# 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 Commi 00086182		2 Total pages file 39	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	The Honorable	Venton C.			Date Received	
TW WIL					ELECTRONICA	LIVELED
					.]	CLI FILLD
	NICKNAME	LAST		SUFFIX	07/15/2025	
		Jones		Jr.		
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	Post Office Box 222128					
ADDRESS					Receipt #	Amount
Change of Address	Dallas, TX 75222-2128					
П	Dallas, 17, 13222 2120				Date Processed	
					Date Imaged	
E CAMPAIGN	MC (MDC (MD	FIDOT		<b>.</b>		
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	Scott				
	NICKNAME	LAST		SUFFIX		
		Jones				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP <sup>-</sup>	Γ / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	Post Office Box 222128					
(Residence or Business)	Dallas, TX 75222-2128					
	·					
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	EXTENSION			
TREASURER PHONE	(337) 258-7601					
8 REPORT TYPE		<b>-</b>			<b>-</b>	
ITPE	January 15	30th day before	election	Runoff	15th day after can appointment (offic	
	X July 15	8th day before	election	Exceeded modified	Final Report (Atta	
		<b>」</b>	ш	reporting limit	<b>」</b> ' `	,
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	T⊢	IROUGH	06/30/202		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	I □P	rimary	Runoff	Other	
			eneral	Special		
				<del></del>		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	State Representative Distr	rict 100 Dallas		State Represent	ative District 100	
		GO T	O PAGE 2			
I						

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 39

13 C / OH NAME	Jones Jr., Venton C.	(The Honorable)		<b>14</b> Filer ID 00086182	(Ethics Com	mission Filers)
This box is for notice of political contributions accepted or political expenditures may candidate / officeholder. These expenditures may have been made without the candidate / consent. Candidates and officeholders are required to report this information only if					ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	 E			
Ш	GENERAL					
		COMMITTEE ADDI	RESS			
	SPECIFIC					
		COMMITTEE CAM	PAIGN TREASURER NAME			
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER THA CONTRIBUTIONS MADE ELE		s, \$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS, (	<b>IS</b> OR GUARANTEES OF LOANS	S)	\$	3,875.00
EXPENDITURE TOTALS	RE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					0.00
	4. TOTAL POLITIC	AL EXPENDITURES	S		\$	61,815.68
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AST DAY OF THE	\$	7,992.30		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		t	swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		-		able Venton C. Jone		
			Signature of	f Candidate or Officeh	older	
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 offi	cer administering	Printed name of	of officer administering	Title of offic	er administer	ing oath

## **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

		C	OVER SHEET PG 3 3 of 39
18 FILER NAME Jones Jr., Venton C. (The Honorabl	(Ethics Commission Filers)		
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETA	RY POLITICAL CONTRIBUTIONS		<b>\$</b> 3,875.00
2. SCHEDULE A2: NON-MOI	NETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED	CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS			\$
5. X SCHEDULE F1: POLITICA	L EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	<b>\$</b> 54,864.62
6. SCHEDULE F2: UNPAID I	NCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHA:	SE OF INVESTMENTS FROM POLITICAL CONTRIBUT	IONS	\$
8. SCHEDULE F4: EXPENDI	TURES MADE BY CREDIT CARD		\$
9. X SCHEDULE G: POLITICAI	EXPENDITURES FROM PERSONAL FUNDS		\$ 6,951.06
10. SCHEDULE H: PAYMENT	FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLIT	CAL EXPENDITURES FROM POLITICAL CONTRIBUT	IONS	\$
12. SCHEDULE K: INTEREST, TO FILER	CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/39		
2	FILER NAME Jones Jr., V	enton C. (The Honorable)		3	Filer ID (Ethics Commission F 00086182	Filers)
4	Date 06/30/2025	Full name of contributor		7	Amount of Contribution (\$)	\$125.00
		Austin, TX 78704				
8	Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_MOAK CASEY PAC  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78701  upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 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 (\$) \$2	2,500.00
	Principal occu	Austin, TX 78701  upation / Job title (See Instructions)	Employer (See Instructions	  -  s)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas BW-PAC Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$) \$1	.,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		

## 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

nse Travel in Dis ense Travel Out o ges/Contract Labor OTHER (ent

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/34 Rpt: 5/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	06/24/2025	23rd Senatorial Tejano Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	PO Box 226534
		Dallas, TX 75222
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 2025 Dues
		2023 Buc3
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
	·	
	Date	Payee name
	06/16/2025	ADP
	Amount (\$)	Payee address; City; State; Zip Code
	\$113.43	1 Adp Blvd
		Roseland, NJ 07068
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Fee
		rayioli ree
	Operation ONLY if allowed	Our stide to 10 ff as health are now as the control of the control
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u>'</u>	
	Date	Payee name
	05/16/2025	ADP
	Amount (\$)	Payee address; City; State; Zip Code
	\$113.43	1 Adp Blvd
		Roseland, NJ 07068
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Payroll Fee
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

