CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	olete this form.	1 Filer ID (Ethics Commi 00086083		2 Total pages filed:	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE US	E ONLY
OFFICEHOLDER NAME	The Honorable	Carl H.			Date Received	
					ELECTRONICALI	Y FILED
	NICKNAME	LACT		CUETIV	07/15/2025	
	NICKNAME	LAST Tepper		SUFFIX	0171072020	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Da	ite Postmarked
MAILING	PO Box 94534				Receipt #	Amount
ADDRESS					, resoupt in	
Change of Address	Lubbock, TX 79493				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	Jay C.				
	NICKNAME	LAST		SUFFIX		
		House				
6 CAMPAIGN	STREET ADDRESS (NO PO	O BOX PLEASE);	AP	T / SUITE #; CITY;	STATE	; ZIP CODE
TREASURER ADDRESS	4609 86th St.					
(Residence or Business)						
,	Lubbock, TX 79424					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER		INE NUMBER E	EXTENSION			
PHONE	(806) 470-6163					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after campa	aign treasurer
		_			appointment (officeh	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach	C/OH-FR)
a DEDIOD	Marsh Davi Vara			Marris Davi	V	
9 PERIOD COVERED	Month Day Year 01/01/2025	TU	IROUGH	Month Day 06/30/202	Year	
	01/01/2025	117	ikoogn	06/30/202	:5	
10 ELECTION	ELECTION DATE	1		ELECTION TYPE		
10 ELECTION	Month Day Year		rimary	Runoff	Other	
				브		
			eneral	Special		
						
11 OFFICE	OFFICE HELD (if any)	strict O.4. Lubbaals		12 OFFICE SOUGHT	(if known)	
	State Representative Dis	STRICT 84 LUDDOCK				
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Tepper, Carl H. (The	Honorable)	14 Filer ID ((Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. These expenditures may have been made without the candidate's or officeholders are required to report this information only if they receive it						
Additional Pages	COMMITTEE TYPE COMMITTEE NAME						
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
46 CONTRIBUTION	1 TOTAL LINUTENA	ZED DOLUTICAL CONTRIBUTIONS (OTLIED THAN	N DI EDOES LOANS	1			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00			
	(OTHER THAN F	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 7,916.66			
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 48,261.56			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 47,430.31			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP 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 Hone	orable Carl H. Teppe	r			
		Signature of	Candidate or Officehole	der			
AFFIX NO	TARY STAMP / SEAL ABO	OVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
		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 80

				3 of 80			
18 FILER NAME Tepper, Carl H. (The Honorable) 19 Filer ID (Ethics Commission Filers) 00086083							
20 SCHEDULE NAME OF S	SUBTO	OTAL AMOUNT					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	7,750.00			
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	166.66			
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4. X	SCHEDULE E: LOANS		\$	0.00			
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS						
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00			
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00			
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/80	
2	FILER NAME Tepper, Car	H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	Filers)
4					Amount of Contribution (\$)	\$250.00
L		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/25/2025 Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$	5,000.00
	Dringing Lagge	Austin, TX 78701	Franksian (Coo Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Weekley, Richard Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$	2,500.00
	Principal occu	Houston, TX 77055 pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	developer		self			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ection Guide explains how to complete this f	orm	1	Total pages Sche	edule A2:			
The msuu	ction duide explains now to complete this is		Sch: 1/1 Rpt: 5	5/80				
2 FILER NAME			3	Filer ID (Ethics	Commission Filers)			
	1 H. (The Honorable)			00086083				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		0.00			
5 Date	6 Full name of contributor out-of-state PAC (ID#:)			In-kind contribution			
06/25/2025	TREPAC-Texas Realtors Political Action Commi	ttee	'	contribution (\$)	description Advertising for fundraising			
	7 Contributor address; City; State; Zip Code				event in support of			
				¦F	Representative Carl			
			١.	I ^T	Tepper for HD 84			
	Austin, TX 78768-2246				side of Texas. Complete Schedule T.			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JU[OICIAL) (See inst	tructions)			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOF	R JUDICIAL) (S	See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's s	pouse (if any) (FC	OR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
10 ii continuator	is a clinic, law little of parenics, (if any) (if of 3001clAL)							
								
Date	Full name of contributor out-of-state PAC (ID#:)	1	Amount of contribution (\$)	In-kind contribution description			
06/30/2025	Texans for Lawsuit Reform PAC				Campaign fundraiser			
	Contributor address; City; State; Zip Code							
				İ				
	Austin, TX 78701		۱,		oide ef Toure Commission Colorabile T			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	<u> </u>		side of Texas. Complete Schedule T. tructions)			
s.pa. 555	,				,			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOF	R JUDICIAL) (S	Gee instructions)			
	p		(,	,			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's s	pouse (if anv) (FC	OR JUDICIAL)			
	,				,			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
	, , , , , , , , , , , , , , , , , , , ,							

PLEDGED CONTRIBUTIONS	SCHEDULE B
The Instruction Guide explains how to complete this form	1 Total pages Schedule B: Sch: 1/1 Rpt: 6/80
2 FILER NAME Tepper, Carl H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086083
4 TOTAL OF UNITEMIZED PLEDGES	\$ 0.00
5 Date 6 Full name of pledgor out-of-state PAC (ID#:	9 In-kind description pledge (\$) (If applicable)
7 Pledgor Address; City; State; Zip Code	Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (See Instructions) 11 Employer	(See Instructions)

