description Meal with colleagues			
Non-Political  (c) Check if travel outside of Texas. Complete Schedule T.  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought				X, officeholder living exp	pense	

## 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 Insti	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 40/51 Rpt: 72/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$399.96	(b) Date of Charge 05/16/2025	(c) Date(s) 06/02/20	Credit Card Issue 25	r Paid		
7	PAYEE	(a) Payee name Eataly		Ste 2172	Central Expy	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	*	(b) Descrip Committe				
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
e	xpenditure to benefit C/OH PAYMENT	(a) Amount Charged \$58.65	(b) Date of Charge 05/01/2025	(c) Date(s) 06/02/20	Credit Card Issue 25	r Paid		
	PAYEE	(a) Payee name  Hill Country Springs	5	(b) Payee 10019 S Austin, T	I 35	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$350.00	(b) Date of Charge 04/24/2025	(c) Date(s) 06/02/20	) Credit Card Issue 25	r Paid		
	PAYEE	(a) Payee name  Arlington Chamber	of Commerce	(b) Payee 505 E Br Arlington		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	,	(b) Descrip Dues	_			
L	Non-Political	1	of Texas. Complete Schedule T.	o cought	Check if Austin, TX	officeholder living exp	ense	
е	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 (Ethi	cs Commiss	sion Filers)
Sch: 41/51 Rpt: 73/93	Turner, Christopher	r G. (The Honorable)		00062790		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$395.21	05/16/2025	06/02/2025			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Yeti		7601 Southwest Pkwy			
			Austin, TX 78735-8989			
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this sahadula)	(b) Description			
EXPENDITURE  X Political	Gift/Awards/Memorial		Committee gift			
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		
	\$75.70	05/15/2025	06/02/2025			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	AT&T		208 S Akard St			
			Dallas, TX 75202-4206			
PURPOSE OF	(a) Category	of this cohodule)	(b) Description			
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent		Austin apartment utilities			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X 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						
PAYMENT	(a) Amount Charged \$65.72	(b) Date of Charge 04/26/2025	(c) Date(s) Credit Card Issue 06/02/2025	r Paid		
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code
			1455 Market St			
	Uber Eats					
			San Francisco, CA 94103	3-1331		
PURPOSE OF	(a) Category	(4)	(b) Description Meal for staff			
	EXPENDITURE (See Categories listed at the top of this schedule) Food/Beverage Expense					
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		
· · · · · · · · · · · · · · · · · · ·						

## 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 Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	3 Filer ID (Ethics Commission Filers)		
Sch: 42/51 Rpt: 74/93	Turner, Christopher	G. (The Honorable)		00062790			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00	
6 PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 05/30/2025	(c) Date(s) Credit Card Issue 06/27/2025	er Paid			
7 PAYEE	(a) Payee name Amazon		(b) Payee address; 440 Terry Ave N Seattle, WA 98109-5210	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Staff gifts				
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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$96.42	(b) Date of Charge 06/04/2025	(c) Date(s) Credit Card Issue 06/27/2025	er Paid			
PAYEE	(a) Payee name  Verizon Wireless		(b) Payee address; 899 Heathrow Park Ln Lake Mary, FL 32746-56:	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign hotspot service				
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			
PAYMENT	(a) Amount Charged \$49.65	(b) Date of Charge 06/02/2025	(c) Date(s) Credit Card Issue 06/27/2025	er Paid			
PAYEE	(a) Payee name Hill Country Springs	S	(b) Payee address; 10019 S I 35 Austin, TX 78747	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Office water delivery				
Complete ONLY if direct expenditure to benefit C/OH					ense		