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

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

Credit Card Payment	The Instruction Guide explains how to	complete t	his form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 2/34 Rpt: 6/39	Jones Jr., Venton C. (The Honorable)		00086182	
4 Date	5 Payee name		<b>L</b>	
04/16/2025	ADP			
6 Amount (\$)	7 Payee address; City; State; Zip	Code		
\$113.43	1 Adp Blvd			
	Roseland, NJ 07068			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
OF	Fees (See Categories listed at the top of this schedule)		Check if travel outside of Texas. Comp	lete Schedule T.
EXPENDITURE	. 555		Check if Austin, TX, officeholder living	expense
		Pa	ayroll Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office he	ld
expenditure to benefit C/C	)H			
Date	Payee name			
03/17/2025	ADP			
Amount (\$)	Payee address; City; State; Zip	Code		
\$113.43				
¥223.13	27.64 2.05			
	Roseland, NJ 07068			
DUDD005		Tax		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		escription Check if travel outside of Texas. Comp	alete Schedule T
EXPENDITURE	Fees	-	Check if Austin, TX, officeholder living	
		Pa	ayroll Fee	
Complete ONLY if direct	Candidate/Officeholder name Office s	<b></b> ought	Office he	ld
expenditure to benefit C/C	)H			
Date	Payee name			
02/18/2025	ADP			
Amount (\$)	Payee address; City; State; Zip (	Code		
\$113.43		Coue		
Ψ113.43	1 Λαρ Βίνα			
	Deceleral NJ 07000			
	Roseland, NJ 07068	_		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
EXPENDITURE	Fees		Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
		Pa	ayroll Fee	
			•	
Complete ONLY if direct	Candidate/Officeholder name Office s	 ouaht	Office he	
expenditure to benefit C/C		- ~9'''	Office fic	: <del></del>

## 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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·						
	Sch: 3/34 Rpt: 7/39	Jones Jr., Venton C. (The Honorable)  00086182						
4	Date	5 Payee name						
	01/16/2025	ADP						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$113.43	1 Adp Blvd						
		Roseland, NJ 07068						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Payroll Fee						
		rayion ree						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9	expenditure to benefit C/OI							
_	Data							
	Date	Payee name						
	01/10/2025	AMM Political Strategies						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$8,963.00	507 N Sylvania Ave						
		Fort Worth, TX 76111						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense  Consulting						
		Consulting						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
H	Data							
	Date 06/03/2025	Payee name Aleksander Gallery						
		·						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,341.22	1803 Northridge Dr						
		Austin, TX 78723						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Office Supplies						
		Опос Заррнез						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
l								

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Sch: 4/34 Rpt: 8/39  Jones Jr., Venton C. (The Honorable)  O0086182  Date O1/23/2025  Aleksander Gallery  Amount (\$)  \$360.47  Payee address; City; State; Zip Code 1803 Northridge Dr  Austin, TX 78723  PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description	mission Filers)
Sch: 4/34 Rpt: 8/39  Jones Jr., Venton C. (The Honorable)  O0086182  Jones Jr., Venton C. (The Honorable)  Austin, TX 78723  Jones Jr., Venton C. (The Honorable)  O0086182  Aleksander Gallery  State; Zip Code  Austin, TX 78723  Austin, TX 78723  B PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description	
6 Amount (\$)  7 Payee address; City; State; Zip Code  \$360.47 \$1803 Northridge Dr  Austin, TX 78723  8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	Г.
6 Amount (\$)  7 Payee address; City; State; Zip Code  1803 Northridge Dr  Austin, TX 78723  8 PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description	г.
\$360.47 1803 Northridge Dr  Austin, TX 78723  8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	г.
	г.
	г.
OF EXPENDITURE  Office Overhead/Rental Expense    Check if travel outside of Texas. Complete Schedule Texas. Complete Sch	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
05/22/2025 Amazon	
Amount (\$) Payee address; City; State; Zip Code	
\$33.55 410 Terry Ave N	
Seattle, WA 98109	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE  Office Overhead/Rental Expense    Check if travel outside of Texas. Complete Schedule Texas. Complete Sch	ī.
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
05/19/2025 Amazon	
Amount (\$) Payee address; City; State; Zip Code	
\$149.00 410 Terry Ave N	
Seattle, WA 98109	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  (c) Category (See Categories listed at the top of this schedule)	_
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule To Check if Austin, TX, officeholder living expense	
Office Supplies	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	