	LOANS						SCH	EDULE E
	The Instruction	on Guide explains how to co	omplete this f	orm.	1		ges Schedule E: 1 Rpt: 7/80	
2	FILER NAME Tepper, Carl H.	(The Honorable)			3	Filer ID 000860	(Ethics Commi	ssion Filers)
4	TOTAL OF UN	IITEMIZED LOANS			_		\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amou	nt (\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			10 Interest Rat	
							11 Maturity Da	te
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See In	structions)			
14	Description of Coll	ateral		15 Check if personal	funds were	deposited	into political acc	
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Gu	aranteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See In	structions)			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	T	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 1/66 Rpt: 8/80	2 FILER NAME Tepper, Carl H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086083
4	Date	5 Payee name
	02/13/2025	The Stephen F. Austin Royal Sonesta Hotel
6	Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 701 Congress Avenue
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/23/2025	Airbnb
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,465.57	888 Brannan St
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Lodging expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lodging for legislative session
		Loaging for logiciality occording
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/18/2025	Airbnb
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$4,170.97	888 Brannan St
	Ψ1,210.01	
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Lodging Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		Lodging expense for legislative session
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	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 Comm

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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	•		/ages	/Contract Labor		OTHER (enter a	a category not listed ab	ove)
				The Instruction G	uide explains h	now to coi	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	ion Filers)
	Sch: 2/66 Rpt: 9/80		Tepper, Car	l H. (The Hono	rable)					00086083		
4	Date	5	Payee name									
	02/20/2025		Airbnb									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$1,429.87		888 Brannaı	n St								
			San Francis	co, CA 94103								
8	PURPOSE	⊢					(h)	Description				
ľ	OF	^(a)		e Categories listed at	the top of this sche	edule)	(D)	Description Check if travel of	nutsii	de of Texas Con	nplete Schedule T.	
	EXPENDITURE		Lodging					=		officeholder livin		
								Lodging expe				
9	Complete ONLY if direct		Candidate/Offic	ceholder name	0	office sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
H	Date		Payee name									
	02/27/2025		Airbnb									
	Amount (\$)	\vdash	Payee addres	ss; City;	State:	Zip Co	de					
	\$874.12	ı	888 Brannai		otato,	21p 00	uc					
	Ψ074.12		000 Diamila	130								
			San Francis	co, CA 94103								
	PURPOSE OF	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Lodging exp	ense				=			nplete Schedule T.	
								Check if Austin, Lodging expe		officeholder livin		
								Loughing expe	.113	o lor legisia	1146 36331011	
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name		office sou	aht			Office h	eld.	
	expenditure to benefit C/O		zandidate/Onic	cholder flame	O	ilice sout	giit			Office II	eiu	
	Date		Payee name									
	03/17/2025		Airbnb									
	Amount (\$)	ı	Payee addres	-	State;	Zip Co	de					
	\$3,763.51		888 Brannai	n St								
			San Francis	co, CA 94103								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Lodging			,					nplete Schedule T.	
	LAFENDITORE							_		officeholder livin		
								Lodging expe	nse	e for legisla	tive session	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	0	office sou	ght			Office h	eld	
	experience to beliefft C/Of											

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Ļ		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 3/66 Rpt: 10/80	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	
	04/16/2025	Airbnb	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4,453.86	888 Brannan St	
		San Francisco, CA 94103	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
			TX, officeholder living expense ense for legislative session
		Loughly expe	rise for legislative session
_	Commiste ONII V if disport	Constitute / Office helder name	Office hold
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	<u> </u>		
	Date	Payee name	
	05/16/2025	Airbnb	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,271.25	888 Brannan St	
		San Francisco, CA 94103	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Loughly expe	ense for legislative session
	0 1: 0 1: 0		000
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/19/2025	Aloft Austin Downtown	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.56	109 E 7th St	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000/Develage Expense	outside of Texas. Complete Schedule T.
			TX, officeholder living expense SCUSS campaign/officeholder issues
		ivieeting to dis	scuss campaign/onicendider issues
	Complete ONL V if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/O		Office field
	· 		
	rme provided by Tayas E	thice Commission www.athice state ty us	Version V/A 1 0 f10d0fd9

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

	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: 4/66 Rpt: 11/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	01/08/2025	Amazon
6	Amount (\$) \$21.24	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office supplies
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/09/2025	Amazon
	Amount (\$) \$42.45	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
	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 Paper tray organizer for capitol office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/23/2025	Amazon
	Amount (\$) \$100.15	Payee address; City; State; Zip Code 410 Terry Ave N
		Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Coffee for office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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: 5/66 Rpt: 12/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	02/24/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$52.05	410 Terry Ave N
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Cinice Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	03/26/2025	Amazon
H	Amount (\$)	Payee address; City; State; Zip Code
	\$30.86	410 Terry Ave N
		Seattle, WA 98109
	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
		Coffee for office
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	03/27/2025	Amazon
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$47.96	410 Terry Ave N
		Seattle, WA 98109
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Coffee for office
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political 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: 6/66 Rpt: 13/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	03/24/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$339.15	410 Terry Ave N
		Seattle, WA 98109
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 Desk converter for capitol office
		Desk converter for capitor office
_	Complete ONU V if alice	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	05/27/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$124.68	410 Terry Ave N
		Seattle, WA 98109
	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
		Frames for staff and committee photos
		Traines for stair and committee protes
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/30/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.78	410 Terry Ave N
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Frames for staff and committee photos
	0 1 0 0 0 0 0 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	•

