CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complet	te this form.	1 Filer ID (Ethics Commi 00087887		2 Total page	s filed: 41
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFIC	E USE ONLY
OFFICEHOLDER NAME	The Honorable	Benjamin D.			Date Received	
						ICALLY FILED
		LAST		SUFFIX	07/14/2025	
	Daniel	Alders				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Y;	ZIP CODE	Date Hand-deliver	ed or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 8907				Receipt #	Amount
l	T. I TV 75744					
Change of Address	Tyler, TX 75711				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mr.	Christopher L.				
	NICKNAME			CULLIA		
		LAST Wiesinger		SUFFIX		
	,	vviesirigei				
6 CAMPAIGN	STREET ADDRESS (NO PO E	BOX PLEASE);	AP	T / SUITE #; CIT	ΓΥ;	STATE; ZIP CODE
TREASURER ADDRESS	1929 S Beckham Ave	·				
(Residence or Business)						
	Tyler, TX 75701					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER	(214) 683-0567					
PHONE						
8 REPORT						
TYPE	January 15	30th day before	election	Runoff		r campaign treasurer (officeholder only)
	X July 15	8th day before e	election	Exceeded modified	_	(Attach C/OH-FR)
		,		reporting limit		,
9 PERIOD	Month Day Year			Month Da	ay Year	
COVERED	01/01/2025	TH	ROUGH	06/30/2	2025	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	imary	Runoff	Other	
		Ge	eneral	Special		
				<u>—</u>		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUG	GHT (if known)	
	State Representative Distric	ct 6				
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 41

13 C / OH NAME	Alders, Benjamin D. ((The Honorable)		14 Filer ID 00087887	(Ethics Com	ımission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures i	may have been made without	the candidate's or offi	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	<u> </u>			
Ш	GENERAL					
		COMMITTEE ADDR	RESS			
	SPECIFIC					
		COMMITTEE CAMP	PAIGN TREASURER NAME			
		COMMITTEE CAME	PAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED BOLITICAL CO	INTERNITIONS (OTHER THA	N DI EDGES I OANS	. 1	
15 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages 16 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS 17 AFFIDAVIT AFFIDAVIT Sworn to and subscri	OR GUARANTE	ES OF LOANS, OR C	CONTRIBUTIONS MADE ELE		\$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS, C	DONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, CONTRIBUTIONS MADE ELECTRONICALLY) SOURCE OF GUARANTEES OF LOANS) SOURCE OF THE LAST DAY OF THE COURTSTANDING LOANS AS OF THE LAST DAY SOURCE AND SITE AND PRICE OF SURPORT SITE AS TO AY SOURCE OF THE LAST DAY OUTSTANDING LOANS AS OF THE LAST DAY COURTSTANDING LOANS AS OF THE LAST DAY	15,500.00		
	3. TOTAL UNITEM	IZED POLITICAL EX	\$	0.00		
	4. TOTAL POLITIC	CAL EXPENDITURES	5		\$	68,043.47
	 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DESCRIPTION OF THE LAST D				\$	48,302.62
	6. TOTAL PRINCIF OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		tr	rue and correct and includes a	d or political expenditures made by political committees to support the been made without the candidate's or officeholder's knowledge or report this information only if they receive notice of such expenditures. REASURER NAME REASURER ADDRESS PITIONS (OTHER THAN PLEDGES, LOANS, BUTIONS MADE ELECTRONICALLY) \$ 0.00 RANTEES OF LOANS) \$ 15,500.00 \$ 68,043.47 AINED AS OF THE LAST DAY OF THE \$ 48,302.62 TANDING LOANS AS OF THE LAST DAY \$ 0.00 Or affirm, under penalty of perjury, that the accompanying report is correct and includes all information required to be reported by me le 15, Election Code. The Honorable Benjamin D. Alders Signature of Candidate or Officeholder , this the		
			The Honor	abla Panjamin D. A	ldore	
		-				
AFFIX NO	TARY STAMP / SEAL AB	OVE	, and the second			
Sworn to and subso	cribed before me, by the s	aid		this the		dav
of	, 20, to ce	ertify which, witness n	my hand and seal of office.	,		,
Signature of office	cer administering	Printed name o	of officer administering	Title of offic	er administer	0.00 15,500.00 0.00 68,043.47 48,302.62 0.00 anying report is reported by me

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 41
18 FILER I	IAME Benjamin D. (The Honorable)	19 Filer ID 00087887	(Ethics Con	nmission Filers)
	ULE SUBTOTALS OF SCHEDULE		SUBTO	OTAL AMOUNT
1. X	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	15,500.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	\$			
4.	\$			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	48,544.60	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	19,498.87
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	1,440.00

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE				
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/41			
2				3	Filer ID (Ethics Commission 00087887	n Filers)		
4				7	Amount of Contribution (\$)	\$500.00		
_	Dringing Loggy	Austin, TX 78701	0 Employer (Coo Instructions					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)				
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_ Cheshire, Cary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	Dringing oggu	Benbrook, TX 76116	Employer (See Instructions					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
Date Full name of contributor [06/30/2025 Hootman, Joseph Contributor address; City; Sta		_)		Amount of Contribution (\$)	\$25.00		
The Instruction Guide explains how to complete this form. 2 FILER NAME Alders, Benjamin D. (The Honorable) 4 Date 06/24/2025 6 Contributor address; City; State; Zip Code Austin, TX 78701 8 Principal occupation / Job title (See Instructions) Date 06/23/2025 Cheshire, Cary Contributor address; City; State; Zip Code Benbrook, TX 76116 Principal occupation / Job title (See Instructions) Ender Full name of contributor out-of-state PAC (ID#: O6/30/2025 Cheshire, Cary Contributor address; City; State; Zip Code Benbrook, TX 76116 Principal occupation / Job title (See Instructions) Ender Hootman, Joseph Contributor address; City; State; Zip Code Austin, TX 78758 Principal occupation / Job title (See Instructions) Ender G6/26/2025 Moak Casey PAC Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Ender G6/30/2025 Full name of contributor out-of-state PAC (ID#: O6/30/2025 Pivalizza, Evan Contributor address; City; State; Zip Code Filint, TX 75762								
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
		Moak Casey PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
	Principal occu		Employer (See Instructions)				
		Pivalizza, Evan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				

	MONET	MONETARY POLITICAL CONTRIBUTIONS SCHEDUL					
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/41		
2	FILER NAME Alders, Benja	amin D. (The Honorable)		3	Filer ID (Ethics Commission 00087887	on Filers)	
4	Date 06/30/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00	
		Tyler, TX 75703					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 06/29/2025	Schaefer, Matt Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu	Tyler, TX 75711 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)			
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID#: Shoemaker, Keri Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
		Giddings, TX 78942	In the complete this form. 1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/41 Sch: 2/3 Rpt: 5				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/23/2025	TREPAC/Texas Association of Realtors PAC		Amount of Contribution (\$)	\$5,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>			
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> 5)			

