# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to complete this fo	rm. 1 Filer ID (Ethics Commission F 00082156		2 Total pages filed: 79		
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY		
OFFICEHOLDER NAME	The Honorable Cody J.			Date Received		
''''				ELECTRONICALLY FILED		
	NICKNAME LAST		SUFFIX	07/15/2025		
	Harris					
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #;	CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked		
OFFICEHOLDER MAILING	1007 N. Mallard St.					
ADDRESS				Receipt # Amount		
Change of Address	Palestine, TX 75801					
	Talestine, 17, 75001			Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST		MI			
NAME	Ms. Patricia					
	NICKNAME LAST		SUFFIX			
	"Pat" Redding					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEA	ASE); APT / SU	JITE#; CITY;	STATE; ZIP CODE		
TREASURER ADDRESS	312 Glenwood Dr.					
ADDRESS						
(Residence or Business)	Palestine, TX 75801					
	Talestine, 17, 75001					
7 CAMPAIGN	AREA CODE PHONE NUMBE	R EXTENSION				
TREASURER PHONE	(214) 535-6615					
PHONE						
8 REPORT						
TYPE	January 15 30th day	before election Runo	ff	15th day after campaign treasurer		
				appointment (officeholder only)		
	X July 15 Sth day	before election Excer repor	eded modified ting limit	Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year	TUDOLICU	Month Day	Year -		
	01/01/2025	THROUGH	06/30/2025	)		
10 ELECTION	ELECTION DATE		ECTION TYPE	□ otto		
	Month Day Year	Primary	Runoff	Other		
	03/03/2026	General	Special			
		_	_			
11 OFFICE	OFFICE HELD (if any)	12	OFFICE SOUGHT (	(if known)		
	State Representative District 8		State Representa	tive District 8		
	1					
		00 TO DAGE 0				
		GO TO PAGE 2				

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 79

13 C / OH NAME	Harris, Cody J. (The	Honorable)	<b>14</b> Filer ID (1 00082156	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a deficeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 21,550.00
EXPENDITURE TOTALS		<b>\$</b> 2,216.50		
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 171,927.77
CONTRIBUTION BALANCE	REPORTING PE			<b>\$</b> 229,855.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Hen	orable Cody J. Harris	
			Candidate or Officeholo	
		Signature of	S. S	
AFFIX NO	TARY STAMP / SEAL AB	DVE		
		aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

### **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

				3 of 79
18 FILER NA Harris, C	ME ody J. (The Honorable)	<b>19</b> Filer ID 00082156	(Ethics	Commission Filers)
20 SCHEDUL NAME OF	S	UBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	21,050.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	171,927.77
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
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	\$	1,225.94

	MONET	ARY POLITICAL (	SCHEDULE A1				
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/79	
2	FILER NAME Harris, Cody	J. (The Honorable)			3	Filer ID (Ethics Commission Fi 00082156	lers)
4	Date 06/27/2025	<ul><li>5 Full name of contributor Energy Transfer Partners</li><li>6 Contributor address; City; St</li></ul>			7	Amount of Contribution (\$) \$2,	000.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions	S) S	Employer (See Instructions	s)		
	Date 06/30/2025	Full name of contributor Springer, Lydia Contributor address; City; St		)		Amount of Contribution (\$)	\$50.00
	Principal occu	Muenster, TX 76252 pation / Job title (See Instructions	s)	Employer (See Instructions	 s)		
	Development Ft Worth Diocese			,			
	Date 06/27/2025	Full name of contributor TREPAC/Texas Realtors Contributor address; City; Si			•	Amount of Contribution (\$) \$10,	000.00
		Austin, TX 78768					
	Principal occu	oation / Job title (See Instructions	(i)	Employer (See Instructions	s)		
	Date 06/27/2025	Full name of contributor Texans for Lawsuit Reform Contributor address; City; St Austin, TX 78701		)	•	Amount of Contribution (\$) \$5,	000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 06/27/2025	Full name of contributor  Valero Energy Corporatio  Contributor address; City; St  San Antonio, TX 78269		)		Amount of Contribution (\$) \$1,	500.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
			-				

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/79		
2	FILER NAME Harris, Cody	y J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00082156
4	Date 06/27/2025	5 Full name of contributor  out-of-state PAC (ID#: Weekley, Richard (Mr.)  6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$) \$2,500.00		
8	Principal occu	Houston, TX 77027  upation / Job title (See Instructions)	9	Employer (See Instructions Weekley Development		mpany

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/79 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Harris, Cody J. (The Honorable) 00082156 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/25/2025 Associated Republicans of Texas Campaign Fund \$500.00 Campaign Digital 7 Contributor address; City; State; Zip Code Advertising Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

#### SCHEDULE F1

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

**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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/72 Rpt: 7/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/14/2025	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.69	PO Box 536216
		Atlanta, GA 30353
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign cell phone service
		Campaign comprione convice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/14/2025	AT&T
H	Amount (\$)	Payee address; City; State; Zip Code
	\$106.69	PO Box 536216
		Atlanta, GA 30353
	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
		Campaign cell phone service
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/14/2025	AT&T
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$106.74	PO Box 536216
		Atlanta, GA 30353
	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  Campaign cell phone service
		Campaign cell priorie service
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
l		

#### SCHEDULE F1

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

Gift/Awards/Memorials Expense

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/72 Rpt: 8/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/13/2025	AT&T
6	Amount (\$) \$320.22	7 Payee address; City; State; Zip Code PO Box 536216  Atlanta, GA 30353
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense  Campaign cell phone service
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/10/2025	Adobe
	Amount (\$) \$64.94	Payee address; City; State; Zip Code 151 S Almaden Blvd
		San Jose, CA 95113
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign software subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/27/2025	Adobe
	Amount (\$) \$64.94	Payee address; City; State; Zip Code 151 S Almaden Blvd
		San Jose, CA 95113
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign software subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/72 Rpt: 9/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/10/2025	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.94	151 S Almaden Blvd
		San Jose, CA 95113
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign software subscription
		Campaign sollware subscription
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	02/25/2025	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.94	151 S Almaden Blvd
		San Jose, CA 95113
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Campaign software subscription
		Campaign solware subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davies same
	03/10/2025	Payee name  Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.94	151 S Almaden Blvd
		San Jose, CA 95113
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
_		

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/72 Rpt: 10/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/04/2025	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.94	151 S Almaden Blvd
		San Jose, CA 95113
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign software subscription
		Campaign contrate casconpact
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
Г	Date	Payee name
	02/12/2025	Alonti Catering Kitchen
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$406.54	12001 Burnet Rd Ste C
		Austin, TX 78758
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Event Expense
		Live Expense
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	03/19/2025	Alonti Catering Kitchen
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$587.04	12001 Burnet Rd Ste C
		Austin, TX 78758
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Event Expense
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
ı		

#### SCHEDULE F1

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

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
L		
1	Total pages Schedule F1: Sch: 5/72 Rpt: 11/79	2 FILER NAME Harris, Cody J. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00082156
4	Date	5 Payee name
	04/09/2025	Alonti Catering Kitchen
6	Amount (\$) \$595.66	7 Payee address; City; State; Zip Code 12001 Burnet Rd Ste C
		Austin, TX 78758
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Event Expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/14/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.19	440 Terry Ave N
	,	
		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign supplies
_	Complete ONII V if direct	Condidate/Officeholder name Office pought
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/01/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.32	440 Terry Ave N
		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Campaign supplies
_	Operation Children	Out that 10th a half are seen as 10th and 10th a
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Superiord to belief 0/01	•