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Layment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 7/66 Rpt: 14/80	Tepper, Carl H. (The Honorable)		00086083	
4 Date	5 Payee name		•	
06/30/2025	Amazon			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$20.46	410 Terry Ave N			
	Seattle, WA 98109			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Office Overhead/Rental Expense		el outside of Texas. Con	nplete Schedule T.
EXPENDITURE	·	. —	tin, TX, officeholder livin	g expense
		Office suppl	ies	
		<u> </u>		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soil	ught	Office h	eld
'				
Date	Payee name			
05/27/2025	American Airlines			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$236.48	1 Skyview Drive			
	Fort Worth, TX 76155			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Travel Out of District		el outside of Texas. Con tin, TX, officeholder livin	
			to Energy Coun	
			g,	
Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ught	Office h	eld
expenditure to benefit C/OI				
Date	Payee name			
01/13/2025	At Home			
Amount (\$)	Payee address; City; State; Zip C	nde		
\$32.46	4801 183A Toll Rd	ode		
402.10	1001 1007 (1011) (1			
	Cedar Park, TX 78613			
DUDDOCE		(b) December		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if trave	el outside of Texas. Con	nplete Schedule T.
EXPENDITURE	Onice Overneau/Rental Expense		tin, TX, officeholder livin	
		Mirror for ca	pitol office	
_				
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office h	eld
expenditure to benefit C/OI	H			

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 8/66 Rpt: 15/80	2 FILER NAME Tepper, Carl H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086083
4	Date	5 Payee name
	03/21/2025	Austin-Bergstrom International Airport
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.14	3600 Presidential Blvd
		Austin, TX 78719
8	PURPOSE	
١	OF	(a) Category (See Categories listed at the top of this schedule) Food/Reverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign staff meal
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	05/20/2025	Austin-Bergstrom International Airport
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.14	3600 Presidential Blvd
		Austin, TX 78719
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign meal
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/03/2025	Austin-Bergstrom International Airport
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.51	3600 Presidential Blvd
	\$12.51	5000 Presidential bivu
		Austin, TX 78719
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Campaign meal
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experioliture to beliefit C/OI	1
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead Polling Expense Polling Expense Gift/Awards/Memorials Expense Printing Expens	e Travel Out of District /Contract Labor OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 9/66 Rpt: 16/80	Tepper, Carl H. (The Honorable)	00086083			
4	Date	Payee name	<u>'</u>			
	06/08/2025	Austin-Bergstrom International Airport				
6	Amount (\$)	Payee address; City; State; Zip Code				
	\$106.00	3600 Presidential Blvd				
		Austin, TX 78719				
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.			
	EXI ENDITORE		Check if Austin, TX, officeholder living expense Parking fee			
			raining lee			
9	Complete ONLY if direct	andidate/Officeholder name Office sought	Office held			
ľ	expenditure to benefit C/O	and date. Office folder frame	Office field			
_	Date	Payee name				
	06/18/2025	Austin-Bergstrom International Airport				
_	Amount (\$)	Payee address; City; State; Zip Code				
	\$52.00	3600 Presidential Blvd				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
		Austin, TX 78719				
	PURPOSE	Т	Description			
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE		Check if Austin, TX, officeholder living expense			
			Airport parking fee			
	Complete ONLY if direct	andidate/Officeholder name	Office held			
	Complete ONLY if direct expenditure to benefit C/OH	andidate/Officeholder name Office sought	Office field			
	Data					
	Date 01/24/2025	Payee name B.D. Riley's				
		<u> </u>				
	Amount (\$) \$86.79	Payee address; City; State; Zip Code 1905 Aldrich St #130				
	Φ00.79	1905 Aldrich St #130				
		Austin, TX 78723				
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense			
			Meeting to discuss campaign/officeholder issues			
L						
	Complete ONLY if direct	andidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OH					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 10/66 Rpt: 17/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	
	02/25/2025	B.D. Riley's	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$41.14	1905 Aldrich St #130	
		Austin, TX 78723	
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	
		Meeting to discuss campaign/officeholder issues	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	_
H	Date	Payee name	=
	06/17/2025	BJ's Resturant	
┝	Amount (\$)	2007.000	_
	` '		
	\$101.16	4805 South Loop Bldg 100	
		Lubbock, TX 79423	
	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	
		Meeting to discuss campaign/officeholder issues	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/Ol	S	
	Date	Payee name	_
	03/27/2025	Bryan's Custom Framing	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,098.00	1816 Dresden Rd	
		Zanesville, OH 43701	
	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	_
		Office panorama photos for capitol and district office	5
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/Ol		
dash			_

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed above)	
┡	T-4-1 O-1 F1.	la ====================================		c explains now to o	Jp.		_	E:1 ID	(Ethias Commission Fi	l=\
ľ	Total pages Schedule F1:	1		ulo)			3	Filer ID 00086083	(Ethics Commission Fi	ieis)
L	Sch: 11/66 Rpt: 18/80		ırl H. (The Honorab					00000000		
4	Date	5 Payee name								
	01/17/2025	Bush's Chi	cken							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$12.13	1621 S Ke	y Ave							
		Lampasas,	TX 76550							
8	PURPOSE	(a) Category (s	See Categories listed at the t	on of this schodulo)	(b)	Description				
	OF		rage Expense	op of this schedule)	'	:	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		rugo — porres			Check if Austin	, TX,	officeholder living	g expense	
						Meal				
9	Complete ONLY if direct		ficeholder name	Office sou	ught			Office he	eld	
	expenditure to benefit C/OI	H								
Г	Date	Payee name)							
	05/12/2025	CVS Pharr	nacy							
H	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$19.47	500 Congr	ess Ave							
		Austin, TX	78701							
┝	PURPOSE				(h)	Description				
	OF		See Categories listed at the t		(6)	Description Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Office Ove	rhead/Rental Expe	126		_		officeholder living		
						Office supplie	es			
Г	Complete ONLY if direct		ficeholder name	Office sou	ught			Office he	eld	
	expenditure to benefit C/OI	H								
	Date	Payee name	.							
	03/24/2025	Cagle Stea	ıks & BBQ							
H	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$449.68	8732 4th S	-	, ,						
		Lubbock, T	Y 70/16							
	DUDD 005				<i>a</i> ,					
	PURPOSE OF		See Categories listed at the t	op of this schedule)	(a)	Description	nutei	de of Teyes Com	iplete Schedule T.	
	EXPENDITURE	Food/Beve	rage Expense					officeholder living	•	
									n/officeholder issue	es
一	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ught			Office he	eld	
	expenditure to benefit C/OI				-					
\vdash										
	rms provided by Tayas F	thics Commiss	ion was	v ethics state ty	lic.				Version V// 1 0 f1	UYUty