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how t	to complete this for	m.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/41	
2	FILER NAME Alders, Benja	amin D. (The Honorable)			3	Filer ID (Ethics Commission 00087887	on Filers)
4	Date 06/30/2025	S Full name of contributor	7	Amount of Contribution (\$)	\$25.00		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 06/30/2025	Wallace, Bonnie	-			Amount of Contribution (\$)	\$250.00
	Deinsinal assu		<u></u>				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
06/23/2025 Weekley, Richard)		Amount of Contribution (\$)	\$2,500.00	
		Houston, TX 77027		Total pages Schedule Sch: 3/3 Rpt: 6/41 3 Filer ID (Ethics Come			
	Principal occu Real Estate	pation / Job title (See Instructions)		, , ,	5)		
	Date 06/28/2025	Full name of contributor Wholesale Beer Distribution Contributor address; City; Stat Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor Williams, Scott Contributor address; City; Stat)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/11 Rpt: 7/41	Alders, Benjamin D. (The Honorable) 00087887
4	Date	5 Payee name
	05/12/2025	Arnold, Elaine
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	7809 Valburn Ave.
		Austin, TX 78731
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Sine Die T-Shirts
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	CAPERIORALE TO DETIRIT C/OF	1
	Date	Payee name
	01/11/2025	Bennett, Robert
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	5100 Sweetbriar Lane
		Apt. 610
		Tyler, TX 75703
-	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/O	1
	Date	Payee name
	05/27/2025	Capitol Commission
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	104 Casa Verde Cv.
	+======	
		Georgetown, TX 78633
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

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		Gift/Awai Legal Se	verage Expense rds/Memorials Expe rvices struction Guide			pens ages	se s/Contract Labor			Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER	RNAME						3	Filer ID	(Ethics Commiss	ion Filers)			
	Sch: 2/11 Rpt: 8/41	Alder	s, Benjamin	D. (The Hono	orable)					00087887					
4	Date	5 Payee	e name												
	01/17/2025	Chas	е												
6	Amount (\$)	7 Payee	e address;	City;	State;	Zip Co	de								
	\$11,729.44	270 F	Park Ave.												
		New	York, NY 100)17											
8	PURPOSE	(a) Categ	Ory (See Catego	ories listed at the to	p of this sche	edule)	(b)	Description							
	OF EXPENDITURE		it Card Paym		•	ĺ					mplete Schedule T.				
	EX. ENDITORE							Credit Card F		, officeholder livii	ng expense				
								Credit Card r	ay	mem					
9	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholde	er name	C	Office sou	ght			Office I	neld				
	Date														
	02/10/2025	Chas	e name												
			e address;	City:	Ctoto:	Zip Co	do								
	Amount (\$) \$2,809.76	1 1	Park Ave.	City;	State,	Zip Co	ue								
	Ψ2,009.70	2701	aik Ave.												
		New	York, NY 100)17											
	PURPOSE OF		ory (See Catego		p of this sche	edule)	(b)	Description							
	EXPENDITURE	Credi	it Card Paym	ent						ide of Texas. Co , officeholder livii	mplete Schedule T. ng expense				
								Credit Card F							
	Complete ONLY if direct	Candid	ate/Officeholde	er name	С	Office sou	ght			Office h	neld				
	expenditure to benefit C/OI	Н													
	Date	Payee	e name												
	03/24/2025	Chas	e												
	Amount (\$)	Payee	e address;	City;	State;	Zip Co	de								
	\$1,393.21	270 F	Park Ave.												
		New	York, NY 100)17											
	PURPOSE	(a) Cated	Ory (See Catego	ories listed at the to	on of this sche	edule)	(b)	Description							
	OF EXPENDITURE	1	it Card Paym			,		Check if travel			mplete Schedule T.				
	EXPENDITORE							_		, officeholder livi	ng expense				
								Credit Card F	ay	ment					
	Complete ONLY if alias -t	Condition	oto/Office health	ar nome		Office as:	~ h+			Office	aald				
	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholde	er name	C	Office sou	ynt			Office h	leid				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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: 3/11 Rpt: 9/41	Alders, Benjamin D. (The Honorable) 00087887
4	Date	5 Payee name
	05/05/2025	Chase
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$522.06	270 Park Ave.
		New York, NY 10017
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Payment
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	06/02/2025	Chase
	Amount (\$)	Payee address; City; State; Zip Code
	\$895.36	270 Park Ave.
		New York, NY 10017
	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
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/11/2025	Chase
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,703.50	270 Park Ave.
		New York, NY 10017
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Credit Card Payment Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Payment
L	0 1, 2, 2, 2, 2	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Credit Card Payment	The Instruction Guide explains how to co	omplete	this form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 4/11 Rpt: 10/41	Alders, Benjamin D. (The Honorable)			00087887	
4 Date	5 Payee name		•		
04/18/2025	Clayton Spangler Photographic Design				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$549.00	235 Point Lick Dr.				
	Charleston, WV 25306				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription		
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outsid		
		L	Check if Austin, TX, anoramic Photo		expense
		``			
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>I</u> ught		Office he	eld
expenditure to benefit C/O					
Date	Payee name				
01/07/2025	Drogin Group				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$2,631.14	401 W 15th St.				
	Ste. 845				
	Austin, TX 78701				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription		
OF EXPENDITURE	Consulting Expense		Check if travel outsid	de of Texas. Com	plete Schedule T.
LAFENDITORE			Check if Austin, TX,		j expense
		"	igital Marketing	Services	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht		Office he	
expenditure to benefit C/O		agrit		Office In	,iu
Date	Payee name				
01/06/2025	EQ Real Estate				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$2,497.49	505 W 41st St.	040			
, , -					
	Austin, TX 78751				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D4	escription		
OF	Office Overhead/Rental Expense	D	Check if travel outsic	de of Texas. Com	plete Schedule T.
EXPENDITURE	_ релес		Check if Austin, TX,		ı expense
		Re	ent for Austin A	Apartment	
0 1. 6		<u> </u>		0	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught		Office he	eld

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

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

	Credit Card Payment	The Instruction Guide explains how to con	-	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 5/11 Rpt: 11/41	Alders, Benjamin D. (The Honorable)		00087887
4	Date	5 Payee name		•
	02/04/2025	EQ Real Estate		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$2,497.49	505 W 41st St.		
		Austin, TX 78751		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Rent for Austin Apartment
_				000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	jht	Office held
	Date	Payee name		
	03/04/2025	EQ Real Estate		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$2,497.49	505 W 41st St.		
		Austin, TX 78751		
	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
				Rent for Austin Apartment
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		jiic	Office field
	Date	Davies name		
	04/04/2025	Payee name EQ Real Estate		
		•	d a	
	Amount (\$)	Payee address; City; State; Zip Coc	зе	
	\$2,497.49	505 W 41st St.		
		A . (1) TV 70754		
		Austin, TX 78751		
	PURPOSE OF	5 ((b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Rent for Austin Apartment
				-
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