### SCHEDULE F1

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

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/72 Rpt: 12/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	05/01/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$708.64	440 Terry Ave N
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense Gift for Natural Resources Committee
		Gilt for Natural Resources Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/19/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.55	440 Terry Ave N
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
		Composing supplies
		Campaign supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/23/2025	American Silversmiths
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,010.31	4210 Spicewood Springs
		Austin, TX 78759
	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 Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Gift for constituents
		Sin ioi soniditatino
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment			nmittee	Legal Se		·		Wages	s/Contract Labor		Travel Out o OTHER (ent		rict category not listed above)
	·	_			struction G	uide explain	ns how to co	omple	ete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME	Ē						3	Filer ID		(Ethics Commission Filers)
	Sch: 7/72 Rpt: 13/79		Harris, Cod	y J. (٦	Γhe Hono	rable)					0008215	6	
4	Date	5	Payee name										
	05/13/2025		Anderson C	county	Youth Liv	estock As	ssociation						
6	Amount (\$)	7	Payee addres	SS;	City;	Sta	te; Zip Co	ode					
	\$4,500.00		750 US 287	,									
			Palestine, T	X 758	03								
8	PURPOSE	(a)	Category (Se	ee Catego	ories listed at	he top of this s	schedule)	(b)	Description				
	OF EXPENDITURE		Contribution	ns/Dor	nations Ma	ade By			Check if travel	outs	ide of Texas. (	Comp	lete Schedule T.
	LAI LINDITORL		Candidate/0	Officeh	older/Pol	itical Com	mittee		Check if Austin	n, TX	, officeholder li	iving	expense
									Donation				
9	Complete ONLY if direct		Candidate/Offi	cehold	er name	_	Office sou	ught			Office	e he	ld
L	expenditure to benefit C/OI	п											
	Date		Payee name										
	02/25/2025		Atchley & A	ssocia	ates LLP								
	Amount (\$)		Payee addre	ss;	City;	Sta	te; Zip Co	ode					
	\$2,802.68		1005 La Po	sada [	Or								
			Austin, TX 7	78752									
	PURPOSE	(a)	Category (Se	ee Catego	ories listed at	he top of this s	schedule)	(b)	Description				
	OF EXPENDITURE		Accounting/						<b>=</b>				lete Schedule T.
									Check if Austin				
									campaign ac	CCO	unting and	u re	porting services
								1					
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	cehold	er name		Office sou	ught			Office	e hel	ld
L	Data	<u> </u>											
	Date		Payee name										
	02/03/2025		Bags & Cov	vhides	; 								
	Amount (\$)		Payee addres	ss;	City;	Sta	te; Zip Co	ode					
	\$243.56		401 N Trade	e Days	s Blvd								
			Canton, TX	75103	3					_			
	PURPOSE	(a)	Category (Se	ee Catego	ories listed at	he top of this s	schedule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/F	Rental Ex	pense							lete Schedule T.
									Check if Austin				expense
									Decorating fo	or C	apitol offi	ce	
	Complete ONLY if divert	Ļ	Candidate/Offi	ookala	or name		Office	labt			Office	, ha	Id
	Complete ONLY if direct expenditure to benefit C/OI		Ja⊓uluate/U∏	CEHOIO	ei name		Office sou	ayılı			OIIICE	e nei	iu
_													

### SCHEDULE F1

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

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	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: 8/72 Rpt: 14/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/01/2025	Carlson, Jeff
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1100 Terrier Cove
		Round Rock, TX 78664
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/28/2025	Carlson, Jeff
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	1100 Terrier Cove
	,	
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district
		(328 mi*.70). Not reimbursed by state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
-	Date	Payee name
	02/28/2025	Carlson, Jeff
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1100 Terrier Cove
	φ1,000.00	1100 Terrier Cove
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Oi	1

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Git ee Le	od/Beverage Expense tt/Awards/Memorials Ex gal Services ne Instruction Guid			xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2 FILE	ER NAME						3	Filer ID	(Ethics Commission Filers)	
L	Sch: 9/72 Rpt: 15/79	Har	ris, Cody 3	J. (The Honoral	ble)					00082156		
4	Date	5 Pay	ee name									
	04/01/2025	Car	rlson, Jeff									
6	Amount (\$)	<b>7</b> Pay	ee address;	City;	State;	Zip Co	de					_
	\$1,000.00	110	00 Terrier C	Cove								
		Rou	und Rock,	TX 78664								
8	PURPOSE	(a) Cate	egory (See (	Categories listed at the	ton of this sche	edule)	(b)	Description				_
	OF			es/Contract Lab		oddie)			outsio	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		_					_		officeholder living	g expense	
								Campaign co	ntra	act labor		
9	Complete ONLY if direct expenditure to benefit C/O		lidate/Office	holder name	0	ffice sou	ght			Office he	eld	
	Date	Pay	ee name									_
	05/01/2025	Car	rlson, Jeff									
	Amount (\$)	Pay	ee address;	City;	State;	Zip Co	de					_
	\$1,000.00	110	00 Terrier C	Cove								
		Rou	und Rock,	TX 78664								
	PURPOSE	(a) Cate	egory (See (	Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			es/Contract Lab				ш			plete Schedule T.	
	_/							<b>—</b>		officeholder living	g expense	
								Campaign co	HILLG	act labor		
_	Complete ONLY if direct	Cand	lidate/Office	holder name		office sou	abt			Office he	ald	_
	expenditure to benefit C/O		iiuaie/OIIICE	noluel Hallie	U	mice Sou	yııl			Onice ne	aiu .	
_	Dete	_										_
	Date	1 1	ree name									
	06/01/2025		rlson, Jeff									
	Amount (\$)	1	ee address;	•	State;	Zip Co	de					
	\$1,000.00	110	00 Terrier C	Cove								
		Dei	and Dools	TV 70664								
			und Rock,			1	<b></b> -					
	PURPOSE OF			Categories listed at the		edule)	(b)	Description	nute:	to of Toyon Com	nloto Schodulo T	
	EXPENDITURE	Sala	aries/Wage	es/Contract Lab	or			ш		officeholder living	plete Schedule T. g expense	
								Campaign co			, , , ,	
								. 3				
	Complete ONLY if direct	Cand	lidate/Office	holder name	0	office sou	ght			Office he	eld	_
	expenditure to benefit C/O	Н										

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 10/72 Rpt: 16/79	Harris, Cody J. (The Honorable)	00082156
4	Date	5 Payee name	•
l	06/01/2025	Carlson, Jeff	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$285.35	1100 Terrier Cove	
l			
l		Round Rock, TX 78664	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE		vel outside of Texas. Complete Schedule T.
l	EXPENDITURE	l — — — — — — — — — — — — — — — — — — —	stin, TX, officeholder living expense
l			leage to attend meetings in the district  O). Not reimbursed by state.
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	·	<u> </u>
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┡	· 		
l	Date	Payee name	
ᆫ	06/15/2025	Carlson, Jeff	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$7,000.00	1100 Terrier Cove	
l			
L		Round Rock, TX 78664	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	EXPENDITURE	Salaries/Wages/Contract Eabor	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
l			contract labor
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
Г	Date	Payee name	
	01/08/2025	Catalyst Advisors Group LLC	
Г	Amount (\$)	Payee address; City; State; Zip Code	
l	\$1,368.45	1108 Lavaca St 110-506	
l			
		Austin, TX 78701	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Office Overficad/Nertial Experise	vel outside of Texas. Complete Schedule T.
l		,	stin, TX, officeholder living expense text messaging
		Campaign	tent messaying
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		5555d
-			
ı			

### SCHEDULE F1

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

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/72 Rpt: 17/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/14/2025	Catalyst Advisors Group LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9,970.33	1108 Lavaca St 110-506
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign text messaging
		Campaign text messaging
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Davies same
		Payee name
	01/22/2025	Catalyst Advisors Group LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	1108 Lavaca St 110-506
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign toxt mossaging
		Campaign text messaging
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	01/31/2025	Catalyst Advisors Group LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$244.80	1108 Lavaca St 110-506
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign toxt mossaging
		Campaign text messaging
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

Candidate/Officeholder/Politica Credit Card Payment		Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  ow to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 12/72 Rpt: 18/79	Harris, Cody J. (The Honorable)	00082156
4 Date	5 Payee name	
01/31/2025	Catalyst Advisors Group LLC	
6 Amount (\$)	7 Payee address; City; State;	Zip Code
\$2,537.86	1108 Lavaca St 110-506	
	Austin, TX 78701	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign text messaging
Complete ONLY if direct expenditure to benefit C/Ol		fice sought Office held
Date	Payee name	
02/11/2025	Catalyst Advisors Group LLC	
Amount (\$)	Payee address; City; State;	Zip Code
\$2,166.47	1108 Lavaca St 110-506	
	Austin, TX 78701	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule	
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign text messaging
Complete ONLY if direct		fice sought Office held
expenditure to benefit C/O	H	
Date	Payee name	
02/03/2025	Chandler Area Chamber of Commerce	
Amount (\$)	Payee address; City; State;	Zip Code
\$75.00	PO Box 1500	
	Chandler, TX 75758	
PURPOSE	(a) Category (See Categories listed at the top of this schedule	(b) Description
OF EXPENDITURE	DUES	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Membership dues
Complete ONLY if direct	Candidate/Officeholder name Off	fice sought Office held
expenditure to benefit C/O		Onice neid