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	Po pense Pri	Iling Exper inting Expe			Travel in Distri Travel Out of D		
	Credit Gard Layment		The Instruction Guid	le explains how	to comp	lete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)	
	Sch: 12/66 Rpt: 19/80	Tepper, Ca	arl H. (The Honorab	ole)				00086083		
4	Date	5 Payee name								_
	03/13/2025	Canva	-							
6	Amount (\$)	7 Payee addre		State; Z	ip Code					
	\$15.00	110 Kippa	< Street							
		Sydney Au	stralia							
8	PURPOSE	(a) Catagony			. /h) Description				_
ľ	OF	Advertising	See Categories listed at the t	top of this schedule	e) (1	:	outs	ide of Texas. Co	mplete Schedule T.	
	EXPENDITURE	Auvertising	LAPETISE					, officeholder livi		
						Social media	gra	aphics sub	scription	
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Offic	e sough	t		Office I	neld	_
	expenditure to benefit C/OI		nocholaci name		o oougii			0111001	1010	
	Date	Payee name	<u> </u>							
	04/14/2025	Canva								
	Amount (\$)	Payee addre	ess; City;	State; Z	in Code	<u> </u>				_
	\$15.00	110 Kippa		Otato, 2	р Оочо					
	Ψ13.00	Ι ΙΙΟ Κίρρα	Collect							
		Sydney Au	stralia							
	PURPOSE	(a) Category (s	See Categories listed at the t	top of this schedule	e) (b) Description				
	OF EXPENDITURE	Advertising				Check if travel	outs	ide of Texas. Co	mplete Schedule T.	
	LAFENDITORE					ш		, officeholder livi		
						Social media	gra	aphics sub	scription	
	Complete ONLY if direct		ficeholder name	Offic	e sough	t		Office I	neld	
	expenditure to benefit C/OI	1								
	Date	Payee name	7							=
	05/13/2025	Canva	•							
			0''							
	Amount (\$)	Payee addre		State; Z	ip Code					
	\$15.00	110 Kippa	< Street							
		Sydney Au	stralia							
	PURPOSE	(a) Category //	See Categories listed at the t	ton of this schodule	e) (b) Description				
	OF	Advertising		top of this scriedule			outs	ide of Texas. Co	mplete Schedule T.	
	EXPENDITURE		,			Check if Austin	n, TX	, officeholder livi	ng expense	
						Social media	gra	aphics sub	scription	
	Complete ONLY if direct	Candidate/Of	ficeholder name	Offic	e sough	t		Office I	neld	
	expenditure to benefit C/O				Č					
	rme provided by Tayas E	thice Commics	ion	w othice state	0 tv 110				Version V// 1 0 f10d0	4-10

SCHEDULE F1

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

Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/66 Rpt: 20/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	06/12/2025	Canva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	110 Kippax Street
		Sydney Australia
8	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Social media graphics subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/27/2025	Capitol Commission Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	104 Casa Verde Cv.
		Georgetown, TX 78633
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Contribution
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit Gree	
	Date	Payee name
	01/14/2025	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.25	1400 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Postage
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Stamps
	Complete Chilly '' ''	Condidate/Officeholder name
	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 Commit

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	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: 14/66 Rpt: 21/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	
	02/05/2025	Capitol Visitors Parking Garage	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$13.00	1201 San Jacinto Blvd	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense	
		Expense Capitol parking fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH -	
	Date	Payee name	
	03/24/2025	Cast	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$99.86	620 19th St	
		Lubbock, TX 79401	
	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 Meeting to discuss campaign/officeholder issu	IES.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH	
	Date	Payee name	
	05/08/2025	Cava	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.03	515 Congress Ave	
		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 Meeting to discuss campaign/officeholder issu	IES
		Weeting to disease earnpaign/officeriolder issu	.00
	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/Wages/Contract Labor