	Credit Card Payment		The Instruction Guide 6	xplains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID		(Ethics Commission F	lers)
	Sch: 6/11 Rpt: 12/41		Alders, Benjamin D. (The Hono	rable)			00087	887		
4	Date	5	Payee name			<u>'</u>				
	05/05/2025		EQ Real Estate							
6	Amount (\$)	7	Payee address; City;	State; Zip Co	de					
	\$2,497.49		505 W 41st St.							
			Austin, TX 78751							
8	PURPOSE	(a)	Category (See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expens			Check if travel outsi				
	EXI ENDITORE					Check if Austin, TX,			g expense	
						Rent for Austin A	чрагине	HIL		
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name	Office sou	aht		Off	ice he	ald.	
9	expenditure to benefit C/O		andidate/Officeholder name	Office sou	gni		Oii	ice ne	au	
_	Data	Т	D							
	Date 06/04/2025		Payee name EQ Real Estate							
		_		State: 7in Co	do					
	Amount (\$) \$2,497.49	1	Payee address; City; 505 W 41st St.	State; Zip Co	oue					
	Φ2,497.49		505 W 41St St.							
			Austin TV 70751							
		₩	Austin, TX 78751							
	PURPOSE OF		Category (See Categories listed at the top		(b)	Description Check if travel outsi	de of Texa	s Com	nlete Schedule T	
	EXPENDITURE		Office Overhead/Rental Expens	,e		Check if Austin, TX,				
						Rent for Austin A	Apartme	ent		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght		Off	ice he	eld	
	expenditure to benefit C/Ol	Н								
	Date		Payee name							
	06/11/2025		Flanders, Thomas							
	Amount (\$)		Payee address; City;	State; Zip Co	de					
	\$38.43		P.O. Box 12910							
			Austin, TX 78711							
	PURPOSE	(a)	Category (See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE		Gift/Awards/Memorials Expense			Check if travel outsi				
	LAPENDITORE					Check if Austin, TX,		er living	expense	
						DOGE Chair Gif	τ			
	Complete ONLY if direct	Ļ	Candidate/Officeholder name	Office	ah+		O#	ico ba	7ld	
	Complete ONLY if direct expenditure to benefit C/Ol		anuluate/Onicendider name	Office sou	ynı		Oπ	ice he	eiu	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

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		Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)		
	Sch: 7/11 Rpt: 13/41	Alders, Benjamin D. (The Honorable)	00087887		
4	Date 03/05/2025	5 Payee name Friend, Daniel			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
ľ	\$1,000.00	2600 Gracy Farms Ln.			
		Apt. 817			
		Austin, TX 78758			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.		
		Campaign Sa	TX, officeholder living expense		
		Jampagn 30	•		
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held		
H	Date	Payee name			
	04/24/2025	Friend, Daniel			
	Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00 2600 Gracy Farms Ln.					
		Apt. 817			
		Austin, TX 78758			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	putaida of Toura Complete California T		
	EXPENDITURE	Salaries/ Wages/ Contract Eabor	outside of Texas. Complete Schedule T. TX, officeholder living expense		
		Campaign Sa	ılary		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held		
	Date	Payee name			
	06/30/2025	Friend, Daniel			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.00	2600 Gracy Farms Ln.			
		Apt. 817			
		Austin, TX 78758			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel of the contract Labor.	outside of Texas. Complete Schedule T.		
	EXPENDITURE	Jaianes/ Wages/Contract Eabor	TX, officeholder living expense		
		Campaign Sa	alary		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	Complete ONLY if direct expenditure to benefit C/OI	9	Office field		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	ges/Contract Labor OTHER (enter a category not listed above)
_	T	<u> </u>		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 8/11 Rpt: 14/41	Alders, Benjamin D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00087887
4	Date	Payee name		
	03/07/2025	Short, Jack		
6	Amount (\$) \$1,000.00	Payee address; City; State; 2020 Hollystone Dr.	Zip Code	9
	Ψ1,000.00	2020 Hollystone Dr.		
		Tyler, TX 75703		
8	PURPOSE OF	Category (See Categories listed at the top of this schedu	_{ile)} (b)	Description
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Campaign Salary
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Offi	ce sough	nt Office held
	Date	Payee name		
	05/01/2025	Short, Jack		
	Amount (\$)	Payee address; City; State;	Zip Code	2
	\$1,000.00	2020 Hollystone Dr.	p	
	Φ1,000.00	2020 Hollystolle Dr.		
		Tyler, TX 75703		
	PURPOSE	Category (See Categories listed at the top of this schedu	ıle) (b	Description
	OF 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 expenditure to benefit C/OI	Candidate/Officeholder name Offi	ce sough	nt Office held
	Date	Payee name		
	06/23/2025	Short, Jack		
	Amount (\$)		Zip Code	
	` '	• • • • • • • • • • • • • • • • • • • •	zip Code	=
	\$1,000.00	2020 Hollystone Dr.		
		Tyler, TX 75703		
_	DUDDOOF		1.0	N 5
	PURPOSE OF	Category (See Categories listed at the top of this schedu	ıle) (b	D) Description
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign Salary
				Campaigh Salary
	Complete ONLY if direct	Candidate/Officeholder name Offi	ce sough	nt Office held
	expenditure to benefit C/OI			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		er ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 15/41		087887
4	Date	5 Payee name	
_	01/09/2025	Smith County Young Republicans	
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 3923 S Broadway Ave.	
	φ100.00	3923 3 bloadway Ave.	
		Tyler, TX 75701	
8	PURPOSE		
Ü	OF	, , , , , , , , , , , , , , , , , , , ,	Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, offic	eholder living expense
		Event Expense	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
3	expenditure to benefit C/OI		Office field
	Date	Payee name	
	04/09/2025	TDCJ	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$245.19		
		#290	
		Austin, TX 78757	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Check if Austin, TX, offic	Texas. Complete Schedule T.
		Tray/Boards	errolder living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	DH	
	Date	Payee name	
	06/23/2025	TDCJ	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.30		
		#290	
		Austin, TX 78757	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Cit(A) your de (Magraphical Supposes	Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Check if Austin, TX, offic	
		Gavel #104351	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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 Travel in District