## 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 thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 43/51 Rpt: 75/93	Turner, Christopher	G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED ITURES D TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$35.76	(b) Date of Charge 06/04/2025	(c) Date(s) C 06/27/2025	Credit Card Issuer	Paid		
7	PAYEE	(a) Payee name Uber		<del> </del>	et St sco, CA 94102	City, -6007	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description				
L	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 expenditure to benefit C/OH Candidate/Officeholder name Office source of the control					Office held		
	PAYMENT	(a) Amount Charged \$12.52	(b) Date of Charge 06/03/2025	(c) Date(s) C 06/27/2025	Credit Card Issuer	Paid		
	PAYEE	(a) Payee name Uber		(b) Payee ac 1544 Mark Ste 400 San Franci		City, -6007	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$3.00	(b) Date of Charge 06/03/2025	(c) Date(s) C 06/27/2025	Credit Card Issuer	Paid		
	PAYEE	(a) Payee name Uber		(b) Payee ac 1544 Mark Ste 400 San Franci		City, -6007	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense  (b) Description Ground transportation						
$\vdash$	Non-Political					Office hold	ense	
E	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 Insti	ruction Guide explains how	v to c	complete this	s form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 44/51 Rpt: 76/93	Turner, Christopher	G. (The Honorable)				00062790		
4	CREDIT CARD ISSUER		ncial institution revious	5	EXPENDI*	UNITEMIZED TURES TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$10.80	(b) Date of Charge 05/31/2025		c) Date(s) C 06/27/2025	redit Card Issue	r Paid		
7	PAYEE	(a) Payee name  Target		(b) Payee address; 2300 W Ben White Blvd Austin, TX 78704-7525		City,	State,	Zip Code	
Ļ	PURPOSE OF	(a) Category		-	o) Description				
8	EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent	*	١,	Office supp				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
Somplete Siles and St.			ce so	ought		Office held			
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$63.21	(b) Date of Charge 06/10/2025	٠,	c) Date(s) C 06/27/2025	redit Card Issuei	r Paid		
PAYEE (a) Payee name (b) Payee a		o) Payee ad	dress;	City,	State,	Zip Code			
		Uber Eats		1	.455 Marke	et St			
				S	San Francis	sco, CA 94103	-1331		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Exper		I '	o) Description Meal for sta				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin TX	officeholder living exp	ense	
┝	Complete ONLY if direct	Candidate/Officeholder	•	ce so		Check ii Addini, 174,	Office held		
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 06/15/2025		c) Date(s) C 06/27/2025	redit Card Issuei	r Paid		
	PAYEE	(a) Payee name  Store More Storage		4		dress; te Highway 36 rie, TX 75052-4		State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Ι,	o) Descriptio Campaign s				
L	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Aus				Check if Austin, TX,	officeholder living exp	ense	
е	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 Insti	ruction Guide explains how	to complete this form.	_		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer II	) (Ethics Commiss	sion Filers)
Sch: 45/51 Rpt: 77/93	Turner, Christopher	r G. (The Honorable)		0006279	00	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A C	\$	4,225.0	00
6 PAYMENT	(a) Amount Charged \$12.92	(b) Date of Charge 06/03/2025	(c) Date(s) Credit Car 06/27/2025	d Issuer Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA	City, 94102-6007	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense	· ·	(b) Description Ground transportat	ion		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder li	ving expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office he	eld	
PAYMENT	(a) Amount Charged \$5.36	(b) Date of Charge 06/05/2025	(c) Date(s) Credit Car 06/27/2025	d Issuer Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1544 Market St Ste 400 San Francisco, CA	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Ground transportat			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder liv	ving expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office he	eld	
PAYMENT	(a) Amount Charged \$600.00	(b) Date of Charge 05/30/2025	(c) Date(s) Credit Car 06/27/2025	d Issuer Paid		
PAYEE	(a) Payee name Viva Day Spa		(b) Payee address; 215 S Lamar Blvd Austin, TX 78704-1	City, .029	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	,	(b) Description Gift for staff			
Complete ONLY if direct expenditure to benefit C/OH	(1)	C) Check if travel outside of Texas. Complete Schedule T. Check if Austin  Candidate/Officeholder name Office sought				