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 13/72 Rpt: 19/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/25/2025	Chandler Area Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 1500
		Chandler, TX 75758
8	PURPOSE	1
١	OF	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Event sponsorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/OI	
L		
	Date	Payee name
	02/26/2025	Chandler Area Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 1500
		Chandler, TX 75758
	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder (Political Committee)  Check if Austin, TX, officeholder living expense
		Event sponsorship
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
	Date	Payee name
	02/10/2025	Cherokee County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	955 CR 4120
		Jacksonville, TX 75766
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Political contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 14/72 Rpt: 20/79	Harris, Cody J. (The Honorable)	00082156
4	Date	5 Payee name	<b>'</b>
	02/04/2025	Cherokee County Stock Show & Exposition Inc	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	PO Box 705	
		Jacksonville, TX 75766	
8	PURPOSE		Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
			Event sponsorship
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	Office held
	expenditure to benefit C/Oi	1	
	Date	Payee name	
	04/03/2025	Clayton Spangler Photographic Design	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$549.00	301 12th St.	
		Dunbar, WV 25064	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE		Check if Austin, TX, officeholder living expense
			Promotional photo
	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
	Complete ONLY if direct expenditure to benefit C/OI	•	. Office field
	Date	Payee name	
	01/02/2025	Copper Safe Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$89.00	2003 Crockett Rd	
		Palestine, TX 75801	
	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  Campaign storage
	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
	expenditure to benefit C/OI		

#### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1: Sch: 15/72 Rpt: 21/79	2 FILER NAME Harris, Cody J. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00082156
4	Date	5 Payee name
	02/03/2025	Copper Safe Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$89.00	2003 Crockett Rd
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Campaign storage
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/03/2025	Copper Safe Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.00	2003 Crockett Rd
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	04/08/2025	Copper Safe Storage
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code
	\$69.00	2003 Crockett Rd
	Ψ03.00	2000 Glockett Nu
		Palestine, TX 75801
	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.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign storage
	0 1 0 0 0 0 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>			
1	Total pages Schedule F1:		ers)
	Sch: 16/72 Rpt: 22/79	Harris, Cody J. (The Honorable) 00082156	
4	Date	5 Payee name	
L	05/02/2025	Copper Safe Storage	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$49.00	2003 Crockett Rd	
		Palestine, TX 75801	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign storage	
L			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	п	
	Date	Payee name	
	06/02/2025	Copper Safe Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$49.00	2003 Crockett Rd	
		Palestine, TX 75801	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Campaign storage	
		Campaign storage	
_	Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
L	Dete	Γ_	
	Date	Payee name	
	02/14/2025	Doubletree Suites	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$317.84	303 W 15th	
L		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Constituent ledging to attend session meetings	
		Constituent lodging to attend session meetings	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		_
	Sch: 17/72 Rpt: 23/79	Harris, Cody J. (The Honorable) 00082156	
4	Date	5 Payee name	
	02/05/2025	Embassy Suites Downtown	
6	Amount (\$)	7 Payee address; City; State; Zip Code	Π
	\$429.20	300 S Congress Ave	
		Austin, TX 78704	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Constituent lodging to attend session meetings	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/O		
_	Date	Payee name	=
	01/22/2025	Fixe Southern House	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$1,550.92	500 W 5th St	
	41,000.02		
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Dinner with constituents	
		Billiot Mail conclude the	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
H	Date	Payee name	=
	03/13/2025	Fixe Southern House	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$316.04	500 W 5th St	
	Ψ010.04	300 W Sui St	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Dinner with constituents	
		Diffier with constituents	
	Complete ONL V if direct	Condidate/Officeholder name Office sought Office hold	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	·		_

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/72 Rpt: 24/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/15/2025	French, Amy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	15 Anderson Drive
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract tabol
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/03/2025	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
	Date	Davisa nama
	01/16/2025	Payee name French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$246.40	15 Anderson Drive
	ΨΣ-1010	13 / Wide 136 IT Drive
		Palestine, TX 75801
	PURPOSE	To the second se
	OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district (352 mi*.70). Not reimbursed by state.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	oxperialitate to beliefit 6/01	<u> </u>

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/72 Rpt: 25/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/03/2025	French, Amy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
F	Date	Payee name
	02/12/2025	French, Amy
H	Amount (\$)	Payee address; City; State; Zip Code
	\$246.40	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district
		(352 mi*.70). Not reimbursed by state.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>-</del>
	Date	Payee name
	02/25/2025	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.40	15 Anderson Drive
		Palestine, TX 75801
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	_,, _,,,,,,	Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district (122 mi*.70). Not reimbursed by state.
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	<b>y</b>
$\vdash$		
ı		

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	plete	e this form.		
1	Total pages Schedule F1:			3	Filer ID	(Ethics Commission Filers)
	Sch: 20/72 Rpt: 26/79	Harris, Cody J. (The Honorable)			00082156	
4	Date	5 Payee name				
	03/01/2025	French, Amy				
6	Amount (\$)	7 Payee address; City; State; Zip Code	le			
	\$200.00	15 Anderson Drive				
		Palestine, TX 75801				
8	PURPOSE	<u> </u>	'h)	December 1		
°	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	ъ, г Г	Description  Check if travel outside	e of Texas. Com	plete Schedule T.
	EXPENDITURE	Catalinos/ magos, cominast 2000	Ī	Check if Austin, TX, o		gexpense
			(	Campaign contra	ict labor	
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht		Office he	ald
9	expenditure to benefit C/O		111		Office fie	siu .
=	Date	Payee name				
	03/05/2025	French, Amy				
	Amount (\$)	Payee address; City; State; Zip Code	le			
	\$50.40	15 Anderson Drive				
		Palestine, TX 75801				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description		
	EXPENDITURE	Travel In District	F	Check if travel outside		
				⊐ Political mileage :	to attend m	eetings in the district (72
			n	mi*.70). Not reim	bursed by s	state.
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht		Office he	eld
	expenditure to benefit C/Ol					
	Date	Payee name				
	03/07/2025	French, Amy				
	Amount (\$)	Payee address; City; State; Zip Code	le			
	\$50.40	15 Anderson Drive				
		Palestine, TX 75801				
	PURPOSE		′h) Γ	Description		
	OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District	ν, <sub>-</sub>	Check if travel outside	e of Texas. Com	plete Schedule T.
	EXPENDITURE		Ē	Check if Austin, TX, o		
			r	Political mileage i mi*.70). Not reim	to attend m bursed by s	eetings in the district (72 state.
-	Complete ONLY if direct	Candidate/Officeholder name Office sough		•	Office he	
	expenditure to benefit C/O	•			2.1100 110	<del></del>
1						

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/72 Rpt: 27/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/20/2025	French, Amy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$246.40	15 Anderson Drive
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district
		(352 mi*.70). Not reimbursed by state.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/01/2025	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/01/2025	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$61.60	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district (88
		mi*.70). Not reimbursed by state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/72 Rpt: 28/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	04/10/2025	French, Amy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$246.40	15 Anderson Drive
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district
		(352 mi*.70). Not reimbursed by state.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/01/2025	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
		Gainpaigh contact taso.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/06/2025	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.40	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district
		(122 mi*.70). Not reimbursed by state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
_	Sch: 23/72 Rpt: 29/79	Harris, Cody J. (The Honorable)  00082156
4	Date	5 Payee name
	05/31/2025	French, Amy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.80	15 Anderson Drive
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district
		(114 mi*.70). Not reimbursed by state.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	06/02/2025	French, Amy
_	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
	Ψ200.00	13 Allucison Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Compaign contract labor
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/04/2025	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district (5 mi*.70). Not reimbursed by state.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/72 Rpt: 30/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/27/2025	GoDaddy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$242.79	2155 E GoDaddy Way
		Tempe, AZ 85281
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign website
		Campaign website
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/02/2025	Google Suite
H	Amount (\$)	Payee address; City; State; Zip Code
	\$53.73	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign software subscription
		The part of the pa
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/03/2025	Google Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.47	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign software subscription
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
I		