	Candidate/Officeholder/Politica		Legal Services			se s/Contract Labor		OTHER (enter a	strict category not listed above)
	Credit Card Payment		The Instruction Gu	iide explains how to co	mpl	ete this form.				
1	Total pages Schedule F1:	2 FILEF	RNAME				3	Filer ID	(Ethics Commission	Filers)
	Sch: 10/11 Rpt: 16/41	Aldei	rs, Benjamin D. (The H	onorable)				00087887		
4	Date	5 Paye	e name				_			
	04/30/2025		BCU Legislative Cauci	us						
6	Amount (\$)	7 Paye	e address; City;	State; Zip Co	ode					
	\$100.00	1034	Sauliner Street							
		Hous	ston, TX 77019							
8	PURPOSE	(a) Categ	JOry (See Categories listed at the	oo top of this schodulo)	(b)	Description				
	OF	Fees	· -	ie top of this schedule)	l` <i>′</i>		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					\Box		officeholder living	g expense	
						Membership	Du	es		
9	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholder name	Office sou	ıght			Office h	eld	
	Date	,	e name							
	02/19/2025	Texa	s Conservative Coalitic	on						
	Amount (\$)	,	e address; City;	State; Zip Co	ode					
	\$1,000.00	P.O.	Box 2659							
		Austi	n, TX 78681							
	PURPOSE	(a) Cateo	JOTY (See Categories listed at the	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				<u> </u>		de of Texas. Com officeholder living	plete Schedule T.	
						Membership			у ехрепае	
	Complete ONLY if direct	<u> </u>	ate/Officeholder name	Office sou	<u>l</u> ight			Office h	eld	
	expenditure to benefit C/OI	4								
	Date	Pave	e name							
	02/11/2025	,	s Federation of Repub	lican Women						
	Amount (\$)		e address; City;	State; Zip Co	ode					
	\$250.00	,	0 US-183 J4	, ,						
		Austi	n, TX 78750							
	PURPOSE		JOTY (See Categories listed at the	as top of this school (Is)	(b)	Description				
	OF		t Expense	ie top of tris scriedule)	(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					_		officeholder living	g expense	
						Event Expens	se			
	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholder name	Office sou	ıght			Office h	eld	
	experientare to benefit 6/01	•								

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

	Candidate/Officeholder/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: 11/11 Rpt: 17/41	Alders, Benjamin D. (The Honorable) 00087887	
4	Date	5 Payee name	_
	03/04/2025	Texas House Republican Caucus	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$1,000.00	P.O. Box 13305	
		Austin, TX 78681	
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	
		Membership Dues	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	_
	06/26/2025	WinRed	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.91	1776 Wilson Blvd	
		Ste. 530	
		Arlington, VA 22219	
	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	
		Service Fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	06/30/2025	WinRed	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.36	1776 Wilson Blvd	
		Ste. 530	
		Arlington, VA 22219	
	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	
		Service Fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	п	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete t	his form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 1/23 Rpt: 18/41	Alders, Benjamin D	. (The Honorable)			00087887		
4 CREDIT CARD ISSUER		ncial institution ase	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	 \$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$19.49	02/11/2025	03/22/202	25			
7 PAYEE	(a) Payee name		(b) Payee a	address;	ss; City, State,		
	Park ATX		301 W 2n 3rd Floor Austin, TX				
8 PURPOSE OF				tion			
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Parking				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	. ,	Credit Card Issuer	Paid		
	\$528.26	01/13/2025	01/14/202	25			
PAYEE (a) Payee name		•	(b) Payee a	address;	City,	State,	Zip Code
	Home Depot		3600 S I-35 Frontage Rd				
			Austin, T				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Office Overhead/Rent		Office Su	pplies			
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 sought Office held				
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$74.16	(b) Date of Charge 06/26/2025	(c) Date(s) 06/26/202	Credit Card Issuer 25	Paid		
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
	Tunable 00		2304 Lak	e Austin Blvd			
	Tumble 22						
			Austin, T				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
l <u>—</u>	Food/Beverage Exper	*	Staff Lund	ch			
X Political							
Non-Political	<u> </u>	of Texas. Complete Schedule T.	j	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		

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: 2/23 Rpt: 19/41	Alders, Benjamin D	. (The Honorable)		00087887		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$50.00	(b) Date of Charge 01/02/2025	(c) Date(s) Credit Card Issuer 01/14/2025	r Paid		
7 PAYEE	(a) Payee name Federalist Society		(b) Payee address; 1776 I St. NW Washington, DC 20066	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Membership Dues			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$5,100.59	(b) Date of Charge 01/06/2025	(c) Date(s) Credit Card Issuel 01/14/2025	r Paid		
PAYEE	(a) Payee name CAMP Political LLC	;	(b) Payee address; 401 N 46th St. Oklahoma City, OK 73105	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Christmas Cards			
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 Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$3,266.60	(b) Date of Charge 01/09/2025	(c) Date(s) Credit Card Issuel 01/14/2025	r Paid		
PAYEE	(a) Payee name Terry Blacks BBQ		(b) Payee address; 1003 Barton Springs Rd Austin, TX 78704	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Session Kickoff Dinner			
Non-Political Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
expenditure to benefit C/OH	Janaratto/Omocnoluei	Thank Office	o oodgiit	Since field		

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: 3/23 Rpt: 20/41	Alders, Benjamin D	. (The Honorable)			00087887		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$636.50	(b) Date of Charge 01/11/2025	(c) Date(s) 01/14/20) Credit Card Issuer 125	Paid		
7 PAYEE	(a) Payee name Walmart		(b) Payee address; City, State, 710 E Ben White Blvd Austin, TX 78704			Zip Code	
8 PURPOSE OF (a) Category (b) Description							
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Office Su				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$159.60	(b) Date of Charge 01/11/2025	(c) Date(s) 01/14/20) Credit Card Issuer 125	Paid		
PAYEE (a) Payee name (b) Payee			(b) Payee	address;	City,	State,	Zip Code
	Walmart		710 E Ben White Blvd				
			Austin, T				
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 expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held		
PAYMENT	(a) Amount Charged \$248.90	(b) Date of Charge 01/12/2025	(c) Date(s) 01/14/20) Credit Card Issuer 125	Paid		
PAYEE	(a) Payee name Costco		(b) Payee 4301 W V	William Cannon D	City, Or BLDG A100	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Office Su				
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		