	Credit Card Payment		The Instruction Gui	de explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2 FILEI	R NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 15/66 Rpt: 22/80	Терр	oer, Carl H. (The Honora	ble)		00086083
4	Date	5 Paye	e name			
	05/12/2025	Cava				
6	Amount (\$)	7 Paye	e address; City;	State; Zip Co	ode	
	\$12.72	-	Congress Ave	, ,		
		Aust	in, TX 78701			
8	PURPOSE				(h)	Description
ľ	OF		gory (See Categories listed at the d/Beverage Expense	top of this schedule)	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	. 000	A Dovorago Expones			Check if Austin, TX, officeholder living expense
						Meeting to discuss campaign/officeholder issues
9	Complete ONLY if direct expenditure to benefit C/OI		date/Officeholder name	Office sou	ight	Office held
	experialiture to beliefit C/OI					
	Date	Paye	e name			
	05/27/2025	Cava	a			
	Amount (\$)	Paye	e address; City;	State; Zip Co	ode	
	\$17.37	515	Congress Ave			
		Aust	in, TX 78701			
	PURPOSE	(a) Cate	GORY (See Categories listed at the	top of this schedule)	(b)	Description
	OF EXPENDITURE		d/Beverage Expense			Check if travel outside of Texas. Complete Schedule T.
	LA LIBITOIL					Check if Austin, TX, officeholder living expense
						Meeting to discuss campaign/officeholder issues
\vdash	Complete ONLY if direct	Candio	date/Officeholder name	Office sou	laht Iaht	Office held
	expenditure to benefit C/OI		iale/Onicenoidel Hame	Office SOL	ıyııı	. Onice held
L	Dete					
	Date 02/24/2025	•	e name k-Fil-A			
	Amount (\$)	-	e address; City;	State; Zip Co	ode	
	\$29.90	503	W Martin Luther King Jr	RIVO		
		Aust	in, TX 78701			
	PURPOSE OF		gory (See Categories listed at the	top of this schedule)	(b)	Description
	EXPENDITURE	Food	l/Beverage Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
						Meeting to discuss campaign/officeholder issues
						5
H	Complete ONLY if direct	Candio	date/Officeholder name	Office sou	<u>L</u> ight	Office held
	expenditure to benefit C/OI				-	
H						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this f	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/66 Rpt: 23/80	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	•
l	01/06/2025	Chicken Run	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$71.08	1910 Quaker Ave Ste 100	
l			
l		Lubbock, TX 79407	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	ation
l	OF		ck if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Chec	ck if Austin, TX, officeholder living expense
l		Meetir	ng to discuss campaign/officeholder issues
Ļ			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┕	'		
l	Date	Payee name	
L	03/24/2025	Chicken Run	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$86.86	1910 Quaker Ave Ste 100	
l			
l		Lubbock, TX 79407	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
l	OF EXPENDITURE	I I OOU/DEVELUGE EXPENSE	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
l		l	ng to discuss campaign/officeholder issues
			.g to allocate campaig. we meen one in section
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	04/28/2025	Chicken Run	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
l	\$57.56	1910 Quaker Ave Ste 100	
l			
		Lubbock, TX 79407	
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	ation
l	OF	'	ck if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Chec	ck if Austin, TX, officeholder living expense
		Meetir	ng to discuss campaign/officeholder issues
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	The state of the s		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/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: 17/66 Rpt: 24/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	05/21/2025	Cosmic Saltillo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.17	1300 E 4th St
		Austin, TX 78702
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss campaign/officeholder issues
		Weeting to discuss earnpaign/oniceriolaer issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/17/2025	Current Revolt
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$65.00	111 Sutter St
		San Francisco, TX 94104
	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 News subscription
		News subscription
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	03/05/2025	Dallas Love Field Airport
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$19.69	8008 Herb Kelleher Way
	Ψ10.00	Cook Hold Reliand Way
		Dallas, TX 75235
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Meal
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/66 Rpt: 25/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
L	06/09/2025	Dallas Love Field Airport
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.64	8008 Herb Kelleher Way
		Dallac TV 75225
L	PURPOSE	Dallas, TX 75235
8	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meal in transit to attend the Energy Council Conference
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	Complete ONLY if direct expenditure to benefit C/OI	
⊨	Date	Payee name
	04/29/2025	DoorDash
H	Amount (\$)	Payee address; City; State; Zip Code
	\$26.13	901 Market Street, 6th Floor
		San Francisco, CA 94103
	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
		Campaign staff meal
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialitate to benefit 6/01	'
	Date	Payee name
L	05/23/2025	Door Dash State - Time Onde
	Amount (\$) \$85.00	Payee address; City; State; Zip Code 901 Market Street, 6th Floor
	φοσ.σσ	301 Market Street, 6th 1 1661
		San Francisco, CA 94103
H	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 Meeting to discuss campaign/officeholder issues
		meeting to disouse sampling meeting as included included
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1

SCHEDULE F1

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

	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: 19/66 Rpt: 26/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	05/29/2025	DoorDash
6	Amount (\$) \$66.39	7 Payee address; City; State; Zip Code 901 Market Street, 6th Floor
		San Francisco, CA 94103
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	DoorDash
	Amount (\$) \$24.88	Payee address; City; State; Zip Code 901 Market Street, 6th Floor
		San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	DoorDash
	Amount (\$) \$101.43	Payee address; City; State; Zip Code 901 Market Street, 6th Floor
		San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

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

	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: 20/66 Rpt: 27/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	03/21/2025	Dutch Bros Coffee
6	Amount (\$) \$18.24	7 Payee address; City; State; Zip Code 1224 E New Hope Dr
		Cedar Park, TX 78613
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff meal
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/24/2025	Dutch Bros Coffee
	Amount (\$) \$18.86	Payee address; City; State; Zip Code 1711 Marsha Sharp Fwy W
		Lubbock, TX 79415
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	Gati
	Amount (\$) \$6.84	Payee address; City; State; Zip Code 1512 Holly St
		Austin, TX 78702
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
	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 Com