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 25/72 Rpt: 31/79	Harris, Cody J. (The Honorable)
4	Date	5 Payee name
ľ	03/03/2025	
		Google Suite
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.05	1600 Amphitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign software subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/07/2025	Google Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$92.10	1600 Amphitheatre Parkway
	+0=110	,
		Mountain View, CA 04042
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign software subscription
		Campaign software subscription
<u> </u>	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	06/02/2025	Google Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.04	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 26/72 Rpt: 32/79	Harris, Cody J. (The Honorable)  00082156
4	Date	5 Payee name
	04/29/2025	Great American T-Shirt Co
6	Amount (\$) \$450.32	7 Payee address; City; State; Zip Code 2005 Crockett Rd  Palestine, TX 75801
Ļ		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense  Gifts for Natural Resources Committee members
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2025	Great American T-Shirt Co
	Amount (\$)	Payee address; City; State; Zip Code
	\$346.41	2005 Crockett Rd
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gifts for Natural Resources Committee members
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/10/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$265.18	1700 Palm Valley Blvd
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 27/72 Rpt: 33/79	2 FILER NAME Harris, Cody J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082156
4	Date	5 Payee name
	04/07/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$113.01	1700 Palm Valley Blvd
		Round Rock, TX 78664
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/03/2025	Hampton Inn & Suites
	Amount (\$)	Payee address; City; State; Zip Code
	\$215.05	2700 TX 256 Loop
		'
		Palestine, TX 75801
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent lodging to attend session meetings
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/21/2025	Hampton Inn & Suites
	Amount (\$)	Payee address; City; State; Zip Code
	\$666.01	1701 Lavaca St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent lodging to attend session meetings
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 28/72 Rpt: 34/79	Harris, Cody J. (The Honorable)  00082156
4	Date	5 Payee name
	01/03/2025	Hill Country Springs
6	Amount (\$) \$24.82	7 Payee address; City; State; Zip Code 10019 S I35  Austin, TX 78747
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense  Water for Capitol office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/04/2025	Hill Country Springs
	Amount (\$) \$30.82	Payee address; City; State; Zip Code 10019 S I35
		Austin, TX 78747
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Water for Capitol office
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/04/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.82	10019 S I35
		Austin, TX 78747
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Water for Capitol office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
┡	Total mariae Cabadula F1.		_		
ľ	Total pages Schedule F1: Sch: 29/72 Rpt: 35/79	2 FILER NAME Harris, Cody J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082156			
4	Date	5 Payee name	_		
	05/01/2025	Hill Country Springs			
6	Amount (\$)	7 Payee address; City; State; Zip Code	_		
l	\$171.63	10019 S I35			
l					
		Austin, TX 78747			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_		
	OF	Office Overhead/Rental Expense  Cross of the Control of Texas. Complete Schedule T.  Cross of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Water for Capitol office			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
⊨			_		
l	Date	Payee name			
L	06/03/2025	Hill Country Springs			
l	Amount (\$)	Payee address; City; State; Zip Code			
	\$75.82	10019 S I35			
		Austin, TX 78747			
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_		
	OF EXPENDITURE	Office Overhead/Rental Expense			
	LAFENDITORE	Check if Austin, TX, officeholder living expense			
		Water for Capitol office			
L			_		
l	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
L	·		_		
l	Date	Payee name			
	02/12/2025	Hilton Garden Inn Austin Downtown			
l	Amount (\$)	Payee address; City; State; Zip Code			
	\$396.44	500 N Interstate 35			
l					
		Austin, TX 78701			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_		
l	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.			
	LXI LINDITORL	Check if Austin, TX, officeholder living expense			
		Constituent lodging to attend session meetings			
dash	Complete ONLY if alias -t	Condidate/Officeholder name Office cought			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
dash					

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how	o comp	plete this form.	
1	Total pages Schedule F1:	FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 30/72 Rpt: 36/79	Harris, Cody J. (The Honorable)		00082156	
4	Date	Payee name		·	
	05/01/2025	Hydro Flask			
6	Amount (\$)	Payee address; City; State; Zip	Code		
	\$820.80	525 NW York Dr			
		Bend, OR 97703			
8	PURPOSE	Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.	
				Check if Austin, TX, officeholder living expense Gift for Natural Resources Committee members	
9	Complete ONLY if direct	Candidate/Officeholder name Office	sought	t Office held	
	expenditure to benefit C/OI				
	Date	Payee name			
	01/02/2025	J&B Security			
	Amount (\$)	Payee address; City; State; Zip	Code		
	\$46.50	112 Village St			
		Palestine, TX 75801			
	PURPOSE	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 Security services for district office	
				Security services for district office	
	Complete ONLY if direct	Candidate/Officeholder name Office	sought	t Office held	
	expenditure to benefit C/OI		-		
	Date	Payee name			
	02/03/2025	J&B Security			
	Amount (\$)	Payee address; City; State; Zip	Code		
	\$46.50	112 Village St			
		Palestine, TX 75801			
	PURPOSE	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 Security services for district office	
				Security services for district office	
	Complete ONLY if direct	Candidate/Officeholder name Office	sought	t Office held	
	expenditure to benefit C/OH				

#### SCHEDULE F1

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

Gift/Awards/Memorials Expense

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 31/72 Rpt: 37/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/03/2025	J&B Security
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.50	112 Village St
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Security services for district office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/01/2025	J&B Security
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.50	112 Village St
		Palestine, TX 75801
	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
		Security services for district office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/01/2025	J&B Security
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.50	112 Village St
	,	··································
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Security services for district office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	plete t	this form.		
1	Total pages Schedule F1:			<b>I</b>	Filer ID	(Ethics Commission Filers)
	Sch: 32/72 Rpt: 38/79	Harris, Cody J. (The Honorable)			00082156	
4	Date	5 Payee name				
	06/02/2025	J&B Security				
6	Amount (\$)	7 Payee address; City; State; Zip Code	е			
	\$46.50	112 Village St				
		Palestine, TX 75801				
_	DUDDOCE	<u> </u>	L\ _			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	D) De	escription  Check if travel outside	e of Texas. Com	plete Schedule T.
	EXPENDITURE	Office Overflead/Nefficial Expense	E	Check if Austin, TX, o		
			Se	ecurity services	for district	office
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	nt		Office he	eld
	Date	Payee name				
	06/23/2025	JLAC West LLC				
	Amount (\$)	Payee address; City; State; Zip Code	е			
	\$122.50	3705 Winding Creek Dr				
		Austin, TX 78735				
	PURPOSE OF	, ,	b) De	escription	4.T O	whete Cohendule T
	EXPENDITURE	Office Overhead/Rental Expense	X	Check if travel outsidence Check if Austin, TX, of		
				leaning for apt o		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/O					
	Date	Payee name				
	01/02/2025	JLAC West LLC				
	Amount (\$)	Payee address; City; State; Zip Code	е			
	\$4,150.00	3705 Winding Creek Dr				
		Austin, TX 78735				
	PURPOSE OF	, ,	b) De	escription		
	EXPENDITURE	Office Overhead/Rental Expense	X	Check if travel outsident Check if Austin, TX, of		
				ent for apt durin		, - , -
				-		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/O	1				

### SCHEDULE F1

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 33/72 Rpt: 39/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/03/2025	JLAC West LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,150.00	3705 Winding Creek Dr
		Austin, TX 78735
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  X Check if Austin, TX, officeholder living expense
		Rent for apt during session
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	H .
	Date	Payee name
	03/03/2025	JLAC West LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,150.00	3705 Winding Creek Dr
		Austin, TX 78735
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  X Check if Austin, TX, officeholder living expense
		Rent for apt during session
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/01/2025	JLAC West LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,150.00	3705 Winding Creek Dr
	, ,	
		Austin, TX 78735
	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.
	ZXI ZXIDITORE	X Check if Austin, TX, officeholder living expense
		Rent for apt during session
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	T	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 34/72 Rpt: 40/79	2 FILER NAME Harris, Cody J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082156
4	Date	5 Payee name
•	04/09/2025	JLAC West LLC
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3705 Winding Creek Dr  Austin, TX 78735
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Cleaning for apt during session
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/01/2025	JLAC West LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,150.00	3705 Winding Creek Dr
		Austin, TX 78735
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.    X   Check if Austin, TX, officeholder living expense
		Rent for apt during session
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	JLAC West LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,150.00	3705 Winding Creek Dr
		Austin, TX 78735
	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.
	- <del>-</del>	X Check if Austin, TX, officeholder living expense
		Rent for apt during session
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense 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 con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 35/72 Rpt: 41/79	Harris, Cody J. (The Honorable)		00082156
4	Date	5 Payee name		
	06/20/2025	JLAC West LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$128.30	3705 Winding Creek Dr		
		Austin, TX 78735		
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.
	EXPENDITURE	·		Check if Austin, TX, officeholder living expense
				Cleaning for apt during session
_	0 1: 0.11.7.7.1.			0.5
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	·			
	Date	Payee name		
	06/13/2025	Kerens Athletic Booster Club		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$250.00	200 Bobcat Lane		
		Kerens, TX 75144		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Campaign advertising
				Campaign daventering
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		,	
	Date	Payee name		
	01/13/2025	Mail Chimp		
	Amount (\$)	Payee address; City; State; Zip Coo	de.	
	\$330.46	675 Ponce de Leon Ave NE, Ste 5000		
	φοσοτο	070 1 01100 de 200117 (Ve 142, ote 0000		
		Atlanta, GA 30308		
	DUDDOOF		/I- \	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(a)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overflead/Refital Experise		Check if Austin, TX, officeholder living expense
				Campaign email service
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 36/72 Rpt: 42/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/14/2025	Mail Chimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$330.46	675 Ponce de Leon Ave NE, Ste 5000
		Atlanta, GA 30308
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign email service
		Campaign chair service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ð	expenditure to benefit C/O	
	Data	
	Date	Payee name
	03/14/2025	Mail Chimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$330.46	675 Ponce de Leon Ave NE, Ste 5000
		Atlanta, GA 30308
	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  Campaign email service
		Campaign chair service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/14/2025	Mail Chimp
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$330.46	675 Ponce de Leon Ave NE, Ste 5000
		AN
		Atlanta, GA 30308
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign email service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