#### SCHEDULE F1

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

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

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

Printing Expense 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: 5/34 Rpt: 9/39 Jones Jr., Venton C. (The Honorable) 00086182 4 Date Payee name 05/12/2025 Amazon 6 Amount (\$) Payee address; City; State; Zip Code \$104.99 410 Terry Ave N Seattle, WA 98109 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. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/25/2025 Amazon Amount (\$) Payee address; City; State; Zip Code \$43.91 410 Terry Ave N Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/25/2025 Amazon Payee address; Amount (\$) City: State; Zip Code \$106.69 410 Terry Ave N Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explains		xpense Nages/	e Contract Labor		Travel in District Travel Out of Distr OTHER (enter a c	rict ategory not listed above)
1	Total pages Schedule F1:							Filer ID	(Ethics Commission Filers)
	Sch: 6/34 Rpt: 10/39	Jones Jr., V	enton C. (The Honorable)					00086182	
4	Date	5 Payee name							
	06/24/2025	Association	of Former Students (A&M	)					
6	Amount (\$)	7 Payee addres	ss; City; State	e; Zip Co	ode				
	\$250.00	505 George	Bush Drive						
		College Sta	tion, TX 77840						
8	PURPOSE	(a) Category (Se	ee Categories listed at the top of this so	hedule)	(b)	Description			
	OF EXPENDITURE		s/Donations Made By	•		<b>=</b>		de of Texas. Compl	
	-	Candidate/0	Officeholder/Political Comr	nittee		Check if Austin, Dues	, 1X,	officeholder living e	expense
						2400			
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	<u>l</u> ıaht			Office hel	d
	expenditure to benefit C/O				ət			230 1101	-
	Date	Payee name							
	05/27/2025	Association	of Former Students (A&M	)					
	Amount (\$)	Payee addres	ss; City; State	e; Zip Co	ode				
	\$250.00	505 George	Bush Drive						
		College Sta	tion, TX 77840						
	PURPOSE	(a) Category (Se	e Categories listed at the top of this so	hedule)	(b)	Description			
	OF EXPENDITURE	Fees				<b>=</b>		de of Texas. Compl	
						Check if Austin, Dues	, TX,	officeholder living e	expense
						Dues			
$\vdash$	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	<u>l</u> Jaht			Office hel	d
	expenditure to benefit C/OI				<i>y</i>			200.1101	-
-	Date	Payee name							
	04/24/2025	•	of Former Students (A&M	)					
	Amount (\$)	Payee addres	•	e; Zip Co	nde				
	\$250.00	505 George	•	, <u>Lip</u> OC					
	Ψ200.00	JJJ Jeonge	230.1 2.110						
		College Sta	tion, TX 77840						
	PURPOSE	(a) Category (Se	ee Categories listed at the top of this so	hedule)	(b)	Description			
	OF EXPENDITURE	Fees	a and top of this se	<i>,</i>		Check if travel of		de of Texas. Compl	
	LAFLINDITORE					느	, TX,	officeholder living e	expense
						Dues			
	Complete ONLY if direct	Candidata/O#	coholdor namo	Office ser	ıaht			Office had	d
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offi	centituer name	Office sou	ıgıll			Office hel	u

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction			Vages	/Contract Labor		OTHER (ente	r a category not lis	ted above)
		_			Guide explains	now to co	IIIPIE	te this form.	_			
1	Total pages Schedule F1:	2							3	Filer ID	,	nmission Filers)
	Sch: 7/34 Rpt: 11/39		Jones Jr., V	enton C. (The	Honorable)					00086182	<u>-</u>	
4	Date	5	Payee name									
	03/24/2025			of Former Stu	idents (A&M)	)						
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	nde					
ľ	\$250.00			Bush Drive	O LOCATO	, <u>-</u> .p -0						
	4200.00		ooo ooo.gc	2 Buon 21110								
			0.11.01									
			College Sta	tion, TX 77840	)							
8	PURPOSE	(a)	Category (S	ee Categories listed a	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Fees					<b>=</b>			omplete Schedule	Т.
								Check if Austin,	, IX,	officenolder liv	ing expense	
								Dues				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	iceholder name	(	Office sou	ght			Office	held	
	experientare to benefit 6/61											
	Date		Payee name									
	02/24/2025		Association	of Former Stu	idents (A&M)	)						
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$250.00		505 George	Bush Drive								
			3									
			Collogo Sto	tion TV 77040	`							
		ļ.,		tion, TX 77840								
	PURPOSE OF	(a)		ee Categories listed a	t the top of this sch	nedule)	(b)	Description				_
	EXPENDITURE		Fees					Check if travel of Check if Austin,			ing expense	Т.
								Dues	, 17,	, officeriolaer liv	ing expense	
								2400				
_	Complete ONLY if direct	<u> </u>	Candidato/Offi	ceholder name		Office sou	aht			Office	hold	
	expenditure to benefit C/OI		zanuluale/Om	cenoidei name		Jilice Sou	ynt			Office	Heiu	
		_										
	Date		Payee name									
	01/24/2025		Association	of Former Stu	idents (A&M)	)						
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$250.00		505 George	Bush Drive								
			College Sta	tion, TX 77840	)							
	PURPOSE	(2)					(h)	Description				
	OF	(۳)	Category (See	ee Categories listed a	it the top of this sch	iedule)	(5)	Description  Check if travel of	outsi	de of Texas. Co	omplete Schedule	т.
	EXPENDITURE		rees					Check if Austin,			•	
								Dues				
	Complete ONLY if direct		Candidate/Offi	ceholder name	(	Office sou	ght			Office	held	
	expenditure to benefit C/OI				·		J			230	-	