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: 21/66 Rpt: 28/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	01/14/2025	Grand Donuts
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$37.96	1900 University Blvd Ste 120
		Round Rock, TX 78665
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Breakfast for opening day ceremony
		Broaklast for opening day defending
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
-	Date	Dougo nomo
	04/24/2025	Payee name Crayee Floral
		Grayce Floral
	Amount (\$)	Payee address; City; State; Zip Code
	\$216.50	8004 Quaker Ave
		Lubbock, TX 79424
	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 Flowers for constituent
		1 lowers for constituent
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Data	David and the second se
	Date 04/30/2025	Payee name Grayce Floral
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$108.27	8004 Quaker Ave
		Lubbock, TX 79424
	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 Flowers for constituent
		1 lowers for consultating
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense 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: 22/66 Rpt: 29/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	01/13/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$160.83	250 University Blvd
		Round Rock, TX 78665
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
		Office groceries
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Date	Power name
	01/14/2025	Payee name HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$57.15	250 University Blvd
		Round Rock, TX 78665
	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 Groceries for opening day ceremony
		Grocenes for opening day ceremony
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davies same
	03/19/2025	Payee name HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.39	250 University Blvd
		Round Rock, TX 78665
	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
		Office groceries
		Since growings
\vdash	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 (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/66 Rpt: 30/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	04/15/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.22	250 University Blvd
		Round Rock, TX 78665
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office groceries
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		·
	Date	Payee name
	01/03/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.82	10019 S I-35 Frontage Rd
		Austin, TX 78747
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Water for office
	Complete ONLY if direct	Candidate/Officeholder name Office country Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/04/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.82	10019 S I-35 Frontage Rd
		Austin, TX 78747
	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 Water for office
		water for office
	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 comp	plet	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 24/66 Rpt: 31/80	Tepper, Carl H. (The Honorable)		00086083
4	Date	5 Payee name		•
	03/04/2025	Hill Country Springs		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$19.69	10019 S I-35 Frontage Rd		
		Austin, TX 78747		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	b)	Description
	OF EXPENDITURE	Food/Beverage Expense	Į	Check if travel outside of Texas. Complete Schedule T.
			L	Check if Austin, TX, officeholder living expense Water for office
				value for office
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI			0.1100 1.010
	Date	Payee name		
	04/02/2025	Hill Country Springs		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$66.82	10019 S I-35 Frontage Rd		
	400.02	10010 0 1 00 1 1011kago 1 ka		
		Austin, TX 78747		
	PURPOSE		۵) ،	Donasiaki
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	ו (כ]	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 oou/beverage Expense	į	Check if Austin, TX, officeholder living expense
			١	Water for office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	experience to benefit Gree			
	Date	Payee name		
	05/02/2025	Hill Country Springs		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$42.82	10019 S I-35 Frontage Rd		
		Austin, TX 78747		
	PURPOSE OF	, -	b) [Description
	EXPENDITURE	Food/Beverage Expense	ļ	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			L	Water for office
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	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
Credit Card Payment

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

	Credit Card Payment	The Instruction Guide explains how to com	ıple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 25/66 Rpt: 32/80	Tepper, Carl H. (The Honorable)		00086083
4	Date	5 Payee name		-
	06/03/2025	Hill Country Springs		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	e	
	\$65.81	10019 S I-35 Frontage Rd		
		Austin, TX 78747		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Food/Beverage Expense	•	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Water for office
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	ht	Office held
_			_	
	Date	Payee name		
	01/07/2025	Hobby Lobby		
	Amount (\$)	Payee address; City; State; Zip Cod	е	
	\$30.30	130 Sundance Pkwy #200		
		Round Rock, TX 78681		
	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 Framing for photo
				Framing for photo
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/Ol	•	110	Office field
	Data	D	—	
	Date 01/08/2025	Payee name Hobby Lobby		
	Amount (\$)	Payee address; City; State; Zip Cod	е	
	\$21.64	6814 Slide Rd		
		Lubbock, TX 79424		
	PURPOSE OF	,	b)	Description
	EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Framing for constituent gift
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O	•	-	
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)
	Sch: 26/66 Rpt: 33/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	
	01/23/2025	Hobby Lobby	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$218.73	130 Sundance Pkwy #200	
		Round Rock, TX 78661	
8	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 Framing for capitol office artwork	
		Training to suprior emos armony	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	н	
	Date	Payee name	
	02/20/2025	Holiday Motor Coach LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,169.00	1095 E Iona Rd	
		Idaho Falls, ID 83401	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Charter bus for constituents to visit the Texas Sta	ate
		Capitol Capitol	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	Н	
	Date	Payee name	
	01/13/2025	Home Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.56	600 US-79	
		Hutto, TX 78634	
	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 Hanging supplies for office	
		Tranging Supplies for Since	
H	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

	Credit Card Payment	The Instruction Guide explains how to co	•	ete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Commission Filers)
	Sch: 27/66 Rpt: 34/80	Tepper, Carl H. (The Honorable)		00086083
4	Date	5 Payee name		<u>'</u>
	03/20/2025	Home Depot		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$10.76	1200 Barbara Jordan Blvd		
		Austin, TX 78723		
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
				Hanging supplies for office art
_				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ght	Office held
	Date	Payee name		
	03/19/2025	Home Slice Pizza		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$150.91	1415 S Congress Ave		
		Austin, TX 78704		
	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 Meeting to discuss campaign/officeholder issues
				weeting to discuss earnpaign/onicentituen issues
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		9	Since hold
	Date	Payee name		
	01/14/2025	Hula Hut		
			do	
	Amount (\$) \$214.55	Payee address; City; State; Zip Co 3825 Lake Austin Blvd	ue	
	φ214.55	3023 Lake Austill Bivu		
		Aughin TV 70702		
		Austin, TX 78703		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
				Meeting to discuss campaign/officeholder issues
				· · · · · · · · · · · · · · · · · · ·
	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)

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

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

l	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 28/66 Rpt: 35/80	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	•
	06/02/2025	Hula Hut	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$152.93	3825 Lake Austin Blvd	
l			
l		Austin, TX 78703	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE		Check if Austin, TX, officeholder living expense
			Meeting to discuss campaign/officeholder issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		Office field
⊨	Data		
l	Date 01/13/2025	Payee name Informed Texans Foundation	
L			
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.82	PO Box 690024	
l			
L		Houston, TX 77269	
l	PURPOSE OF		Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			News subscription
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
Г	Date	Payee name	
	04/08/2025	Innovation & Technology Caucus of the Texas Leg	islature
Г	Amount (\$)	Payee address; City; State; Zip Code	
l	\$100.00	1108 Lavaca Street	
l			
		Austin, TX 78701	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Caucus fee	Check if travel outside of Texas. Complete Schedule T.
l	LAFLINDITORL		Check if Austin, TX, officeholder living expense
			Caucus membership dues
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
\vdash			
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 29/66 Rpt: 36/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	04/01/2025	Juniper
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.45	2400 E Cesar Chavez St
		Austin, TX 78702
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
		Meeting to discuss campaign/officeholder issues
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	03/24/2025	Logie's on Overton
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.87	2323 Mac Davis Ln
		Lubbock, TX 79401
	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
		Meeting to discuss campaign/officeholder issues
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/29/2025	Lone Star Awards & Trophies
	Amount (\$)	Payee address; City; State; Zip Code
	\$234.00	6400 N Lamar Blvd
		Austin, TX 78752
	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 Committee and staff gifts
		Committee and stan gins
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
\vdash		