### SCHEDULE F1

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

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

	Credit Card Payment		The Instruction Guide explains how to	compl	olete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 37/72 Rpt: 43/79		Harris, Cody J. (The Honorable)		00082156
4	Date	5	Payee name		·
	05/13/2025		Mail Chimp		
6	Amount (\$)	7	Payee address; City; State; Zip (	Code	
	\$330.46		675 Ponce de Leon Ave NE, Ste 5000		
			Atlanta, GA 30308		
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
					Campaign email service
_	Commiste ONII V if direct	<u> </u>	Condidate/Officeleddon none		A Office hold
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office so	ougnt	t Office held
_		_			
	Date		Payee name		
	06/13/2025	╙	Mail Chimp		
	Amount (\$)		Payee address; City; State; Zip 0	Code	
	\$330.46		675 Ponce de Leon Ave NE, Ste 5000		
			Atlanta, GA 30308		
	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  Campaign email service
					Campaign omail convice
	Complete ONLY if direct		Candidate/Officeholder name Office so	<u> </u>	t Office held
	expenditure to benefit C/O			9	
	Date	Т	Payee name		
	04/21/2025		Mammoth Marketing Group		
	Amount (\$)	╁	Payee address; City; State; Zip 0	^ode	
	\$2,159.59		4500 Bissonnet St Ste 370	Joue	
	Ψ2,133.33		4300 Bissonnet St Ste 970		
			Bellaire, TX 77401		
	D. 100.00	<del> </del>		10.	<b>N</b> -
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(a)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense		Check if Austin, TX, officeholder living expense
					Campaign Text Blast
	Complete ONLY if direct		Candidate/Officeholder name Office se	ought	t Office held
	expenditure to benefit C/O	Н			
_					

### SCHEDULE F1

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 co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 38/72 Rpt: 44/79	Harris, Cody J. (The Honorable)		00082156
4	Date	5 Payee name		•
	06/24/2025	Martin, Jude		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$1,500.00	3708 Streamwood Rd		
l				
		Fort Worth, TX 76116		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l				Campaign contract labor
l				
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
L	expenditure to benefit C/OI	1		
Г	Date	Payee name		
	01/07/2025	Martin, Jude		
	Amount (\$)	Payee address; City; State; Zip Co	de	
l	\$200.00	3708 Streamwood Rd		
L		Fort Worth, TX 76116		
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l				Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
L	experialitire to benefit C/Oi	1		
l	Date	Payee name		
	02/06/2025	Martin, Jude		
l	Amount (\$)	Payee address; City; State; Zip Co	de	
l	\$200.00	3708 Streamwood Rd		
l		Fort Morth TV 7C11C		
_		Fort Worth, TX 76116		
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Salaries/Wages/Contract Labor		Check if Austin, TX, officeholder living expense
l				Campaign contract labor
L				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
L				

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 39/72 Rpt: 45/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/06/2025	Martin, Jude
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	3708 Streamwood Rd
		Fort Worth, TX 76116
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
		Sampaign samass
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	04/01/2025	Martin, Jude
H	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	3708 Streamwood Rd
		Fort Worth, TX 76116
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
		- Campaign contract tason
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
┡	· 	
	Date	Payee name
	05/01/2025	Martin, Jude
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	3708 Streamwood Rd
		Fort Worth, TX 76116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign contract labor
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	<b>y</b>
$\vdash$		

#### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
_	Total pages Cab - dul - E4	· · · · · · · · · · · · · · · · · · ·		
1	Total pages Schedule F1:			
	Sch: 40/72 Rpt: 46/79	Harris, Cody J. (The Honorable) 00082156		
4	Date	5 Payee name		
	06/01/2025	Martin, Jude		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$250.00	3708 Streamwood Rd		
	4200.00			
		Faut Worth TV 70110		
		Fort Worth, TX 76116		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense		
		Campaign contract labor		
L				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
	onpenditure to beliefft C/Of			
	Date	Payee name		
	06/30/2025	Meals on Wheels Palestine Inc.		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$250.00	P.O. Box 1365		
	Ψ230.00	1.0. Box 1000		
		Palestine, TX 75802		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
		Candidate/Officeholder/Political Committee		
		Donation		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	experience to benefit C/Of			
	Date	Payee name		
	01/21/2025	Molly's Custom Silver		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$3,987.06	1251 W Green Oaks Blvd Ste 130		
	\$0,001.00			
		Adjustes TV 70010		
		Arlington, TX 76013		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.		
		Cifts for votorops		
		Gifts for veterans		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	experialitate to betterit 6/011			

### SCHEDULE F1

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

Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/72 Rpt: 47/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/15/2025	Moncada, Robert
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	610 W Rogers St
		San Diego, TX 78384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	01/01/2025	Moncada, Robert
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	610 W Rogers St
		San Diego, TX 78384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	02/01/2025	Moncada, Robert
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	610 W Rogers St
		San Diego, TX 78384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 42/72 Rpt: 48/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/28/2025	Moncada, Robert
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	610 W Rogers St
		San Diego, TX 78384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor
		Campaigh contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
$\vdash$	Date	Davies same
		Payee name
	04/01/2025	Moncada, Robert
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	610 W Rogers St
		San Diego, TX 78384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor
		Campaigh contract labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 05/01/2025	Payee name Managda, Dahart
		Moncada, Robert
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	610 W Rogers St
		San Diego, TX 78384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		☐ Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

Event Expense Loain Fees Office |
Fees Office |
Food/Beverage Expense Polling |
Gitt/Awards/Memorials Expense |
Printin |
Legal Sayrices |
Salarie |
Salarie

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 43/72 Rpt: 49/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/01/2025	Moncada, Robert
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 610 W Rogers St
		San Diego, TX 78384
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contract labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/08/2025	Norfleet Strategies LLC
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 504 W 12th St
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign consulting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/03/2025	Norfleet Strategies LLC
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 504 W 12th St
		Austin, TX 78701
_	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign consulting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
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 compl	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 44/72 Rpt: 50/79	Harris, Cody J. (The Honorable)		00082156	
4	Date	5 Payee name	•		
	03/03/2025	Norfleet Strategies LLC			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,500.00	504 W 12th St			
		Austin, TX 78701			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Consulting Expense		side of Texas. Com	
			Campaign cons	X, officeholder living Sultina	expense
			Campaign cond	Januing	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld .
	expenditure to benefit C/O			000	
=	Date	Payee name			
	03/31/2025	Norfleet Strategies LLC			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,500.00	504 W 12th St			
	Ψ1,000.00	00 1 11 12 11 01			
		Austin, TX 78701			
	PURPOSE		Description		
	OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense		side of Texas. Com	plete Schedule T.
	EXPENDITURE	Concenting Expense	ш	X, officeholder living	expense
			Campaign cons	sulting	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought		Office he	eld
	Date	Payee name			
	04/30/2025	Norfleet Strategies LLC			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,500.00	504 W 12th St			
		Austin, TX 78701			
	PURPOSE OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Description		
	EXPENDITURE	Consulting Expense		side of Texas. Com X, officeholder living	
			Campaign cons	-	Схропос
			, 5	Ŭ	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O				