## 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

Reimbursement Solicitation/Fundraising Expense
ental Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/34 Rpt: 12/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
l	06/24/2025	Blade, Clinton
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$500.00	9448 Wolf Run Drive
l		
l		Dallas, TX 75227
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Event DJ
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit Grot	
l	Date	Payee name
l	01/17/2025	Bucees
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$46.63	4155 N General Bruce Drive
l		
		Temple, TX 76501
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Fuel
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>o</b>
⊨	D-4-	
l	Date 05/29/2025	Payee name Capitol Gift Shop
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$64.95	1100 Congress Ave
l		
		Austin, TX 78701
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		Gift for constituents
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
ı		

### SCHEDULE F1

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

g Expense Travel Out of State of State

	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: 9/34 Rpt: 13/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	03/05/2025	Capitol Gift Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$148.14	1100 Congress Ave
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gift for constituents
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	01/30/2025	Capitol Gift Shop
┝		
	Amount (\$)	
	\$37.89	1100 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Gift for constituents
		Gilt for constituents
L	0 1: 0 1: 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨		
	Date	Payee name
	02/04/2025	City Park Valet
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.60	7604 Ashleaf CV
		Austin, TX 78759
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Parking Parking
$\vdash$	Complete CNUV'S	Condidate (Office helder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
ldash	,	

### SCHEDULE F1

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	,
1 Total pages Schedule F1:	
Sch: 10/34 Rpt: 14/39	Jones Jr., Venton C. (The Honorable) 00086182
4 Date	5 Payee name
01/23/2025	City Park Valet
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.60	7604 Ashleaf CV
	Austin, TX 78759
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Parking
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
03/03/2025	Dak Funding LLC
Amount (\$)	Payee address; City; State; Zip Code
\$150.00	2416 South Blvd
	Dallas, TX 75215
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Event Sponsorship
Complete CALL V if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Dete	
Date	Payee name
04/15/2025	Dallas County Democratic Party
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	1414 N Washington Ave
	Dallas, TX 75204
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
D. LIBITORE	Candidate/Officeholder/Political Committee
	Event Sponsorship
Complete CNII V if diret	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributing/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/34 Rpt: 15/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	05/09/2025	Element Downtown Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,619.00	109 E 7th St
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		\times \text{Check if Austin, TX, officeholder living expense} \text{Lodging Expense for Representative}
		Loughly Expense for Representative
_	Operation ONLY if all part	One districts (Office healths are seen
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/18/2025	Element Downtown Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,419.91	109 E 7th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		Lodging Expense for Representative
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/20/2025	Element Downtown Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,475.00	109 E 7th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	X Check if Austin, TX, officeholder living expense
		Lodging Expense for Representative
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	- parameter solitone of or	

### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula F1:	1
1	Total pages Schedule F1: Sch: 12/34 Rpt: 16/39	2 FILER NAME Jones Jr., Venton C. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00086182
4	Date	5 Payee name
	02/14/2025	Element Downtown Austin
6	Amount (\$) \$5,262.35	7 Payee address; City; State; Zip Code 109 E 7th St  Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense  Lodging Expense for Representative
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/17/2025	Element Downtown Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,906.86	109 E 7th St
	D. 199	Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Travel Out of District  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lodging Expense for Representative
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/18/2025	FBC Travel
	Amount (\$)	Payee address; City; State; Zip Code
	\$974.25	101 Clay Street
		Nocona, TX 76255
	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
		Office Supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		
1	Total pages Schedule F1: Sch: 13/34 Rpt: 17/39	2 FILER NAME Jones Jr., Venton C. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00086182
4	Date	5 Payee name
	05/30/2025	Four Seasons Hotel Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	98 San Jacinto Blvd
		Austin, TX 78701
8	PURPOSE	1
١	OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Parking
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/28/2025	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	6312 La Vista Dr
		Dallas, TX 75214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Banking Fees
		Dailning Fees
	0 1: 01   1/4    1	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/31/2025	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	6312 La Vista Dr
		Dallas, TX 75214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Banking Fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	expenditure to belieff C/OI	<u></u>
l		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica 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 pages Cabadula 51:	<u> </u>
1	Total pages Schedule F1: Sch: 14/34 Rpt: 18/39	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Jones Jr., Venton C. (The Honorable) 00086182
Ļ	·	, i i i i i i i i i i i i i i i i i i i
4	Date	5 Payee name
L	02/19/2025	Gavin Nicholson
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,217.58	350 N Saint Paul St
		Apt 2502
		Dallas, TX 75215
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Austin Housing Stipend
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$	Data	Davies asses
	Date	Payee name
	02/19/2025	Gavin Nicholson
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,005.00	350 N Saint Paul St
		Apt 2502
		Dallas, TX 75215
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITOILE	Check if Austin, TX, officeholder living expense
		Austin Housing Stipend
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	•	
	Date	Payee name
	02/28/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$146.28	6214 N Lamar Blvd
		Austin, TX 78752
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Office Supplies
	Complete ONLY if alias -t	Condidate/Officeholder name Office country
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	, , , , , , , , , , , , , , , , , , , ,	

## SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 15/34 Rpt: 19/39	Jones Jr., Venton C. (The Honorable)	00086182
4	Date	5 Payee name	
	05/27/2025	Harvard University	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	Massachusetts Hall	
		Cambridge, MA 02138	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Professional Development
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol		. Office field
H	D-4-		
	Date	Payee name	
	04/10/2025	Higbies Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$18.52	720 Brazos Street	
		Austin, TX 78701	
	PURPOSE OF	, ,	Description
	EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Event Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	03/20/2025	Higbies Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$68.77	720 Brazos Street	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			Event Expense
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol		. Onice neiu
H			

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (or processes and installation)

	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: 16/34 Rpt: 20/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	03/06/2025	Higbies Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$188.46	720 Brazos Street
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Event Expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/01/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.82	PO Box 2220
	¥ .2.32	. 6 26. 222
		Manchaca, TX 78652
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Office Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	03/03/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.82	PO Box 2220
		Manchaca, TX 78652
	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
		Office Supplies
		Cinico Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### 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 Committee

Fees Office Overhead/fr
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/C

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	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: 17/34 Rpt: 21/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	02/03/2025	Hill Country Springs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.83	PO Box 2220
		Manchaca, TX 78652
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Cinice Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	01/02/2025	Hill Country Springs
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$10.83	PO Box 2220
	Ψ10.00	1 O BOX LLLO
		Manchaca, TX 78652
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, of Office Supplies		Check if Austin, TX, officeholder living expense
		Cinico Gappinos
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/03/2025	Home Depot
H	Amount (\$)	Payee address; City; State; Zip Code
	\$54.28	2610 Fort Worth Ave
		Dallas, TX 75211
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Office Supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
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#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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: 18/34 Rpt: 22/39 Jones Jr., Venton C. (The Honorable) 00086182 4 Date Payee name 04/29/2025 LAZ Parking 6 Amount (\$) Payee address; State; Zip Code \$28.06 615 San Jacinto Blvd Austin, TX 78701 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. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Parking Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/27/2025 Legislative Study Group Amount (\$) Payee address; City; State; Zip Code \$1,030.00 PO Box 12943 Austin, TX 78711 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/25/2025 Lonestar Queer Amount (\$) Payee address: City: State; Zip Code \$37.89 109 E 7th St Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift for constituents 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 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (orders extended that is a second or secon

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla		Expens Wages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a d	rict category not listed above)
1	Total pages Schedule F1:							Filer ID	(Ethics Commission Filers)
L	Sch: 19/34 Rpt: 23/39	Jones Jr., \	Venton C. (The Honorable	le)				00086182	
4	Date	5 Payee name	?						
	02/10/2025	Macys							
6	Amount (\$)	7 Payee addre	ess; City; St	ate; Zip C	ode				
	\$1,170.39	8687 N Ce	ntral Expry						
		Dallas, TX	75225						
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	(b)	Description			
	OF EXPENDITURE		rhead/Rental Expense	,				e of Texas. Comp	
	_/\\.\.\.					ш		officeholder living	expense
						Office Supplie	55		
_	Complete ONLY if direct	Candidata/Of	ficaboldar nama	Office	liab+			Office he	Id
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ugnt			Office ne	lu .
	Date	Payee name	)						
	04/01/2025	Mexican A	merican Legislative Caud	cus					
	Amount (\$)	Payee addre	ess; City; St	ate; Zip C	ode				
	\$300.00	1108 Lava	ca Street						
		Suite 110-3	351						
		Austin, TX	78701						
	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	(b)	Description			
	OF EXPENDITURE	Fees	<u> </u>	-,		<b>=</b>		e of Texas. Comp	
	LA LADITORL					느	, TX, (	officeholder living	expense
						Dues			
_	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	liap+			Office he	ld .
	expenditure to benefit C/Oł		icendidei name	Office 500	uynı			Office file	iu
	Date	Payee name							
L	01/31/2025	Michaels							
	Amount (\$)	Payee addre	ess; City; St	ate; Zip C	ode				
	\$717.76	5500 Gree	nville Ave						
		Dallas, TX	75206						
	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	(b)	Description			
	OF EXPENDITURE		rhead/Rental Expense					e of Texas. Comp	
						Check if Austin, Office Supplie		officeholder living	expense
						Onice Supplie	.J		
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	liabt			Office he	ld .
	expenditure to benefit C/O		ncenduci name	Omce 300	agrit			Office file	iu.