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/66 Rpt: 37/80	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	<u>'</u>
	06/17/2025	Lubbock Area Republican Women	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$150.00	PO Box 6315	
		Lubbock, TX 79493	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Campaign advertisement
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/14/2025	Lubbock Co. Republican Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	2642 34th St	
		Lubbock, TX 79410	
	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.
	LAI LINDITORE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
			Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
	5.		
	Date	Payee name	
	02/06/2025	Lubbock Co. Republican Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	2642 34th St	
		Lubbock, TX 79410	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Event sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		S55 Hold

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 31/66 Rpt: 38/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	06/30/2025	Lubbock County Local Emergency Planning Committee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	PO Box 10536
		Lubbock, TX 79408
8	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
		Donation to the Support Our First Responders Campaign 2025
_	Complete CNII V if direct	
9	Complete ONLY if direct expenditure to benefit C/OH	
⊨	Date	Power name
	03/31/2025	Payee name Lubbock Lights
_	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 1468
		Lubbock, TX 79408
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialture to benefit C/Oi	
	Date	Payee name
	02/21/2025	Lubbock National Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	1001 Main St
		Lubback TV 70401
	DUDDOCE	Lubbock, TX 79401
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Wire fee for Texas House Republican Caucus membership dues
		membership daes
	Complete ONLY if alian -t	Condidate/Officeholder name Office country
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi 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: 32/66 Rpt: 39/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	06/30/2025	Luca Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	2901 69th St
		Lubbock, TX 79413
8	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. Check if Avetic TV officeholder living gyreage.
		Candidate/Officeholder/Political Committee
		Contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Date	Payee name
	05/07/2025	Mall Patches
H	Amount (\$)	Payee address; City; State; Zip Code
	\$316.00	Yangtanglong, Meishan Town, Nan'an
	ф310.00	rangtanglong, weishan rown, warran
		Quanzhou Fujian 362324 China
	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
		Texas House of Representatives Patches for House
		Members
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	02/20/2025	Manor Parking Garage
H	Amount (\$)	Payee address; City; State; Zip Code
	\$6.00	2017 Robert Dedman Dr
	Ψ0.00	2017 Nobelt Scaman Si
		Austin, TX 78712
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Parking fee
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
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 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: 33/66 Rpt: 40/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	_
	06/25/2025	Marble & Company	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$175.37	3519 34th St	
		Lubbock, TX 79410	
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 Flowers for constituent	
		Flowers for Constituent	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
⊨	Data		_
	Date 01/07/2025	Payee name Market Street	
L		Market Street	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.99	3800 Long Prairie Rd	
		Flower Mound, TX 75028	
	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	
		Campaign meal	
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
F	Date	Payee name	_
	06/09/2025	Mission Navy Yard	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$209.58	1221 Van St SE	
	7-20.00		
		Washington, VA 20003	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Food/Beverage Expense X Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Meeting to discuss campaign/officeholder issues	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
<u> </u>	experience to belieff 6/01	•	
_			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 34/66 Rpt: 41/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	01/15/2025	Moonshine Patio Bar & Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$477.05	303 Red River St
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss campaign/officeholder issues
		,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/02/2025	Mozart's Coffee Roasters
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.36	3825 Lake Austin Blvd
		Austin, TX 78703
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
		weeting to discuss campaign/onicenoider issues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	04/14/2025	Murphy Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.54	8202 University Ave
		Lubbock, TX 79423
	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
		Gas for campaign travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 35/66 Rpt: 42/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	06/26/2025	Murphy Express
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.68	8202 University Ave
		Lubbock, TX 79423
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
		Gas for campaign travel
		Sub 101 Gampaigh havor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/26/2025	Murphy Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$57.80	8202 University Ave
		Lubbock, TX 79423
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gas for campaign travel
		Sub 101 Gampaigh havor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/13/2025	Murphy USA
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.12	403 W Commerce St
		Brownwood, TX 76801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Gas for campaign travel
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 36/66 Rpt: 43/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	_
	03/14/2025	Nickel City	
6	Amount (\$) \$68.59	7 Payee address; City; State; Zip Code 1133 E 11th St	
	φ00.59	1133 E 1101 St	
		Austin, TX 78702	
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	
		Meeting to discuss campaign/officeholder issues	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	01/07/2025	OfficeMax	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$11.89	6805 Slide Rd	
		Lubbock, TX 79424	
	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	
		District office supplies	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_
	Date	Payee name	_
	05/02/2025	OpenAl	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$20.03	3180 18th Street	
	420.00		
		San Francisco, CA 94110	
	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 Subscription for legislative analysis and policy	
		research	
	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 Con