#### SCHEDULE F1

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
L	Cicuit Caru Payillellt	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 45/72 Rpt: 51/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/02/2025	Norfleet Strategies LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	504 W 12th St
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign consulting
		Campaigh consuming
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/Oł	
	Date	Payee name
	01/27/2025	PISD Education Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	1007 E Park Avenue
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Candidate/Officeholder/Political Committee
		Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/Of	
	Date	Payee name
	02/24/2025	Palestine Junior Service League
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 1423
	,	
		Palestine, TX 75802
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAI LADITURE	Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 46/72 Rpt: 52/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	04/09/2025	Papa John's Pizza
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$243.89	41 W Martin Luther King Blvd
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lunch for staff
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	01/13/2025	Perry's Steakhouse & Grille
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$2,330.46	114 W 7th St
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Dinner with constituents
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
⊨	Data	David and a second a second and
	Date	Payee name
L	04/23/2025	Perry's Steakhouse & Grille
l	Amount (\$)	Payee address; City; State; Zip Code
	\$173.97	114 W 7th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Food/Beverage Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Dinner with constituents
L	0 1. 2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		

### 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 t	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 47/72 Rpt: 53/79	Harris, Cody J. (The Honorable)	00082156
4	Date	5 Payee name	
	04/28/2025	Poncho Outdoors	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	\$1,574.09	9200 Waterford Centre Blvd Ste 550	
	7-,01		
		Austin, TX 78758	
Ļ	DUDDOOF		
8	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	escription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense	Check if Austin, TX, officeholder living expense
		Gi	ifts for Natural Resources Committee members
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
Г	Date	Payee name	
	04/30/2025	Poncho Outdoors	
Н	Amount (\$)	Payee address; City; State; Zip Code	
	\$96.29	9200 Waterford Centre Blvd Ste 550	
	,,,,,,		
		Austin, TX 78758	
_	PURPOSE		
	OF	· · · · · · · · · · · · · · · · · · ·	escription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense	Check if Austin, TX, officeholder living expense
		Gi	ifts for Natural Resources Committee members
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	01/03/2025	Purple Sage Strategies	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	3002 Bryker Drive	
		Austin, TX 78703	
-	PURPOSE	· ·	escription
	OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consularing Expense	Check if Austin, TX, officeholder living expense
		Ca	ampaign social media management
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OH		
1			

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	ll Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 48/72 Rpt: 54/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/03/2025	Purple Sage Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	3002 Bryker Drive
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense  Campaign social media management
		Campaign social media management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ĭ	expenditure to benefit C/OI	
	Date	Payee name
	03/01/2025	Purple Sage Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3002 Bryker Drive
	, <del>-</del> ,,	
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	-	Compaign cocial media management
		Campaign social media management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/02/2025	Purple Sage Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3002 Bryker Drive
	Ψ1,000.00	OUGE BLYKEL BLIVE
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Check if Austin, TX, officeholder living expense
		Campaign social media management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 49/72 Rpt: 55/79	Harris, Cody J. (The Honorable)  00082156
4	Date	5 Payee name
	05/02/2025	Purple Sage Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	3002 Bryker Drive
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign social media management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
<u> </u>		
	Date	Payee name
	06/10/2025	Purple Sage Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3002 Bryker Drive
		Austin, TX 78703
_	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign social media management
		, , , , , , , , , , , , , , , , , , ,
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
$\vdash$	Data	
	Date	Payee name
	06/15/2025	Rodriguez, Gabriel
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1501 Kneese Rd
		Fredericksburg, TX 78624
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense 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

	Credit Card Payment	The Instruction Guide explains how to complete th	,
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 50/72 Rpt: 56/79	Harris, Cody J. (The Honorable)	00082156
4	Date	5 Payee name	•
	03/03/2025	Switch Brick-Oven Pizza	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$955.58	1615 S Royall St	
		Palestine, TX 75801	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
	OF EXPENDITURE	1 000/Develoge Expense	Check if travel outside of Texas. Complete Schedule T.
		ı	Check if Austin, TX, officeholder living expense  ner with constituents
			The War constituents
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	06/25/2025	TJ Rusk Rotary Club	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	207 E 6th St	
		Rusk, TX 75785	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
		Eve	ent Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	04/07/2025	Terry Black's Barbecue	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$784.62	1003 Barton Springs Rd	
		· -	
		Austin, TX 78704	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
	OF EXPENDITURE	Food/Beverage Expense $\Box$	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	· · · · · · · · · · · · · · · · · · ·	Check if Austin, TX, officeholder living expense  ner with constituents
			noi with constituents
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	5555iu

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 51/72 Rpt: 57/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/17/2025	Texas Conservative Coalition
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	919 Congress Ave #450
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experience to borione Gro	
	Date	Payee name
	02/06/2025	Texas Department of Criminal Justice
	Amount (\$)	Payee address; City; State; Zip Code
	\$330.16	PO Box 4013
		Huntsville, TX 77342
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Furniture for Capitol office
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
H	Date	Payee name
	06/23/2025	Texas Department of Transportation
L	Amount (\$)	·
	\$5,503.94	Payee address; City; State; Zip Code PO Box 149001
	φ5,505.94	FO BOX 149001
		Austin, TX 78714-9001
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Officeholder travel related to state duties
L	Complete ONLY if direct	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
$\vdash$		
L		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 52/72 Rpt: 58/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/21/2025	Texas House Republican Caucus
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	PO Box 13305
		Austin, TX 78711
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	DUES Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Membership dues
		Wellberollip dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ĭ	expenditure to benefit C/O	
	Date	Payee name
	03/31/2025	Texas Watchdog
	Amount (\$)	Payee address; City; State; Zip Code
	\$25,000.00	720 Bastrop Hwy, Ste 308
	Ψ20,000.00	120 Bashop Timy, etc 600
		Austin, TX 78741
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/04/2025	The Innovation & Technology Caucus of the Texas House
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	815A Brazos St Ste 714
		Austin, TX 78701
	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
		House IT Caucus Membership Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

### SCHEDULE F1

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

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

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

1 Total pages Schedule F1: Sch: 53/72 Rpt: 59/79 Harris, Cody J. (The Honorable)  4 Date
Sch: 53/72 Rpt: 59/79  Harris, Cody J. (The Honorable) 00082156  4 Date 02/28/2025 5 Payee name The Print Depot  6 Amount (\$) 7 Payee address; City; State; Zip Code \$292.28 \$292.28
O2/28/2025 The Print Depot  7 Payee address; City; State; Zip Code \$292.28 112 E Oak St Palestine, TX 75801  8 PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Printing Expense  (a) Category (see Categories listed at the top of this schedule) Printing Expense  (b) Description   Check if austin, TX, officeholder iving expense Campaign printing materials  Office sought Office held  Payee name O2/28/2025 The Print Depot  Amount (\$) Payee address; City; State; Zip Code  112 E Oak St Palestine, TX 75801  PURPOSE OF Purpose OF System Titles  (a) Category (see Categories listed at the top of this schedule) Printing Expense  (b) Description (b) Description (c) Description (d) Description (d) Description (e) Description (f) Description (f) Description (h) Description
## Amount (\$)
\$292.28
Palestine, TX 75801  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if vavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign printing materials  9 Complete QNLY if direct expenditure to benefit C/OH  Date O2/28/2025  Amount (\$) Payee name The Print Depot  Amount (\$) Payee address; City; State; Zip Code  \$190.52  Palestine, TX 75801  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if vavel outside of Texas. Complete Schedule T.  (b) Description Check if vavel outside of Texas. Complete Schedule T.
8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.  (b) Description Check if travel outside of Texas. Complete Schedule T.  (b) Description Check if travel outside of Texas. Complete Schedule T.
8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.  (b) Description Check if travel outside of Texas. Complete Schedule T.  (b) Description Check if travel outside of Texas. Complete Schedule T.
Printing Expense  Printing Exp
Printing Expense    Candidate   Office   Candidate   Office   Candidate   Office
Somplete ONLY if direct expenditure to benefit C/OH  Date Payee name 02/28/2025 The Print Depot  Amount (\$) Payee address; City; State; Zip Code  \$190.52 112 E Oak St  Palestine, TX 75801  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  Campaign printing materials  Office sought Office held  Offi
9 Complete ONLY if direct expenditure to benefit C/OH  Date Payee name 02/28/2025 The Print Depot  Amount (\$) Payee address; City; State; Zip Code \$190.52 112 E Oak St  Purpose OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Printing Expense  Office sought Office held  Office held  Office held  (b) Description Check if travel outside of Texas. Complete Schedule T.
Date 02/28/2025 Payee name The Print Depot  Amount (\$) Payee address; City; State; Zip Code \$190.52  Palestine, TX 75801  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  Payee name The Print Depot  State; Zip Code  (b) Description Check if travel outside of Texas. Complete Schedule T.
Date 02/28/2025 The Print Depot  Amount (\$) Payee address; City; State; Zip Code \$190.52 112 E Oak St  Palestine, TX 75801  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
O2/28/2025 The Print Depot  Amount (\$) Payee address; City; State; Zip Code  \$190.52 112 E Oak St  Palestine, TX 75801  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
Amount (\$)  Payee address; City; State; Zip Code  \$190.52  Palestine, TX 75801  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
\$190.52
Purpose OF Printing Expense  Palestine, TX 75801  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
PURPOSE OF Printing Expense  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
PURPOSE OF Printing Expense  (a) Category (See Categories listed at the top of this schedule) Printing Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE  Printing Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE Printing Expense
Chook if Auctin TV officeholder living evenence
Check if Austin, TX, officeholder living expense  Campaign printing materials
Campaign printing materials
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH
Date Payee name
01/14/2025 The Stephen F Austin Royal Sonesta Hotel
Amount (\$) Payee address; City; State; Zip Code
\$359.24 701 Congress Ave
\$359.24 101 Congress Ave
Austin, TX 78701
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
OF Travel In Dictrict Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE Check if Austin, TX, officeholder living expense
Constituent lodging to attend session meetings
Complete ONLY if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By 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: 54/72 Rpt: 60/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/18/2025	The Stephen F Austin Royal Sonesta Hotel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$424.79	701 Congress Ave
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent lodging to attend session meetings
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/10/2025	The Stephen F Austin Royal Sonesta Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$533.48	701 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constituent lodging to attend session meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/16/2025	Turo Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.17	111 Sutter St, Ste 1200
		San Francisco, CA 94104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Travel for political meetings
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