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: 4/23 Rpt: 21/41	Alders, Benjamin D	. (The Honorable)		00087887			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$917.36	(b) Date of Charge 01/14/2025	(c) Date(s) Credit Card Issue 01/14/2025	er Paid			
7 PAYEE 8 PURPOSE OF	(a) Payee name Austin Gift Compan (a) Category	ıy	(b) Payee address; 4211 S Lamar Blvd Suite A-19 Austin, TX 78704 (b) Description	City,	State,	Zip Code	
EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Supplies Office Overhead/Rental Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name			e sought	Office held			
PAYMENT	(a) Amount Charged \$146.14	(b) Date of Charge 01/12/2025	(c) Date(s) Credit Card Issuer Paid 01/14/2025				
PAYEE	(a) Payee name Bob Bullock TX Museum Store		(b) Payee address; 1800 Congress Ave. Austin, TX 78701	City,	State,	Zip Code	
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 expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$30.31	(b) Date of Charge 01/12/2025	(c) Date(s) Credit Card Issue 01/14/2025	er Paid			
PAYEE	(a) Payee name Old Main Street Station		(b) Payee address; 122 Main St. Buda, TX 78610	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supplies				
Non-Political Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	Check if Austin, TX e sought	Office held	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officeriolide//Folitica		ruction Guide explains how	to complete		THEN (enter a categor	ry not iisteu a	bove)
1 Total pages Schedule F4:	2 FILER NAME	<u> </u>	-		3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 5/23 Rpt: 22/41	Alders, Benjamin D	. (The Honorable)			00087887		•
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$227.49	(b) Date of Charge 01/13/2025	(c) Date(s) 01/14/20) Credit Card Issuer 125	Paid		
7 PAYEE	(a) Payee name Walmart		(b) Payee 710 E Be Austin, T	en White Blvd	City,	State,	Zip Code
[(b) Descrip	otion			
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 \$91.60	(b) Date of Charge 01/13/2025	(c) Date(s) 01/14/20) Credit Card Issuei 125	Paid		
PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code
	Home Depot		3600 S I-	-35 Frontage Rd			
			Austin, T	X 78704			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip				
Non-Political	(-) 🗆 a	(T. 0. 1. 0. 1. T.			·		
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			e sought		Office field		
PAYMENT	(a) Amount Charged \$201.89	(b) Date of Charge 01/14/2025	(c) Date(s) 01/14/20) Credit Card Issuer 125	r Paid		
PAYEE	(a) Payee name Chick Fil A		(b) Payee 600 Cong C150 Austin, T	gress Ave.	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Descrip Food for	otion Staff and Visitors	3		
Non-Political	(*) —	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		

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 hov	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: 6/23 Rpt: 23/41	Alders, Benjamin D	. (The Honorable)			00087887						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF U EXPENDITUI CHARGED T CARD	RES	\$						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	it Card Issuer	Paid						
	\$48.49	01/14/2025	01/14/2025								
7 PAYEE	(a) Payee name	•	(b) Payee addre	ss;	City,	State,	Zip Code				
	Air Garage Parking		400 Congress								
	Austin, TX 78701			701							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description								
X Political	Travel Out of District	,	Parking								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Ch	eck 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) Cred	it Card Issuer	Paid						
	\$216.00	01/17/2025	02/07/2025								
PAYEE	PAYEE (a) Payee name (b) Payee address;			ss;	City,	State,	Zip Code				
	USPS		2627 S Broadway Ave.								
			Tyler, TX 7570)1							
PURPOSE OF	(a) Category	of this cohodule)	(b) Description								
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		PO Box								
X Political		'									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Ch	eck if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought		Office held						
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	it Card Issuer	Paid						
	\$73.69	01/17/2025	02/07/2025								
PAYEE	(a) Payee name		(b) Payee addre	ss;	City,	State,	Zip Code				
	l		710 E Ben Wh	ite Blvd							
	Walmart										
			Austin, TX 787	704							
PURPOSE OF	(a) Category	of this cohodule)	(b) Description								
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	Office Supplie	S							
X Political											
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		eck if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought		Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)				
Sch: 7/23 Rpt: 24/41	Alders, Benjamin D	. (The Honorable)		00087887					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged \$87.09	(b) Date of Charge 01/18/2025	(c) Date(s) Credit Card Issuer 02/07/2025	Paid					
7 PAYEE	(a) Payee name Costco		(b) Payee address; 4301 W William Cannon D	City, Sta Or BLDG A100	te, Zip Code				
0 00000000	Austin, TX 78749								
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 expense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$10.79	(b) Date of Charge 01/25/2025	(c) Date(s) Credit Card Issuer 02/07/2025	Paid					
PAYEE	(a) Payee name		(b) Payee address;	City, Sta	te, Zip Code				
	Hobby Lobby		6600 S MoPac Expy						
			Austin, TX 78749						
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supplies						
Non-Political		of Towns Organizate Coloradado T	Observing TV	ete - la lala e là de es a company					
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expense Office held					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	maric Office	2 Sought	Office field					
PAYMENT	(a) Amount Charged \$4.70	(b) Date of Charge 01/27/2025	(c) Date(s) Credit Card Issuer 02/07/2025	Paid					
PAYEE	(a) Payee name HEB		(b) Payee address; 2652 Lake Austin Blvd Austin, TX 78703	City, Sta	te, Zip Code				
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 expense					
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 11 11 11 11 11 11 11 11 11 11 11 11 1	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 8/23 Rpt: 25/41	Alders, Benjamin D	. (The Honorable)			00087887		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$143.90	(b) Date of Charge 01/28/2025	(c) Date(s) 02/07/20) Credit Card Issuer 125	Paid		
7	PAYEE	(a) Payee name Amazon		(b) Payee 410 Terry Seattle. \		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	(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 (b) Date of Charge (c) Date(s) Credit Card Is 02/07/2025				Paid			
	PAYEE	(a) Payee name ReadyFresh			Interstate Hwy 35	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Austin, T (b) Descrip Water De	ption			
	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 \$270.00	(b) Date of Charge 01/30/2025	(c) Date(s) 02/07/20) Credit Card Issuer 125	Paid		
	PAYEE	(a) Payee name CampV		(b) Payee 3212 W I Tyler, TX	Front St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descri Bets for \	otion Vets Event Exper	nse		
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	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 t	his form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 9/23 Rpt: 26/41	Alders, Benjamin D	. (The Honorable)			00087887			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid			
	\$533.00	01/31/2025	02/07/202	25				
7 PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
	CWJ Strategies			adway Ave.				
			Tyler, TX					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Compliance Services					
X Political	Consulting Expense	· · · · · · · · · · · · · · · · · · ·	Complian	ce Services				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	[Check if Austin, TX,	officeholder living expe	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge								
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid			
	\$6.49	01/31/2025	02/07/202	(5				
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
	ReadyFresh		16420 N I	nterstate Hwy 35	5			
			Austin, T	〈 78728				
PURPOSE OF	(a) Category	of this sole dule)	(b) Descrip					
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Water De	livery				
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								
PAYMENT	(a) Amount Charged \$209.46	(b) Date of Charge 02/01/2025	(c) Date(s) 02/07/202	Credit Card Issuer 25	· Paid			
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
			117 Adam	ns Street				
	Etsy							
			Brooklyn,	NY 11201				
PURPOSE OF (a) Category			(b) Descrip					
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			Office Sup	oplies				
X Political Since Overneau/Nental Expense								
Non-Political	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	•							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica			Salaries/Wages/Co	ntract Labor	OTHER (enter a cate	gory not listed al	oove)
	The Inst	ruction Guide explains ho	w to complete	this form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)
Sch: 10/23 Rpt: 27/41	Alders, Benjamin D	. (The Honorable)			00087887		
4 CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZE	1.		
ISSUER	see p	revious		IDITURES SED TO A CRED	,, _T \$		
			CARD	BED TO A CIVEL	711		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Iss	uer Paid		
	\$4.40	02/02/2025	02/07/20	25			
	4	02,02,202					
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
			301 W 2i	nd St.			
	Park ATX		3rd Floor				
			Austin, T	X 78701			
8 PURPOSE OF			(b) Description				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Parking				
x Political	Travel Out of District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T	 	Check if Austin,	TX, officeholder living	expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought	<u> </u>	Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Iss	uer Paid		
	\$242.43	02/01/2025	02/07/20)25			
	, -						
PAYEE	(a) Payee name	l	(b) Payee	address;	City,	State,	Zip Code
			410 Terr	y Ave. N			
	Amazon						
			Seattle, \	WA 98109			
PURPOSE OF	(a) Category	-f.Ab.; -	(b) Descri				
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren	· · · · · · · · · · · · · · · · · · ·	Office Su	ıpplies			
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	Candidate/Officeholder	name Off	ice sought		Office held		
expenditure to benefit C/OH		-					
PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Iss	uer Paid		
	\$514.80	02/06/2025	02/07/20	125			
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Dyon Data ⁹ Dogo	arah	P.O. Box	202675			
	Ryan Data & Resea	alch					
			Austin, T				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
<u> </u>	Consulting Expense	of this scriedule)	Data Ser	vices			
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T		Check if Austin,	TX, officeholder living	expense	
			ice 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