#### 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: 46/51 Rpt: 78/93	Turner, Christopher	G. (The Honorable)			00062790			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	4,225.0	00	
6	PAYMENT	(a) Amount Charged \$559.02	(b) Date of Charge 05/30/2025	(c) Date(s 06/27/20	) Credit Card Issuei )25	r Paid			
7	PAYEE	(a) Payee name HEB		(b) Payee 2701 E 7	7th St	City,	State,	Zip Code	
8	PURPOSE OF	(a) Category		(b) Descri	X 78702-3907 ption				
	EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent			and beverages for	r Austin office			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$130.47	(b) Date of Charge 05/27/2025	(c) Date(s 06/27/20	) Credit Card Issuei )25	r Paid			
	PAYEE	(a) Payee name HEB		(b) Payee 2701 E 7		City,	State,	Zip Code	
				Austin, T	X 78702-3907				
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Snacks a	ption and beverages fo	r Austin office			
	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 \$386.76	(b) Date of Charge 06/03/2025	(c) Date(s 06/27/20	) Credit Card Issuer )25	r Paid			
	PAYEE	(a) Payee name  Cort Furniture Rent	al	Ste 400	address; oal Creek Blvd TX 78757-6853	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Austin ap	ption partment furniture	rental			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		X 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			
		<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 thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 47/51 Rpt: 79/93	Turner, Christopher	r G. (The Honorable)			00062790		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	4,225.0	00
6	PAYMENT	(a) Amount Charged \$47.05	(b) Date of Charge 05/24/2025	(c) Date(s) C 06/27/2025	Credit Card Issuer	Paid		
7	PAYEE	(a) Payee name		(b) Payee ac 208 S Akar	rd St	City,	State,	Zip Code
L		( ) -			75202-4206			
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description  Campaign	on phone service			
	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 expenditure to benefit C/OH Candidate/Officeholder name Office sought					Office held		
	PAYMENT	(a) Amount Charged \$75.70	(b) Date of Charge 06/17/2025	(c) Date(s) C 06/27/2025	Credit Card Issuer 5	Paid		
PAYEE (a) Payee name (b) Paye		(b) Payee ac	ldress;	City,	State,	Zip Code		
		AT&T		208 S Akaı	rd St			
L				Dallas, TX	75202-4206			
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Austin apa	on rtment utilities			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	I X	Check if Austin, TX,	officeholder living exp	ense	
H	Complete ONLY if direct	Candidate/Officeholder		e sought	<u> </u>	Office held		
€	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 05/31/2025	(c) Date(s) C 06/27/2025	Credit Card Issuer	Paid		
	PAYEE	(a) Payee name Michael's		(b) Payee ac 3201 Bee ( Austin, TX		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Desc			on			
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin,				officeholder living exp	ense	
e	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 Inst	ruction Guide explains how	to complete t	his form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Sch: 48/51 Rpt: 80/93	Turner, Christopher	G. (The Honorable)			00062790			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	4,225.0	00	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 06/27/202	Credit Card Issuer 25	Paid			
		\$17.73	06/04/2025						
7	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
		Uber Eats		1455 Mar	ket St				
					cisco, CA 94103	-1331			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip					
	X Political	Food/Beverage Expe		Meal for s	тап				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, o		officeholder living exp	ense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid			
		\$377.16	06/16/2025	06/27/202	<u>2</u> 5				
	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
		Arlington Juneteent	th Celebration	100 W Ab	ram St				
				Arlington,	TX 76010-7101				
	PURPOSE OF	(a) Category		(b) Descrip					
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Event spo	nsorship				
	X Political	Candidate/Officeholde	er/Political Committee						
	Non-Political		of Texas. Complete Schedule T.	[	Check if Austin, TX,	officeholder living exp	ense		
е	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			
		\$163.42	06/01/2025	06/27/202	25				
	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
				1455 Mar	ket St				
		Uber Eats							
				San Franc	cisco, CA 94103	-1331			
	PURPOSE OF	(a) Category (See Categories listed at the top	of Alvin and a dud a N	(b) Descrip					
	EXPENDITURE	Food/Beverage Exper		Meal for s	taff				
	X Political	- Course Capendo							
L	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	Complete ONLY if direct	ONLY if direct Candidate/Officeholder name Office sought Office held							
е	xpenditure 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 Inst	ruction Guide explains how	to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 49/51 Rpt: 81/93	Turner, Christopher	r G. (The Honorable)		00062790			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	4,225.0	00	
6	PAYMENT	(a) Amount Charged \$89.84	(b) Date of Charge 06/16/2025	(c) Date(s) Credit Card Issue 06/27/2025	er Paid			
7	PAYEE	(a) Payee name  Google		(b) Payee address; 1600 Amphitheatre Pkwy		State,	Zip Code	
Ļ		( ) 0 :		Mountain View, CA 94043 (b) Description	3-1351			
8	PURPOSE OF EXPENDITURE  X Political	Office Overhead/Rental Expense  Google Workspace subsc			cription			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	oense		
9 Complete ONLY if direct Candidate/Officeholder name Office sought			e sought	Office held				
€	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$611.61	(b) Date of Charge 06/02/2025	(c) Date(s) Credit Card Issue 06/27/2025	r Paid			
PAYEE (a) Payee name (b) Payee			(b) Payee address;	City,	State,	Zip Code		
		Lake Austin Spa		1705 S Quinlan Park Rd				
L				Austin, TX 78732-6046				
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Staff end of session gift				
	Non-Political	(-) 🗖 (-) - (-)	(7. 0. 1. 0. 1. 7.		<i>(</i> **, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			
H		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	office held	oense		
-	Complete ONLY if direct expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$87.37	(b) Date of Charge 06/30/2025	(c) Date(s) Credit Card Issue	r Paid			
	PAYEE	(a) Payee name  Cort Furniture Rent	al	(b) Payee address; 8900 Shoal Creek Blvd Ste 400 Austin, TX 78757-6853	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	l ' · · ·	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Austin apartment fur					
L	Non-Political	(c) Check if travel outside	, officeholder living exp	oense				
e	Complete ONLY if direct expenditure to benefit C/OH  (c) Check if travel outside of Texas. Complete Schedule T.  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

Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

es/wages/Contract Labor OTHER (enter a Category not listed above)

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	nics Commiss	sion Filers)
Sch: 50/51 Rpt: 82/93	Turner, Christopher	r G. (The Honorable)		00062790		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREE CARD	\$	4,225.0	00
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
	\$47.05	06/24/2025				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	AT&T		208 S Akard St			
			Dallas, TX 75202-4206			
8 PURPOSE OF	(a) Category	(4)	(b) Description			
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent	•	Campaign phone service	ce		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living ex	rpense	
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 Iss	uer Paid		
	\$81.57	06/26/2025				
PAYEE	PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code
	Uber Eats		1455 Market St			
			San Francisco, CA 941	03-1331		
PURPOSE OF	(a) Category	of this cohodule)	(b) Description			
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meal for staff			
X Political	L					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living ex	rpense	
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 Iss	uer Paid		
	\$89.84	04/16/2025	06/02/2025			
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code
			1600 Amphitheatre Pkv	vy		
	Google					
			Mountain View, CA 940	)43-1351		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	•	Google workspace sub	scription		
X Political	S.1100 S.1011044/1(CIII	Office Overhead/Rental Expense				
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		
<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 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

Candidate/Officeholder/Politica	-		-	THER (enter a categor	y not listed ab	oove)
		ruction Guide explains hov	v to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 51/51 Rpt: 83/93	Turner, Christopher	G. (The Honorable)		00062790		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED		4.00=.6	
ISSUER	see pr	revious	EXPENDITURES CHARGED TO A CREDIT	\$	4,225.0	00
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$465.80	01/12/2025	02/03/2025			
	Ψ-100.00	01/12/2020				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			2300 W Ben White Blvd	2.	,	•
	Target					
			Austin, TX 78704-7525			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Supplies for first day of se	ession		
X Political	Office Overhead/Rent	tal Expense				
Non-Political	(-) D a	· · · · · · · · · · · · · · · · · · ·				
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Omc	e sought	Office field		
PAYMENT	(a) Amazumt Chamad	(h) Data of Chausa	(a) Data(a) Cradit Card Issue	- Daid		
PATMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 06/02/2025	i Palu		
	\$1,165.06	05/06/2025	00/02/2020			
24/55				-		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Worley Printing Co	Inc	3217 N Interstate 35			
	Worley Finning Co					
	( ) 0 :		Austin, TX 78722-2203			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	Printing Expense		Graduation certificates			
X Political						
Non-Political	<u> </u>	of Texas. Complete Schedule T.		officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought	Office held		
expenditure to benefit C/OH						