**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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 55/72 Rpt: 61/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/16/2025	Turo Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$442.87	111 Sutter St, Ste 1200
		San Francisco, CA 94104
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Travel for political meetings
		Travel for political meetings
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/27/2025	USPS
H	Amount (\$)	Payee address; City; State; Zip Code
	\$22.20	1213 N Link St
		Palestine, TX 75803
	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
		Campaign Postage
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/20/2025	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.70	1213 N Link St
		Palestine, TX 75803
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Campaign Postage
		Campaign Fostage
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
ı		

#### SCHEDULE F1

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

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

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

	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: 56/72 Rpt: 62/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	05/01/2025	USPS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$139.21	1213 N Link St
		Palestine, TX 75803
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign Postage
		Campaign 1 ostage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Date	Payee name
	05/07/2025	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.10	1213 N Link St
	410.10	
		Palestine, TX 75803
	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
		Campaign Postage
	Opening the ONLY if allowed	Out tights Off as hald a grown of the same to the same
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2025	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.70	1213 N Link St
		Palestine, TX 75803
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Postage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political 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 comple	te this form.
1	Total pages Schedule F1: Sch: 57/72 Rpt: 63/79	2 FILER NAME Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
4	Date 01/28/2025	5 Payee name Uber	<u>,</u>
6	Amount (\$) \$13.52	7 Payee address; City; State; Zip Code 1455 Market St 4th Fl San Francisco, CA 94103	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 01/30/2025	Payee name Uber	
	Amount (\$) \$12.85	Payee address; City; State; Zip Code 1455 Market St 4th Fl  San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 02/05/2025	Payee name Uber	
	Amount (\$) \$60.22	Payee address; City; State; Zip Code 1455 Market St 4th Fl	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee L	egal Se				Nages	s/Contract Labor		OTHER (e		category not listed above)
	oroun oura'r aymone			The Ins	struction Gu	iide explaii	ns how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID		(Ethics Commission Filers)
	Sch: 58/72 Rpt: 64/79		Harris, Cody	J. (T	The Honor	able)					000821	156	
4	Date	5	Payee name										
	02/11/2025		Uber										
6	Amount (\$)	7	Payee address	s;	City;	Sta	ate; Zip Co	ode					
	\$12.00		1455 Market	St 4t	h Fl								
			San Franciso	co. C	A 94103								
8	PURPOSE	(a)						(b)	Description				
ľ	OF	(س)	Category (See Travel In Dis		ories listed at th	e top of this	schedule)	(5)	:	outsi	ide of Texas	. Com	plete Schedule T.
	EXPENDITURE		naver in Dis	tiict					Check if Austin				
									Travel for pol	litic	al meeti	ngs	
9	Complete ONLY if direct		Candidate/Offic	eholde	er name		Office sou	ıght			Offi	ce he	eld
	expenditure to benefit C/OI	Н											
	Date		Payee name										
	02/11/2025		Uber										
	Amount (\$)	Г	Payee address	s;	City;	Sta	ate; Zip Co	ode					
	\$12.45		1455 Market	St 4t	h Fl								
			San Francisc	co, CA	A 94103								
	PURPOSE	(a)	Category (See	e Catego	ories listed at th	ne top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis				,		Check if travel	outsi	ide of Texas	. Com	plete Schedule T.
	EXPENDITORE								Check if Austin				expense
									Travel for pol	litic	al meeti	ngs	
								<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	eholde	er name		Office sou	ıght			Offi	ce he	eld
	Date		Payee name										
	02/11/2025		Uber										
	Amount (\$)		Payee address	s;	City;	Sta	ate; Zip Co	ode					
	\$32.84		1455 Market	St 4t	h Fl								
			San Francisc	co, CA	A 94103								
	PURPOSE	(a)	Category (See	e Catego	ories listed at th	ne top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis						ш				plete Schedule T.
	LAI LINDITORE								Check if Austin				expense
									Travel for pol	IIIIC	aı meeti	ngs	
	Commission ON 11 V 11 11	L_	2-mali-1-+- /2.00	٠ ا - ما م			Off:	! '			0.00	'	al al
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	enolde	er name		Office sou	ıgnt			Offic	ce he	eiu

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Mad Candidate/Officeholder/Po Credit Card Payment	
4 Tatal variance C 1 1 1 =	
1 Total pages Schedule F Sch: 59/72 Rpt: 65/7	
4 Date	5 Payee name
02/12/2025	Uber
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$13.7	2 1455 Market St 4th Fl
	San Francisco, CA 94103
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Travel for political meetings
9 Complete ONLY if direc	
expenditure to benefit C	OH
Date	Payee name
02/13/2025	Uber
Amount (\$)	Payee address; City; State; Zip Code
\$16.8	7 1455 Market St 4th Fl
	San Francisco, CA 94103
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Travel for political meetings
	Traver for political friedlings
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direc expenditure to benefit C	· · · · · · · · · · · · · · · · · · ·
Data	Davisa nama
Date	Payee name
02/13/2025	Uber
Amount (\$)	Payee address; City; State; Zip Code
\$17.3	6 1455 Market St 4th Fl
	San Francisco, CA 94103
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Travel for political meetings
Complete ONLY if direc	Candidate/Officeholder name Office sought Office held
expenditure to benefit C	

#### SCHEDULE F1

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

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

	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: 60/72 Rpt: 66/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/19/2025	Uber
6	Amount (\$) \$34.02	7 Payee address; City; State; Zip Code 1455 Market St 4th Fl
		San Francisco, CA 94103
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/20/2025	Uber
	Amount (\$) \$17.77	Payee address; City; State; Zip Code  1455 Market St 4th Fl
		San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/20/2025	Uber
	Amount (\$) \$20.71	Payee address; City; State; Zip Code 1455 Market St 4th Fl
		San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 61/72 Rpt: 67/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/27/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$41.37	1455 Market St 4th Fl
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Travel for political meetings
		Traver or political meetings
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	03/05/2025	Uber
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$30.79	1455 Market St 4th Fl
	φ30.79	1435 Market St 4til Fl
L		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel for political meetings
		Traver or political meetings
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	03/06/2025	Uber
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.87	1455 Market St 4th Fl
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel for political meetings
1		Traver for political friedtings
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 62/72 Rpt: 68/79	Harris, Cody J. (The Honorable)		00082156		
4	Date	5 Payee name		·		
	03/06/2025	Uber				
6	Amount (\$) \$16.87	7 Payee address; City; State; Zip Co 1455 Market St 4th FI	ode			
		San Francisco, CA 94103				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held		
	Date	Payee name				
	03/07/2025	Uber				
	Amount (\$) \$20.87	Payee address; City; State; Zip Co 1455 Market St 4th Fl San Francisco, CA 94103	ode			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held		
	Date 03/12/2025	Payee name Uber				
	Amount (\$) \$23.98	Payee address; City; State; Zip Co 1455 Market St 4th Fl San Francisco, CA 94103	ode			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soul	ght	Office held		