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: 11/23 Rpt: 28/41	Alders, Benjamin D	. (The Honorable)				00087887		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	NDIT	UNITEMIZED URES TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$9.40	(b) Date of Charge 02/13/2025	(c) Date(s 03/22/20		edit Card Issuer	Paid		
7	PAYEE	(a) Payee name HEB		(b) Payee 2652 Lak Austin, T	ke A	Austin Blvd	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descri	ptio	n			
	Non-Political		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		
	\$3.40 02/18/2025) Cr)25	edit Card Issuer	Paid		
	PAYEE (a) Payee name (b) Payee address; 301 W 2nd St. 3rd Floor Austin, TX 78701				St.	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descri Parking					
	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 \$25.99	(b) Date of Charge 02/19/2025	(c) Date(s) 03/22/20		edit Card Issuer	Paid		
	PAYEE	(a) Payee name Park ATX		(b) Payee 301 W 2 3rd Floor Austin, T	nd \$ r	St.	City,	State,	Zip Code
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District				(b) Descri Parking	ptio				
\vdash	Non-Political (c)				Ш	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	e sought			Office field		
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: 12/23 Rpt: 29/41	Alders, Benjamin D	. (The Honorable)		00087887							
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$							
6	PAYMENT	(a) Amount Charged \$18.00	(b) Date of Charge 02/20/2025	(c) Date(s) Credit Card Issue 03/22/2025	er Paid							
8	PURPOSE OF	(a) Payee name Park ATX (a) Category		(b) Payee address; 301 W 2nd St. 3rd Floor Austin, TX 78701 (b) Description	City,	State,	Zip Code					
ľ	EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Parking								
	Non-Political		of Texas. Complete Schedule T.		, officeholder living exp	ense						
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
е	expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Char			I () D () () D () ()	D : 1							
	PAYMENI	(a) Amount Charged \$442.01	02/25/2025	(c) Date(s) Credit Card Issue 03/22/2025	er Paid							
	PAYEE	(a) Payee name Michael's		(b) Payee address; 3201 Bee Caves Rd Suite 112 Austin, TX 78746	City,	State,	Zip Code					
	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						
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
	PAYMENT	(a) Amount Charged \$5.41	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issue 03/22/2025	er Paid							
	PAYEE (a) Payee name Park ATX		(b) Payee address; 301 W 2nd St. 3rd Floor Austin, TX 78701	City,	State,	Zip Code						
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District			(b) Description Parking								
	Non-Political	(c) Check if travel outside	<u> </u>	, officeholder living exp	ense							
e	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 (Ethics (Commiss	ion Filers)					
Sch: 13/23 Rpt: 30/41	Alders, Benjamin D	. (The Honorable)		00087887							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$							
6 PAYMENT	(a) Amount Charged \$66.51	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Card Issuel 03/22/2025	r Paid							
7 PAYEE	(a) Payee name ReadyFresh		(b) Payee address; 16420 N Interstate Hwy 3	•	State,	Zip Code					
	() 5 :		Austin, TX 78728								
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Water Delivery								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT (a) Amount Charged (b) Date of Charge \$248.22 03/03/2025			(c) Date(s) Credit Card Issuel 03/22/2025	r Paid							
PAYEE	(a) Payee name Smith County Repu	blican Club	(b) Payee address; PO Box 6381 Tyler, TX 75711	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Event Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$15.94	(b) Date of Charge 03/04/2025	(c) Date(s) Credit Card Issuel 03/22/2025	r Paid							
PAYEE (a) Payee name Uber			(b) Payee address; 1455 Market St. Ste. 400 San Fransisco, CA 94103	•	State,	Zip Code					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District			(b) Description Travel								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							

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	Commiss	sion Filers)		
	Sch: 14/23 Rpt: 31/41	Alders, Benjamin D	. (The Honorable)		00087887				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$332.16	03/07/2025	03/22/2025					
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
		Caroline		621 Congress Ave. Suite 101 Austin, TX 78701					
8	PURPOSE OF	(a) Category		(b) Description					
	X Political	(See Categories listed at the top Food/Beverage Expe		Staff Lunch					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	nse			
9	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
ex	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid					
		\$35.73	03/11/2025	03/22/2025					
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
		Park ATX		301 W 2nd St. 3rd Floor					
		() 0 :		Austin, TX 78701					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Parking					
	X Political	Travel Out of District		- carraing					
	Non-Political	', \	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living exper	nse			
	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
ex	penditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$106.77	(b) Date of Charge 03/12/2025	(c) Date(s) Credit Card Issue 03/22/2025	r Paid				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				117 W 4th St					
		Capital Grille							
				Austin, TX 78701					
	PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description					
	EXPENDITURE	Food/Beverage Expe		Legislator Dinner					
	X Political								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					officeholder living exper	nse			
				e sought	Office held				
ex	penditure 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