## SCHEDULE G

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Consulting Expense Constributions/ Donations Made By - Candidate/Officeholder/Political Comr Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Travel in District  Travel out of District  OTHER (enter a category not listed above)
L			The Instruction Guide explains	how to co	omplete this form.		
1	Total pages Schedule G:	2 FILER NAME	<u> </u>			3	Filer ID (Ethics Commission Filers)
	Sch: 1/6 Rpt: 84/93	Turner, Chi	ristopher G. (The Honorable	<del>)</del> )			00062790
4	Date	5 Payee name					
	03/22/2025	A Veteran's					
6	Amount (\$)	7 Payee addre	ess; City; State;	; Zip Co	ode		
	\$20.00	2353 N Fie	ld St				
	Reimbursement from	Ste 421					
	X political contributions intended	Dallas, TX	75201-1709				
8	PURPOSE		ee Categories listed at the top of this sch	edule)	(b) Description	Ch	heck if travel outside of Texas. Complete Schedule T.
	OF		tion Equipment And Related			Ch	heck if Austin, TX, officeholder living expense
	EXPENDITURE	Expense	, ,		National Medal o	of Ho	onor Museum event parking
9		Candidate/Office	holder name		Office sought		Office held
	expenditure to benefit C/OH						
	Data						
	Date 01/28/2025	Payee name AT&T					
			one City Ct-t-	7in 0-	ndo.		
	Amount (\$)	Payee addre		; Zip Co	oue		
	\$82.04	208 S Akar	u ol				
	Reimbursement from political contributions	D-11 - T)	75000 4000				
	intended	Dallas, IX	75202-4206				
	PURPOSE OF		ee Categories listed at the top of this sch	edule)	Description	=	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense
	EXPENDITURE	Office Over	head/Rental Expense		Compoien portion	_	
					Campaign portion	ii Ul	I WIICIG22 DIII
_	Complete ONLY if direct	 Candidate/Office	holder name		Office sought		Office held
	expenditure to benefit	Caranatto Onioc			Since Sought		Cindo Hold
L	C/OH						
	Date	Payee name					
L	02/28/2025	AT&T					
	Amount (\$)	Payee addre	ess; City; State;	; Zip Co	ode		
	\$82.04	208 S Akar	d St				
	Reimbursement from political contributions						
	x political contributions intended	Dallas, TX	75202-4206				
	PURPOSE	Category (S	ee Categories listed at the top of this sch	edule)	Description	_	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Over	head/Rental Expense			_	heck if Austin, TX, officeholder living expense
					Campaign portion	n of	f wireless bill
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held
L	C/OH						

## SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

The Instruction Guide explains how to complete this form.  1 Total pages Schedule G: Sch: 2/6 Rpt: 85/93  2 FILER NAME Turner, Christopher G. (The Honorable)  3 Filer ID (Ethics Commission 00062790)  4 Date 03/28/2025  5 Payee name AT&T  6 Amount (\$)  7 Payee address; City; State; Zip Code 208 S Akard St	Filers)
Sch: 2/6 Rpt: 85/93  Turner, Christopher G. (The Honorable)  O0062790  Double O3/28/2025  Feature AT&T  Type Payee address; City; State; Zip Code  S82.04  Reimbursement from political contributions  Type Payee Address; City; State; Zip Code	Filers)
4 Date 5 Payee name AT&T  6 Amount (\$) 7 Payee address; City; State; Zip Code \$82.04 \$82.04 \$208 S Akard St	
03/28/2025 AT&T  6 Amount (\$) 7 Payee address; City; State; Zip Code \$82.04 \$82.04 208 S Akard St	
03/28/2025 AT&T  6 Amount (\$) 7 Payee address; City; State; Zip Code \$82.04 \$82.04 208 S Akard St	
\$82.04 208 S Akard St  Reimbursement from political contributions	
Reimbursement from political contributions	
x political contributions	
X   political contributions   Dollar TV 75303 4300	
intended Dallas, TX 75202-4206	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete	
OF EXPENDITURE Office Overhead/Rental Expense	nse
Campaign portion of wireless bill	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date Payee name	
04/28/2025 AT&T	
Amount (\$) Payee address; City; State; Zip Code	
\$82.04   208 S Akard St	
Reimbursement from political contributions	
intended Dallas, TX 75202-4206	
PURPOSE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete	
OF EXPENDITURE Office Overhead/Rental Expense	nse
Campaign portion of wireless bill	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
05/28/2025 AT&T	
Amount (\$) Payee address; City; State; Zip Code	
\$82.04 208 S Akard St	
Reimbursement from	
X   political contributions intended   Dallas, TX 75202-4206	
PURPOSE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete	Schedule T.
OF EXPENDITURE Office Overhead/Rental Expense	nse
Campaign portion of wireless bill	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	

## SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	r - Gift/A Il Committee Legal	Beverage Expense wards/Memorials Expense Services	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor	T T	ransportation Equipment ravel in District ravel Out of District DTHER (enter a category	·	
		The	Instruction Guide explains	how to co	omplete this form.				
1	Total pages Schedule G: Sch: 3/6 Rpt: 86/93	2 FILER NAME	her G. (The Honorable	١			iler ID (Ethics Co	ommission Filers)	
			The Honorable						
4	Date 06/28/2025	<b>5</b> Payee name AT&T							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$82.04	208 S Akard St	•	•					
	Reimbursement from								
	X political contributions intended	Dallas, TX 7520	2-4206						
8	PURPOSE	(a) Category (See Cat	egories listed at the top of this sch	edule)	(b) Description	=		as. Complete Schedule T.	
	OF EXPENDITURE	Office Overhead	I/Rental Expense		L	_	ck if Austin, TX, officehold	ler living expense	
					Campaign portion	n of v	vireless bill		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholde	r name		Office sought		Office he	eld	
	Date	Payee name							
	01/21/2025	Apple							
	Amount (\$)	Payee address;	City; State;	Zip Co	ode				
	\$14.06								
		Ms 927-4INV	~,						
	Reimbursement from political contributions		E014 0642						
	intended	Cupertino, CA 9	5014-0642						
	PURPOSE OF		egories listed at the top of this sch	edule)	Description	=		as. Complete Schedule T.	
	EXPENDITURE	Office Overhead	I/Rental Expense		L	_	ck if Austin, TX, officehold	ier living expense	
					News subscription	on			
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholde	r name		Office sought		Office he	eld	
	C/OH								
=	Date	Dayoo nama							
	02/21/2025	Payee name Apple							
_			Cit.:: Ctata:	7:n C	- d-				
	Amount (\$) \$14.06	Payee address;	-	Zip Co	Jue				
	\$14.00	1 Apple Park W	ay						
	X Reimbursement from political contributions	Ms 927-4INV							
	intended	Cupertino, CA 9	5014-0642						
	PURPOSE		egories listed at the top of this sch	edule)	Description	=		as. Complete Schedule T.	
	OF EXPENDITURE	Office Overhead	I/Rental Expense		L	Chec	ck if Austin, TX, officehold	ler living expense	
					News subscription	n			
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholde	r name		Office sought		Office he	eld	
	C/OH								
$\vdash$									

## SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
L	Cicuit Caru Fayillelit		The Instruction Guide explains	how to co	omplete this form.	_			
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)		
	Sch: 4/6 Rpt: 87/93	Turner, Ch	ristopher G. (The Honorable	e)			00062790		
4	Date	5 Payee name	)						
	03/21/2025	Apple							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$14.06	1 Apple Pa	rk Way						
	Reimbursement from	Ms 927-4IN	١V						
	X political contributions intended	Cupertino,	CA 95014-0642						
8	PURPOSE OF		See Categories listed at the top of this sch	nedule)	(b) Description	=	eck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Office Over	rhead/Rental Expense		<u> </u>		eck if Austin, TX, officeholder living expense		
					News subscriptio	n			
_	Complete ONLY if alias -t	Condidate (Off:	holder name		Office savekt		Office held		
9	expenditure to benefit	Candidate/Office	moider name		Office sought		Office held		
	C/OH								
	Date	Payee name	;						
	04/21/2025	Apple							
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode				
	\$14.06	1 Apple Pa	rk Way						
Reimbursement from Ms 927-4INV									
	X political contributions intended	Cupertino, CA 95014-0642							
	PURPOSE	Category (S	See Categories listed at the top of this sch	nedule)	Description	_	eck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Office Over	rhead/Rental Expense				eck if Austin, TX, officeholder living expense		
					News subscriptio	n			
_	Complete ONLY if direct	Candidata/Office	sholder name		Office sought		Office hold		
	Complete ONLY if direct expenditure to benefit	Canuluale/OIIICE	HOIDEL HAITIE		Office sought		Office held		
	C/OH								
	Date	Payee name	2						
L	05/21/2025	Apple							
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode				
	\$14.06	1 Apple Pa	rk Way						
	Reimbursement from political contributions	Ms 927-4IN	١V						
	x political contributions intended	Cupertino,	CA 95014-0642						
	PURPOSE		See Categories listed at the top of this sch	nedule)	Description	=	eck if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE		Office Overhead/Rental Expense				_	eck if Austin, TX, officeholder living expense		
					News subscriptio	n			
	Complete ONLY if direct	Candidate/Office	eholder name		Office sought		Office held		
	expenditure to benefit		<del>-</del>		- 1 <b>39</b>				
	C/OH								