## 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

hoursement Solicitation/Fundraising Expense
al Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
act Labor OTHER (enter a category not listed above)

1 Total pages Schedule F1: Sch: 20/34 Rpt: 24/39 Jones Jr., Venton C. (The Honorable)  4 Date 04/08/2025 Midtown Printing  6 Amount (\$) 7 Payee address; City; State; Zip Code 4605 W Loop 289  Lubbock, TX 79414  8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	ilers)
4 Date 04/08/2025 5 Payee name Midtown Printing 6 Amount (\$) 7 Payee address; City; State; Zip Code 4605 W Loop 289 Lubbock, TX 79414	
04/08/2025 Midtown Printing  6 Amount (\$) 7 Payee address; City; State; Zip Code \$702.25 4605 W Loop 289  Lubbock, TX 79414	
6 Amount (\$) 7 Payee address; City; State; Zip Code 4605 W Loop 289  Lubbock, TX 79414	
\$702.25 4605 W Loop 289  Lubbock, TX 79414	
Lubbock, TX 79414	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (D) Description	
OF Office Overhead/Pental Expanse Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense	
Office Supplies	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
06/03/2025 NGP VAN	
Amount (\$) Payee address; City; State; Zip Code	
\$167.90 655 15th St. NW	
Suite 650	
Washington, DC 20005	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  (b) Description	
Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
Email Database	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
· · · · · · · · · · · · · · · · · · ·	
Date Payee name 05/02/2025 NGP VAN	
Amount (\$) Payee address; City; State; Zip Code \$167.90 655 15th St. NW	
Suite 650	
Washington, DC 20005	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense  Email Database	
Email Balabase	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/34 Rpt: 25/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	04/28/2025	NGP VAN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$335.80	655 15th St. NW
		Suite 650
		Washington, DC 20005
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email Database
		Email Database
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>-</del>
	Date	Payee name
	02/06/2025	NGP VAN
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$159.90	655 15th St. NW
		Suite 650
		Washington, DC 20005
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officenoider living expense		Email Database
		Linai Batasase
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
Г	Date	Payee name
	01/02/2025	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$159.90	655 15th St. NW
		Suite 650
		Washington, DC 20005
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email Database
		Linai Dalabase
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
Г		

### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 22/34 Rpt: 26/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	04/14/2025	Not My Son
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	4500 Malcolm X Blvd
		Dallas, TX 75215
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
	02/18/2025	Office Depot
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$62.67	2101 South Lamar
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expens		Office Supplies
		Since Cuppines
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/28/2025	Office Max
H	Amount (\$)	Payee address; City; State; Zip Code
	\$52.78	2415 N Haskell Ave
		Dallas, TX 75204
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Office Supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/34 Rpt: 27/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	06/03/2025	Pappasitos
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$136.31	6513 N Interstate Hwy 35
		Austin, TX 78752
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Staff Meals
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	01/08/2025	Renaissance Hotel Dallas
	Amount (\$)	Payee address; City; State; Zip Code
	\$224.04	1907 Elm Street
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Staff Lodging
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Davisa nama
	01/14/2025	Payee name Roaring Fork Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$166.02	701 Congress Ave
	Ψ100.02	701 Congress / We
		Austin, TX 78701
	PURPOSE	Tu.
	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	Check if Austin, TX, officeholder living expense
		Staff Meals
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	oxperialitate to betterit 6/01	<u> </u>

## SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 24/34 Rpt: 28/39	Jones Jr., Venton C. (The Honorable)		00086182
4	Date	5 Payee name		-
	06/23/2025	Southwest Airlines		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$5.60	2702 Love Field Dr		
		Dallas, TX 75235		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	) Description
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE			Check if Austin, TX, officeholder living expense  Staff Flight to Austin
				Stall Flight to Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	t Office held
3	expenditure to benefit C/Ol		gni	Office field
	Data	D		
	Date 06/23/2025	Payee name Southwest Airlines		
			-1-	
	Amount (\$)	Payee address; City; State; Zip Co	oae	
	\$5.60	2702 Love Field Dr		
		D. II TV 75005		
		Dallas, TX 75235		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Staff Flight to Dallas
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	t Office held
	expenditure to benefit C/Ol	1		
	Date	Payee name		
	04/03/2025	Southwest Airlines		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$265.48	2702 Love Field Dr		
		Dallas, TX 75235		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	) Description
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL			Check if Austin, TX, officeholder living expense
				Flight to Austin
	Complete ONI V if direct	Candidate/Officeholder name Office sou	abt	t Office held
	Complete ONLY if direct expenditure to benefit C/Ol		ynı	Office field

## SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/34 Rpt: 29/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	01/06/2025	Southwest Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.20	2702 Love Field Dr
		Dallas, TX 75235
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Staff Travel
		Stall Havel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	06/11/2025	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$127.30	225 Varick Street
		New York, NY 10014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website Hosting
		Website Hosting
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	06/10/2025	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.58	225 Varick Street
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	<b>—</b> /4: ————	Check if Austin, TX, officeholder living expense  Website Hosting
		website nosting
	Operation ONLY if direct	Out distance (Office health annual and office a sought
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking 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

Travel in District
Travel Out of District
OTHER (enter a cate

Transportation Equipment & Related Expense Travel in District Travel Out of District