Printing Expense
Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* · · · · · · · · · · · · · · · · · · ·	,	,
1	Total pages Schedule F4:	al pages Schedule F4: 2 FILER NAME n: 15/23 Rpt: 32/41 Alders, Benjamin D. (The Honorable)						sion Filers)
	Sch: 15/23 Rpt: 32/41	Alders, Benjamin D	. (The Honorable)			00087887		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$4.98	(b) Date of Charge 03/12/2025	(c) Date(s 03/22/20) Credit Card Issue 125	r Paid		
7	PAYEE	(a) Payee name Uber			rket St. nsisco, CA 94103	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descri	otion			
	Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
\$50.27 03/19/2025 03/22/2025) Credit Card Issue 125	r Paid			
	PAYEE	PAYEE (a) Payee name (b) Payee address; 3201 Bee Caves Rd Suite 112 Austin, TX 78746			e Caves Rd 2	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
_ د	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$5.47	(b) Date of Charge 03/18/2025	(c) Date(s 03/22/20) Credit Card Issue 125	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee 1455 Ma Ste. 400 San Fran	•	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District		(b) Descri Travel	_			
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name Office				Check if Austin, TX,	officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	•				Office held		
_							<u>-</u>	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica			-	THER (enter a category	not listed ab	oove)				
4 7		ruction Guide explains how	to complete this form.	la en la (entre	0	· =1				
1 Total pages Schedule F4:		(The 11 control 10)	3 Filer ID (Ethics	Commiss	sion Filers)					
Sch: 16/23 Rpt: 33/41	Alders, Benjamin D		1	00087887						
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	l _e						
ISSUER	see pr	revious	CHARGED TO A CREDIT	. \$						
			CARD							
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$17.42	03/24/2025	05/03/2025							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
			3201 Bee Caves Rd							
	Michael's		Suite 112							
			Austin, TX 78746							
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top		Office Supplies							
X Political	Office Overhead/Rent	al Expense								
Non-Political	(c) Check if travel outside	Chook if Austin TV	, officeholder living exper							
	e sought	Office held	ise							
9 Complete ONLY if direct Candidate/Officeholder name Of expenditure to benefit C/OH			c 30ugni	Office field						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
PATMENT		, ,	05/03/2025	i Faiu						
	\$64.50	03/28/2025								
DAVEE										
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	ReadyFresh		16420 N Interstate Hwy 3	5						
	(-) O-t		Austin, TX 78728							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
	Office Overhead/Rent		Water Delivery							
X Political										
Non-Political	· ·	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exper	ise					
Complete <u>ONLY</u> 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						
	\$37.88	03/31/2025	05/03/2025							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
			410 Terry Ave. N							
	Amazon									
			Seattle, WA 98109							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top		Office Supplies							
X Political Office Overhead/Rental Expense										
Non-Political	(c) Check if travel outside	Check if Austin. TX	, officeholder living exper	ıse						
Complete ONLY if direct	e sought	Office held	-							
expenditure to benefit C/OH	Ŭ									
	<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 Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)				
	Sch: 17/23 Rpt: 34/41	Alders, Benjamin D	. (The Honorable)			00087887						
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$						
6	PAYMENT	(a) Amount Charged \$8.27	(b) Date of Charge 03/31/2025	(c) Date(s) (05/03/202	Credit Card Issuer 5	Paid						
7	PAYEE	(a) Payee name Amazon		(b) Payee at	Ave. N	City,	State,	Zip Code				
Ļ		(-) O-t		Seattle, W								
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Office Sup								
	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 PAYMENT (a) Amount Charged (b) Date of Charge			e sought		Office held						
	\$52.06 04/02/2025			(c) Date(s) (05/03/202	Credit Card Issuer 5	Paid						
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code				
		Amazon		410 Terry								
L		() 5 :		Seattle, W								
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Office Sup								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin TX	officeholder living exp	ense					
H	Complete ONLY if direct	Candidate/Officeholder	·	e sought		Office held						
6	expenditure to benefit C/OH			· ·								
	PAYMENT	(a) Amount Charged \$4.40	(b) Date of Charge 04/03/2025	(c) Date(s) (05/03/202	Credit Card Issuer 5	Paid						
	PAYEE (a) Payee name (b) Payee address; 301 W 2nd St. 3rd Floor Austin, TX 78701		d St.	City,	State,	Zip Code						
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District		of this schedule)	(b) Descripti Parking	ion							
1	Non-Political (c) Check if travel outside of Texas. Complete Schedule		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense					
e	Complete ONLY if direct conditure to benefit C/OH Complete ONLY if direct conditure 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

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 (E	thics Commiss	sion Filers)
	Sch: 18/23 Rpt: 35/41	Alders, Benjamin D	. (The Honorable)			00087887		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZI IDITURES GED TO A CRE	\$		
6	PAYMENT	(a) Amount Charged \$7.77	(b) Date of Charge 04/08/2025	(c) Date(s 05/03/20) Credit Card Is:)25	suer Paid		
7	PAYEE	(a) Payee name ReadyFresh		(b) Payee 16420 N Austin, T	Interstate Hw	City, y 35	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Water D	ption			
	Non-Political		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 (b) Date of Charge \$80.06 04/22/2025			(c) Date(s 05/03/20) Credit Card Is:)25	suer Paid		
	PAYEE (a) Payee name Amazon			(b) Payee 410 Terr		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ption			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin	, TX, officeholder living	expense	
_ و	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$5.15	(b) Date of Charge 04/23/2025	(c) Date(s 05/03/20) Credit Card Iss 025	suer Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee 410 Terr Seattle,		City,	State,	Zip Code
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			tal Expense	(b) Descri Office Su	upplies			
\vdash	Non-Political (c) Check if travel outside of Texas. Complete Schedule T Complete ONLY if direct Candidate/Officeholder name Off				Check if Austin	, TX, officeholder living e	expense	
е	expenditure to benefit C/OH	Complete ONLY if direct cenditure to benefit C/OH Candidate/Officeholder name				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	Total pages Schedule F4:						cs Commis	sion Filers)
	Sch: 19/23 Rpt: 36/41	Alders, Benjamin D	. (The Honorable)			00087887		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$122.03	(b) Date of Charge 04/23/2025	(c) Date(s) 05/03/20) Credit Card Issuer 125	Paid		
7	PAYEE	(a) Payee name Tumble 22		(b) Payee 2304 Lak Austin, T	ke Austin Blvd	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	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	\$60.47 04/23/2025 05/03/202) Credit Card Issuer 125	Paid			
	PAYEE	(a) Payee name ReadyFresh			Interstate Hwy 35	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Austin, T (b) Descrip Water De	ption			
	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 \$62.04	(b) Date of Charge 04/28/2025	(c) Date(s) 05/03/20) Credit Card Issuer 125	Paid		
	PAYEE	(a) Payee name ReadyFresh		(b) Payee 16420 N Austin, T	Interstate Hwy 35	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descrip Water De				
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct Candidate/Officeholder name xpenditure 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.	(g)		,	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 20/23 Rpt: 37/41	Alders, Benjamin D	. (The Honorable)	00087887				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$29.81	(b) Date of Charge 05/14/2025	(c) Date(s) Credit Card Issue 06/03/2025	r Paid			
7 PAYEE	(a) Payee name HEB		(b) Payee address; 2652 Lake Austin Blvd Austin, TX 78703	City,	State,	Zip Code	
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense						
Non-Political	(c) Check if travel outside	Check if Austin, TX,	officeholder living expens	se			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$61.12	(b) Date of Charge 05/14/2025	(c) Date(s) Credit Card Issue 06/03/2025	r Paid			
PAYEE	(a) Payee name	I.	(b) Payee address;	City,	State,	Zip Code	
	Walmart		710 E Ben White Blvd				
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 Ai			officeholder living expens	se		
Complete ONLY if direct	(c) Constant auto-sacras stronger company of			Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$244.99	(b) Date of Charge 05/22/2025	(c) Date(s) Credit Card Issue 06/03/2025	r Paid			
PAYEE	(a) Payee name Matt's El Rancho		(b) Payee address; 2613 S Lamar Blvd Austin, TX 78704	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Campaign Dinner				
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