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to cor	-	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	_	3 Filer ID (Ethics Commission Filers)
	Sch: 63/72 Rpt: 69/79	Harris, Cody J. (The Honorable)		00082156
4	Date	5 Payee name		•
	03/13/2025	Uber		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$39.91	1455 Market St 4th Fl		
		San Francisco, CA 94103		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Travel for political meetings
_	0 1: 0.11.4.7.1.			0.00
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç	ght	Office held
	Date	Payee name		
	03/18/2025	Uber		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$16.87	1455 Market St 4th Fl		
		San Francisco, CA 94103		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Travel for political meetings
				Travel for political meetings
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		giit	Office Hold
	Date	Davis asses		
	03/19/2025	Payee name Uber		
	Amount (\$)	Payee address; City; State; Zip Coo	ae	
	\$17.77	1455 Market St 4th Fl		
		San Francisco, CA 94103		
	PURPOSE OF	, , ,	(b)	Description
	EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Travel for political meetings
				, 9-
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	•		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense 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 comple	te this form.
1	Total pages Schedule F1: Sch: 64/72 Rpt: 70/79	2 FILER NAME Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
4	Date 03/19/2025	5 Payee name Uber	·
6	Amount (\$) \$25.37	7 Payee address; City; State; Zip Code 1455 Market St 4th Fl San Francisco, CA 94103	
8	PURPOSE OF EXPENDITURE	Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 03/20/2025	Payee name Uber	
	Amount (\$) \$21.86	Payee address; City; State; Zip Code 1455 Market St 4th Fl  San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel for political meetings
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 03/20/2025	Payee name Uber	
	Amount (\$) \$25.37	Payee address; City; State; Zip Code 1455 Market St 4th Fl	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	FILER NAME     Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
_	Sch: 65/72 Rpt: 71/79	, ,	00062130
4	Date 03/20/2025	5 Payee name Uber	
6	Amount (\$) \$25.37	7 Payee address; City; State; Zip Code 1455 Market St 4th Fl	
		San Francisco, CA 94103	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/25/2025	Uber	
	Amount (\$) \$16.87	Payee address; City; State; Zip Code 1455 Market St 4th Fl	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 03/25/2025	Payee name Uber	
	Amount (\$) \$16.87	Payee address; City; State; Zip Code 1455 Market St 4th Fl	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 66/72 Rpt: 72/79	2 FILER NAME Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
4	Date 03/25/2025	5 Payee name Uber	·
6	Amount (\$) \$16.87	<ul><li>7 Payee address; City; State; Zip Code</li><li>1455 Market St 4th Fl</li><li>San Francisco, CA 94103</li></ul>	
8	PURPOSE OF EXPENDITURE	Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 03/26/2025	Payee name Uber	
	Amount (\$) \$18.97	Payee address; City; State; Zip Code 1455 Market St 4th Fl  San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 03/26/2025	Payee name Uber	
	Amount (\$) \$62.97	Payee address; City; State; Zip Code 1455 Market St 4th Fl	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 67/72 Rpt: 73/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/26/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$67.42	1455 Market St 4th Fl
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense  Travel for political meetings
		Traver for political meetings
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
L		
	Date	Payee name
	03/27/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.25	1455 Market St 4th Fl
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel for political meetings
		Traver for political meetings
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name Uber
	03/28/2025	
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.02	1455 Market St 4th Fl
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel for political meetings
		Traver for political frieetings
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 68/72 Rpt: 74/79	Harris, Cody J. (The Honorable)		00082156
4	Date	5 Payee name		·
	03/28/2025	Uber		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$19.78	1455 Market St 4th Fl		
		San Francisco, CA 94103		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Travel for political meetings
				3.
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI			
	Date	Payee name		
	04/01/2025	Uber		
	Amount (\$)	Payee address; City; State; Zip Code	<u>е</u>	
	\$18.08	1455 Market St 4th Fl		
		San Francisco, CA 94103		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE			Check if Austin, TX, officeholder living expense
				Travel for political meetings
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·		Cines note
	Date	Payee name		
	04/07/2025	Uber		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$25.37	1455 Market St 4th Fl	•	
	<b>420.0</b> .	2 100 mands of 1877		
		San Francisco, CA 94103		
	PURPOSE		b)	Description
	OF	Travel In District	-,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Travel for political meetings
	Operation ONE VIII II	Condidate (Office helder and	- 4	Office I I I
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	Ί	Office held

### SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to com	plet	e this form.
1	Total pages Schedule F1: Sch: 69/72 Rpt: 75/79	FILER NAME     Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156	
4	Date 04/07/2025	5 Payee name Uber		
6	Amount (\$) \$34.80	7 Payee address; City; State; Zip Cod 1455 Market St 4th Fl San Francisco, CA 94103	е	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	] ]	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Date 04/10/2025	Payee name Uber		
	Amount (\$) \$17.87	Payee address; City; State; Zip Cod 1455 Market St 4th Fl  San Francisco, CA 94103	е	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	] ]	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Date 04/10/2025	Payee name Uber		
	Amount (\$) \$35.02	Payee address; City; State; Zip Cod 1455 Market St 4th Fl	е	
		San Francisco, CA 94103		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	] ]	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel for political meetings
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 70/72 Rpt: 76/79	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	04/15/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.59	1455 Market St 4th Fl
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Travel for political meetings
		Traver for political meetings
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
<b>—</b>	Date	Payee name
	04/15/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.87	1455 Market St 4th Fl
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel for political meetings
		Traversor political meetings
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	04/24/2025	Payee name Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.33	1455 Market St 4th Fl
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Travel for political meetings
		Traver for political meetings
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services  The Instruction Guid	Salarie	-	s/Contract Labor		OTHER (enter a	category not listed	above)
1 Total pages Sche	dule F1:	2 FILER NAME	1				3	Filer ID	(Ethics Commi	ssion Filers)
Sch: 71/72 Rpt:	77/79	Harris, Cod	y J. (The Honoral	ble)				00082156		
4 Date		<b>5</b> Payee name								
05/08/2025		Uber								
6 Amount (\$)	\$16.87	7 Payee addre 1455 Marke San Francis		State; Zip	Code					
8 PURPOSE		(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
OF EXPENDITURE		Travel In Di	strict				, TX	de of Texas. Com officeholder living al meetings		
9 Complete ONLY in expenditure to be			ceholder name	Office s	ought			Office he	eld	
Date		Payee name								
05/21/2025		Uber								
Amount (\$)	\$16.87	Payee addre 1455 Marke		State; Zip	Code					
		San Francis	sco, CA 94103							
PURPOSE OF EXPENDITURE		(a) Category (s Travel In Di	ee Categories listed at the Strict	top of this schedule)	(b)	<u>—</u>	, TX	de of Texas. Com officeholder living al meetings		
Complete <u>ONLY</u> in expenditure to be			iceholder name	Office s	ought			Office he	eld	
Date		Payee name								
05/21/2025		Uber								
Amount (\$)	\$16.87	Payee addre 1455 Marke	, ,,	State; Zip	Code					
		San Francis	sco, CA 94103							
PURPOSE OF EXPENDITURE		(a) Category (S Travel In Di	ee Categories listed at the Strict	top of this schedule)	(b)		, TX	de of Texas. Com , officeholder living al meetings		
Complete <u>ONLY</u> in expenditure to be			ceholder name	Office s	ought			Office he	eld	

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Harris, Cody J. (The Honorable) 00082156
5 Payee name
VLK Productions
7 Payee address; City; State; Zip Code
1085 NE CR 3020
Kerens, TX 75144
(a) Category (See Categories listed at the top of this schedule) (b) Description
Contributions/Donations Made By  Contributions/Donations Made By  Contributions/Donations Made By
Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
Event Sponsorship
Candidate/Officeholder name Office sought Office held

## 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: 79/79 2 FILER NAME Filer ID (Ethics Commission Filers) Harris, Cody J. (The Honorable) 00082156 8 Amount (\$) Date 5 Name of person from whom amount is received 01/21/2025 Southwest Airlines \$385.98 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75235 Purpose for which amount is received Check if political contribution returned to filer vendor refund Amount (\$) Name of person from whom amount is received Date 01/21/2025 Southwest Airlines \$839.96 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75235 Purpose for which amount is received Check if political contribution returned to filer vendor refund