## SCHEDULE G

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Greuit Caru Fayillelit		The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)			
	Sch: 5/6 Rpt: 88/93	Turner, Ch	ristopher G. (The Honorable	e)			00062790			
4	Date	5 Payee name								
	06/21/2025	Apple								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$14.06	1 Apple Pa	rk Way							
	Reimbursement from	Ms 927-4IN	١٧							
	X political contributions intended	Cupertino,	CA 95014-0642							
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	nedule)	(b) Description	≓	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Ove	rhead/Rental Expense		[		eck if Austin, TX, officeholder living expense			
					News subscriptio	n				
_	Commission ONU Wife allows	Candidat- /Cff	haldar nama		O#:		Office held			
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	moluer name		Office sought		Office held			
	C/OH									
	Date	Payee name	<b>)</b>							
	01/08/2025	Costco - Ai	ustin							
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode					
\$1,120.17 4301 W William Cannon Dr										
Reimbursement from political contributions intended Bldg A100 Austin, TX 78749-1499										
	PURPOSE	Category (s	See Categories listed at the top of this sch	nedule)	Description	≓	neck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Ove	Office Overhead/Rental Expense			X Check if Austin, TX, officeholder living expense				
					Supplies for Aust	tin a	partment and Capitol office			
	Complete ONLY if direct	Candidata/Office	holder name		Office sevent		Office hold			
	Complete ONLY if direct expenditure to benefit	Canuluale/Onice	noidel name		Office sought		Office held			
	C/OH									
	Date	Payee name								
	02/25/2025	Ruth's Chri	s Steak House							
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode					
	\$20.00	107 W 6th	St							
	Reimbursement from political contributions									
L	x political contributions intended	Austin, TX	78701-2913							
	PURPOSE	1 ,	See Categories listed at the top of this sch	,	Description	=	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Transportation Equipment And Related			L Natatana di uni	neck if Austin, TX, officeholder living expense				
		Expense			Valet parking for	coll	eague ainner			
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit				Since Sought		Sinos noid			
	C/OH									

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 6/6 Rpt: 89/93 Turner, Christopher G. (The Honorable) 00062790 Date Payee name 02/24/2025 **UT Austin Transportation Services** 6 Amount (\$) Payee address; City; State; Zip Code \$20.00 1815 Trinity St Reimbursement from political contributions intended Х Austin, TX 78712-1011 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Transportation Equipment And Related **EXPENDITURE** Expense Valet parking for event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

#### SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1			ges Schedule K: 4 Rpt: 90/93	
2	FILER NAME		3	Fil	er ID	(Ethics Commission F	ilers)
	Turner, Chris	stopher G. (The Honorable)		00	0627	790	
4	Date 01/06/2025	<ul> <li>Name of person from whom amount is received         American Express     </li> <li>Address of person from whom amount is received; City; State; Zip Code</li> </ul>				8 Amount (\$)	\$10.00
		New York, NY 10285					
		7 Purpose for which amount is received	oliti	cal	contril	bution returned to filer	
	Date 02/07/2025	Name of person from whom amount is received American Express  Address of person from whom amount is received; City; State; Zip Code  New York, NY 10285				Amount (\$)	\$10.00
			oliti	cal	contril	bution returned to filer	
	Date 04/06/2025	Name of person from whom amount is received American Express Address of person from whom amount is received; City; State; Zip Code				Amount (\$)	\$10.00
		New York, NY 10285					
			oliti	cal	contril	bution returned to filer	
	Date 05/05/2025	Name of person from whom amount is received American Express Address of person from whom amount is received; City; State; Zip Code				Amount (\$)	\$10.00
		New York, NY 10285					
			oliti	cal	contril	bution returned to filer	
	Date 06/05/2025	Name of person from whom amount is received American Express Address of person from whom amount is received; City; State; Zip Code				Amount (\$)	\$10.00
		New York, NY 10285					
		Purpose for which amount is received Check if purpose Che	oliti	cal	contril	bution returned to filer	