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 (Eth	3 Filer ID (Ethics Commission Filers)				
	Sch: 21/23 Rpt: 38/41	Alders, Benjamin D. (The Honorable)				00087887				
4	CREDIT CARD ISSUER	coo provious			OF UNITEMIZED IDITURES GED TO A CREDI	\$				
6	PAYMENT	(a) Amount Charged \$164.72	(b) Date of Charge 05/27/2025	(c) Date(s) 06/03/20) Credit Card Issu 25	er Paid				
7	PAYEE	(a) Payee name HEB		(b) Payee 2652 Lak Austin, T	ke Austin Blvd	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	(b) Description Office Su	otion						
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living ex	pense			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$6.48	(b) Date of Charge 05/27/2025	(c) Date(s) 06/03/20) Credit Card Issu 25	er Paid				
	PAYEE	(a) Payee name Fedex		(b) Payee 327 Cond Suite 100 Austin, T	gress Ave.)	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Descrip	otion					
	Non-Political	(C) Check if travel outside		Check if Austin, T	X, officeholder living ex	pense				
e	Complete ONLY if direct expenditure to benefit C/OH					Office held				
	PAYMENT	(a) Amount Charged \$16.23	(b) Date of Charge 05/27/2025	(c) Date(s) 06/03/20) Credit Card Issu 25	er Paid				
	PAYEE	(a) Payee name Fedex		(b) Payee address; City, State, Zip C 327 Congress Ave. Suite 100 Austin, TX 78701				Zip Code		
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Su	ipplies					
\vdash	Ш	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
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 Insti	ruction Guide explains how	to complete thi	is form.	(,	,
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 22/23 Rpt: 39/41	Alders, Benjamin D			00087887			
4 CREDIT CARD ISSUER		ncial institution revious	tion 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$		
6 PAYMENT	(a) Amount Charged \$296.23	(b) Date of Charge 05/28/2025	(c) Date(s) Credit Card Issuer Paid 06/03/2025				
7 PAYEE	(a) Payee name Quik Print		(b) Payee at	ess Ave.	City,	State,	Zip Code
a BURDOS 05	(a) Cataman		Austin, TX				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	(b) Description 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 Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$75.78	(b) Date of Charge 05/28/2025	(c) Date(s) C 06/03/2025	Credit Card Issuer 5	[*] Paid		
PAYEE	(a) Payee name Top Golf		(b) Payee ac 2700 Espe Austin, TX	ranza Crossing	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Descripti		<i>'</i>		
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if A			Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought				Office held		
PAYMENT	(a) Amount Charged \$1,948.50	(b) Date of Charge 06/02/2025	(c) Date(s) C 06/03/2025	Paid			
PAYEE	(a) Payee name Capitol Giftshop		(b) Payee ac 1400 Cong Suite E1.00 Austin, TX	jress Ave. 06	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) Description Gifts	on			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica			alaries/Wages/Co		THER (enter a category	/ not listed ab	oove)	
	The Instr	ruction Guide explains hov	v to complete	this form.				
Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)				
Sch: 23/23 Rpt: 40/41	Alders, Benjamin D. (The Honorable)				00087887			
4 CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZED				
ISSUER	see pi	revious		EXPENDITURES CHARGED TO A CREDIT				
	·		CARD	SED TO A CICEDIT				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid			
	\$250.00 06/10/2025		06/10/20)25				
	Ψ200.00	00/10/2020						
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
	(a) r ayee mane			oadway Ave.	- 9,	,		
	Tyler Area Chambe	er of	Ste. 100	caarray / tro.				
			Tyler, TX 75702					
8 PURPOSE OF	(a) Category	(b) Descrip						
EXPENDITURE	(See Categories listed at the top	of this schedule)		ship Dues				
X Political	Fees							
Non-Political	(a) Chook if traval autoida	of Toyon Complete Schodule T		Chook if Auctin TV	officeholder living expe	2000		
9 Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought	Crieck ii Austin, 1X,	Office held	nse		
expenditure to benefit C/OH	Candidate/Officeriolder	manic Onic	c sought		Office field			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid			
''			01/14/20		- Cuc			
	\$407.51	01/01/2025						
PAYEE	(a) Payee name		(b) Payee	addross:	City,	State,	Zip Code	
I TAILE	Amazon				City,	State,	Zip Code	
			410 Terry Ave. N					
			Seattle, WA 98109					
PURPOSE OF	(a) Category		(b) Descri					
EXPENDITURE	(See Categories listed at the top		Office Su					
X Political	Office Overhead/Rent	tal Expense	отпос обрржов					
Non-Political	(2) D a 1 7 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·			<i>***</i>			
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought	Check if Austin, 1X,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name One	e sought		Office field			
experiulture to beliefit C/OTT								
l								

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: 1/1 Rpt: 41/41 2 FILER NAME Filer ID (Ethics Commission Filers) Alders, Benjamin D. (The Honorable) 00087887 8 Amount (\$) Date 5 Name of person from whom amount is received 01/17/2025 Hickland, Hillary \$800.00 6 Address of person from whom amount is received; City; State; Zip Code Belton, TX 76513 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for event Amount (\$) Name of person from whom amount is received Date 02/03/2025 Joanne, Shofner \$640.00 Address of person from whom amount is received; City; State; Zip Code Nacogdoches, TX 79565 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for Event