Solicitation/Fundraising Expense

Legal Services 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: 26/34 Rpt: 30/39 00086182 Jones Jr., Venton C. (The Honorable) 4 Date Payee name 05/12/2025 Squarespace 6 Amount (\$) Payee address; City; State; Zip Code \$163.67 225 Varick Street New York, NY 10014 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. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website Hosting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/11/2025 Squarespace Amount (\$) Payee address; City; State; Zip Code \$163.67 225 Varick Street New York, NY 10014 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website Hosting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/11/2025 Squarespace Amount (\$) Payee address: City: State; Zip Code \$155.88 225 Varick Street New York, NY 10014 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website Hosting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/34 Rpt: 31/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	02/24/2025	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.35	225 Varick Street
		New York, NY 10014
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Website Hosting
		Wobbite Hooting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/11/2025	Squarespace
_	Amount (\$)	Payee address; City; State; Zip Code
	\$140.29	225 Varick Street
	Ψ110.20	220 Validit Giloot
		New York, NY 10014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Website Hosting
		Trosono riocanig
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/15/2025	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.57	225 Varick Street
		New York, NY 10014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website Hosting
		vveusite ที่บริเทิญ
_	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

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		mmittee Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.					OTHER (enter a	category not listed al	oove)
1	Total pages Schedule F1:	2 FILER NA	ME				3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 28/34 Rpt: 32/39	Jones Jr.	, Venton C. (The Hor	norable)				00086182		
4	Date	5 Payee nai	me							
	01/15/2025	Squares	oace							
6	Amount (\$)	7 Payee add	dress; City;	State; Zip C	ode					
	\$13.57	225 Vario	ck Street							
		New Yor	k, NY 10014							
8	PURPOSE OF	(a) Category	(See Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Advertisi	ng Expense			ш		ide of Texas. Com , officeholder livinç	plete Schedule T.	
						Website Host			g expense	
						***************************************	و	9		
9	Complete ONLY if direct	Candidate/	Officeholder name	Office sou	<u>l</u> uaht			Office he	eld	
	expenditure to benefit C/OI	Η								
	Date	Payee nai	ne							
	01/13/2025	Squares	oace							
	Amount (\$)	Payee add	dress; City;	State; Zip Co	ode					
	\$109.12	225 Vario	ck Street							
		New Yor	k, NY 10014							
	PURPOSE OF	(a) Category	(See Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Advertisi	ng Expense					ide of Texas. Com , officeholder living	plete Schedule T.	
						Website Host			g expense	
								,		
H	Complete ONLY if direct	Candidate/	Officeholder name	Office sou	<u>I</u> ught			Office he	eld	
	expenditure to benefit C/OI	H								
	Date	Payee nai	ne							
	01/13/2025	St Luke l	JMC							
	Amount (\$)	Payee add	dress; City;	State; Zip Co	ode					
	\$250.00	5710 E F	RL Thorton Fwy							
		Dallas, T	X 75223							
	PURPOSE	(a) Category	(See Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE		tions/Donations Made						plete Schedule T.	
		Candidat	e/Officeholder/Politic	al Committee		Donation	, TX	, officeholder living	g expense	
						Donadon				
$\vdash$	Complete ONLY if direct	Candidate/	Officeholder name	Office sou	<u>l</u> uaht			Office he	eld	
	expenditure to benefit C/OI			565 300	y			211100 111	<del></del>	
$\vdash$										
L										

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/34 Rpt: 33/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	03/21/2025	Statesman Capitol 10K
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$165.76	305 S Congress Ave
L		Austin, TX 78704
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Event Registration
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/18/2025	Stonewall Democrats of Dallas
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	PO Box 192305
		Dallas, TX 75219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Dues
		- Buco
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/04/2025	Texas Capitol
	Amount (\$)	Payee address; City; State; Zip Code
	\$549.00	1100 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Office Supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
l		

## 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 30/34 Rpt: 34/39	Jones Jr., Venton C. (The Honorable) 00086182
4	Date	5 Payee name
	03/31/2025	Texas Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 15707
		Austin, TX 78761
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  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del></del>
	Date	Payee name
	03/03/2025	Texas House LGBTQ Cacucs
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	PO Box 2960
		Austin, TX 78769
	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
		Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<u> </u>
	Date	Payee name
	02/14/2025	Texas Legislative Black Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,005.00	PO Box 12128
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Dues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefft C/OI	1

### SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
Ļ	T-4-1 O-1	· · · · · · · · · · · · · · · · · · ·	_
ľ	Total pages Schedule F1:		
L	Sch: 31/34 Rpt: 35/39	Jones Jr., Venton C. (The Honorable) 00086182	
4	Date	5 Payee name	
	06/02/2025	The Jukebox Heroes DFW	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$1,545.00	50 Washington Street	
	,		
		Nonvolle CT 06054	
L		Norwalk, CT 06854	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Event Expense	
		Event Expense	
L			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to benefit of or		
	Date	Payee name	
	05/21/2025	The Jukebox Heroes DFW	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,545.00	50 Washington Street	
	, ,		
		Norwalk, CT 06854	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Event Expense	
		ZYONK ZAPONOO	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	<b>v</b>	
L			
	Date	Payee name	
	01/13/2025	Tumi Dallas	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$488.00	8687 N Central Expry	
		Dallas, TX 75225	
	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Office Supplies	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
$\vdash$			
L			

## SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to compl	lete this fo	rm.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 32/34 Rpt: 36/39	Jones Jr., Venton C. (The Honorable)			00086182	
4	Date	5 Payee name		•		
	01/08/2025	Two Podners Dallas				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$77.77	1441 Robert B Cullum Blvd				
		Dallas, TX 75210				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	<b>)</b> Descript	tion		
	OF EXPENDITURE	Office Overhead/Rental Expense				plete Schedule T.
			Staff M		officeholder living	g expense
			Otan W	cuis		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	t		Office he	eld .
•	expenditure to benefit C/OI		•		000 1	
	Date	Payee name				
	06/02/2025	Wix.com				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$38.97	500 Terry A Francois Blvd				
	Ψ00.31	See very At Talleois Blvd				
		San Francisco, CA 94158				
	PURPOSE		<b>)</b> December	V		
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	Descript		de of Texas. Com	plete Schedule T.
	EXPENDITURE	Advertising Expense			officeholder living	
			Website	e Hosting		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	t		Office he	eld
	experience to benefit Gree					
	Date	Payee name				
	05/02/2025	Wix.com				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$38.97	500 Terry A Francois Blvd				
		San Francisco, CA 94158				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	) Descript			
	EXPENDITURE	Advertising Expense			de of Texas. Com officeholder living	plete Schedule T.
				e Hosting		y expense
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	t		Office he	eld
	expenditure to benefit C/OI					
_						

### 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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	Salarie	-	es/Contract Labor		OTHER (enter a	strict a category not listed ab	ove)
				The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 33/34 Rpt: 37/39		Jones Jr., V	enton C. (The F	lonorable)				00086182		
4	Date	5	Payee name								
	04/02/2025		Wix.com								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Code					
	\$36.80		500 Terry A	Francois Blvd							
			San Francis	sco, CA 94158							
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this schedule)	(b	<b>)</b> Description				
	OF EXPENDITURE		Advertising							plete Schedule T.	
	EXI ENDITORE						ш		, officeholder living	g expense	
							Website Host	tıng	)		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	Office s	ough	t		Office h	eld	
	experioritire to beriefit C/Or										
	Date		Payee name								
	03/03/2025		Wix.com								
	Amount (\$)	H	Payee addres	ss; City;	State; Zip	Code					
	\$36.80		500 Terry A	Francois Blvd							
			,								
			San Erancic	sco, CA 94158							
		ļ.,				1					
	PURPOSE OF	(a)		ee Categories listed at t	he top of this schedule)	(a)	Description	outoi	ide of Toyon Com	anlota Sahadula T	
	EXPENDITURE		Advertising	Expense			<u> </u>		, officeholder livin	plete Schedule T. g expense	
							Website Host			5 - 1	
									,		
_	Complete ONLY if direct		Candidate/Offi	ceholder name	Office s	ouahi	 t		Office h	eld	
	expenditure to benefit C/O					9					
-	Dete	_									
	Date		Payee name								
	02/03/2025		Wix.com								
	Amount (\$)		Payee addres		State; Zip	Code					
	\$36.80		500 Terry A	Francois Blvd							
			San Francis	sco, CA 94158							
	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this schedule)	(b	) Description				
	OF EXPENDITURE		Advertising				ш			plete Schedule T.	
	EXPENDITORE						ш		, officeholder living	g expense	
							Website Host	tıng	)		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Office s	ough	t		Office h	eld	
L	experiulture to benefit C/On										
1											

## SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 34/34 Rpt: 38/39	Jones Jr., Venton C. (The Honorable)		00086182
4	Date	5 Payee name		
l	01/06/2025	Wix.com		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$36.80	500 Terry A Francois Blvd		
		San Francisco, CA 94158		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Advertising Expense	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	,		Check if Austin, TX, officeholder living expense
l				Website Hosting
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soul	ght	Office held
L	experientare to benefit Grot	'		
l	Date	Payee name		
l	02/25/2025	X (Twitter)		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$90.72	1355 Market Street		
l				
l		San Francisco, CA 94103		
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Subscription
l				Subscription
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		giit	Office field
⊢				

## POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Fees Office of Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing I Committee Legal Services Salarie	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Offt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor					
	,	The Instruction Guide explains how to	complete this form.					
1	Total pages Schedule G: Sch: 1/1 Rpt: 39/39	2 FILER NAME Jones Jr., Venton C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086182				
4	Date	5 Payee name						
	06/02/2025	Element Downtown Austin						
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip of 109 E 7th St	Code					
	Reimbursement from political contributions intended	Austin, TX 78701						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense				
	EXPENDITORE		Lodging Expense	e for Representative				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	06/28/2025	Element Downtown Austin						
	Amount (\$)	Payee address; City; State; Zip (	Codo					
			Joue					
	\$1,951.06	109 E 7th St						
	Reimbursement from political contributions intended	Austin, TX 78701						
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense				
	LAFENDITORE		Lodging Expense for Representative					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				