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

#### SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 2/4 Rpt: 91/93	
2	FILER NAME		3	Filer II	D (Ethics Commission I	Filers)
	Turner, Chris	stopher G. (The Honorable)		0006	2790	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	03/14/2025	American Express			(+)	\$10.00
	00/1 1/2020					410.00
		6 Address of person from whom amount is received; City; State; Zip Code				
		New York, NY 10285				
					tuibustion votumond to filos	
		Wireless credit	politi	cai con	tribution returned to filer	
		Wileless Cledit				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/28/2025	American Express				\$12.00
		Address of person from whom amount is received; City; State; Zip Code	•••••		"	
		New York, NY 10285				
		Purpose for which amount is received Check i	f politi	cal con	tribution returned to filer	
		Travel wifi credit				
	Data	Name of payon from whom amount is required			Amount (th)	
	Date 03/30/2025	Name of person from whom amount is received			Amount (\$)	\$24.00
	03/30/2023	American Express				Φ24.00
		Address of person from whom amount is received; City; State; Zip Code				
		New York, NY 10285				
			politi	cal con	tribution returned to filer	
		Travel wifi credit				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/30/2025	American Express				\$24.00
		Address of person from whom amount is received; City; State; Zip Code			"	
		New York, NY 10285				
		Purpose for which amount is received Check i	f politi	cal con	tribution returned to filer	
		Travel wifi credit				
_	Date	Name of person from whom amount is received			Amount (\$)	
	03/31/2025	American Express			Απουπ (ψ)	\$24.00
	00/01/2020					Ψ24.00
		Address of person from whom amount is received; City; State; Zip Code				
		Now York NV 1020F				
		New York, NY 10285			<u> </u>	
		<u> </u>	f politi	cal con	tribution returned to filer	
		Travel wifi credit				
1						

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

#### SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: 8/4 Rpt: 92/93	
2	FILER NAME		3		ion Filers)	
_		stopher G. (The Honorable)	00062	•	10111 11013)	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
4	04/23/2025				δ Amount (φ)	\$12.00
	04/23/2023	American Express				Φ12.00
		<b>6</b> Address of person from whom amount is received; City; State; Zip Code				
		New York, NY 10285				
			ack if politi	aal aante	ribution returned to f	llor
		Travel wifi credit	еск іт роііці	cai contr	ribution returned to f	iler
		Haver will credit				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/27/2025	American Express				\$12.00
		Address of person from whom amount is received; City; State; Zip Code			1	
		New York, NY 10285				
		Purpose for which amount is received	eck if politi	cal contr	ribution returned to f	iler
		Travel wifi credit				
	Date	Name of person from whom amount is received			Amount (\$)	
	06/05/2025	American Express				\$12.00
		Address of person from whom amount is received; City; State; Zip Code				
		New York, NY 10285				
		Purpose for which amount is received	eck if politi	cal contr	ribution returned to f	iler
		Travel wifi credit				
	Date	Name of person from whom amount is received			Amount (\$)	
	01/17/2025	American Express				\$200.00
		Address of person from whom amount is received; City; State; Zip Code			•	
		New York, NY 10285				
		Purpose for which amount is received Che	eck if politi	cal contr	ribution returned to f	iler
		Computer equipment purchase credit				
_	Date	Name of person from whom amount is received			Amount (\$)	
	06/30/2025	American Express			γ πισαπι (φ)	\$2,256.68
		Address of person from whom amount is received; City; State; Zip Code				,_,_
		Address of person from whom amount is received, City, State, 2ip Code				
		New York, NY 10285				
			eck if politi	cal contr	I ribution returned to fi	iler
		Account interest	1			

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 93/93 2 FILER NAME Filer ID (Ethics Commission Filers) Turner, Christopher G. (The Honorable) 00062790 Date 8 Amount (\$) 5 Name of person from whom amount is received 01/05/2025 **Apple** \$368.05 6 Address of person from whom amount is received; City; State; Zip Code Cupertino, CA 95014 Purpose for which amount is received Check if political contribution returned to filer Equipment trade in credit Name of person from whom amount is received Amount (\$) Date 06/30/2025 Bank of America \$352.77 Address of person from whom amount is received; City; State; Zip Code Tampa, FL 33622 Purpose for which amount is received Check if political contribution returned to filer Account interest Date Name of person from whom amount is received Amount (\$) 06/30/2025 **Grand Peninsula Owners Association** \$500.00 Address of person from whom amount is received; City; State; Zip Code Grand Prairie, TX 75054 Purpose for which amount is received Check if political contribution returned to filer Event venue deposit refund