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 37/66 Rpt: 44/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	06/02/2025	OpenAl
6	Amount (\$) \$21.28	7 Payee address; City; State; Zip Code 3180 18th Street
		San Francisco, CA 94110
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Subscription for legislative analysis and policy research
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/24/2025	Pancake House
	Amount (\$) \$96.55	Payee address; City; State; Zip Code 510 Avenue Q
		Lubbock, TX 79401
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/02/2025	Payee name Perry's Steakhouse & Grille
	Amount (\$) \$140.86	Payee address; City; State; Zip Code 114 W 7th St
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction (Vages	/Contract Labor		OTHER (enter	a category not liste	d above)
Ļ		-			Suide explains	now to co	шрк	ete tilis ioiili.	-			
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Comn	nission Filers)
l	Sch: 38/66 Rpt: 45/80		Tepper, Ca	rl H. (The Hond	orable)					00086083		
4	Date	5	Payee name						•			
l	01/07/2025		Pizza Hut									
Ļ		 -		0''								
١٥	Amount (\$)	'	Payee addre		State	; Zip Co	ae					
l	\$47.62		5412 Slide	Rd Suite 500								
l												
l			Lubbock, T.	X 79414								
8	PURPOSE	(2)					(h)	Decemention				
ľ	OF	(a)		ee Categories listed a	t the top of this sch	nedule)	(0)	Description	outci	do of Toyas Cor	nplete Schedule T.	
l	EXPENDITURE		F000/Bevei	age Expense				=		officeholder livir		
l								Meeting to dis				er issues
l								wicoung to an	000	ioo oampaiş	gr.,, ornioorioidi	31 100000
L												
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(Office sou	ght			Office h	ield	
l	experiulture to beliefit C/Oi	1										
F	Date		Payee name									
l	01/09/2025		•	tiny Amarillo P	AC.							
┡		_										
l	Amount (\$)		Payee addre			; Zip Co	ae					
l	\$250.00		2607 Wolfli	n Avenue PMB	972							
			Amarillo, T	K 79109								
⊢	DUDDOCE	(0)					(h)	<u> </u>				
l	PURPOSE OF	(a)		ee Categories listed a		nedule)	(D)	Description	outoi	do of Toyon Cor	maloto Cohodulo T	
l	EXPENDITURE			ns/Donations M Officeholder/Po	,	nittoo		_		officeholder livir	nplete Schedule T.	
l			Cariuluale/	Jilicerioldei/Pc	illicai Comin	iiiiee		Contribution	,,	omoonoidoi iivii	ig experies	
l								Continuation				
┡												
l	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(Office sou	ght			Office h	ield	
l	experiulture to beliefit C/Oi	•										
Г	Date		Payee name									
l	06/04/2025		Project Des	tiny Amarillo P	AC							
⊢						. 7in Co	مام					
l	Amount (\$)		Payee addre	-		; Zip Co	ue					
l	\$250.00		2607 Wolfli	n Avenue PMB	972							
l												
l			Amarillo, T	X 79109								
H	PURPOSE	(a)	Category	ee Categories listed a			(h)	Description				
l	OF	(۵)				nedule)	(5)		outsi	de of Texas, Cor	mplete Schedule T.	
l	EXPENDITURE			ns/Donations M Officeholder/Po		nittee				officeholder livir		
l			Odi Ididdic/		intioal Collin	iiiioo		Contribution				
l												
⊢	Complete ONII V if alice -t	ᄂ	Condidate /Off	iooboldor		Office as:	ak.			Office I	ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januluale/Off	iceholder name	(Office sou	ynt			Office h	ı c ıu	
L	S. Portalitato to bottoni 0/01											
l												
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mad 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: 39/66 Rpt: 46/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	
	02/07/2025	Rally Right	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$750.00	575 Pharr Road #53095	
		Atlanta, GA 30355	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
		Check if Austin, TX, officeholder living expense	
		Campaign text messaging	
L			_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiantiale to belief of of		
	Date	Payee name	
	04/29/2025	Roaring Fork	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$27.73	701 Congress Ave	
		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	
		Meeting to discuss campaign/officeholder issues	
		Meeting to discuss earnpuign/officeriolder issues	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
H	Date	Payee name	=
	06/06/2025	Ronald Reagan Washington National Airport	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$37.09	2401 Ronald Reagan Washington National Airport Access R	
	φ31.09	2-01 Nonaia Neagair Washington National Aliport Access K	
		Arlington, VA 22202	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense X Check if travel outside of Texas. Complete Schedule T.	
	LAFEINDITURE	Check if Austin, TX, officeholder living expense	
		Meal in transit to attend Energy Council Conference	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	CAPETIGITUTE TO DETICITE C/OI		

SCHEDULE F1

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 40/66 Rpt: 47/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	05/27/2025	Scholz Garten
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.12	1607 San Jacinto 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
		Meeting to discuss campaign/officeholder issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/08/2025	Southwest Airlines
_	Amount (\$)	Payee address; City; State; Zip Code
	\$701.01	2702 Love Field Drive
	Ψ/01.01	2702 Love Field Brive
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District X Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Staff travel to Energy Council conference
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Date	Payee name
	05/27/2025	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$384.46	2702 Love Field Drive
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District X Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff travel to Energy Council Conference
		Stan traver to Energy Country Connecting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 41/66 Rpt: 48/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	06/04/2025	Southwest Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	2702 Love Field Drive
		Dallas, TX 75235
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Luggage fee
		Laggage lee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	06/26/2025	Southwest Airlines
H	Amount (\$)	Payee address; City; State; Zip Code
	\$447.96	2702 Love Field Drive
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Flights to attend the Texas House Republican
		Caucus retreat
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	01/17/2025	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.77	8 Clarkson St
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	_,, _,,,,,,	Check if Austin, TX, officeholder living expense
		Website hosting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

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	I Committee Le	ood/Beverage Expense ift/Awards/Memorials Expense egal Services The Instruction Guide exp		xpense /ages/	e /Contract Labor		Travel in District Travel Out of Distric OTHER (enter a cat	t legory not listed above)
1	Total pages Schedule F1:	2 FILER NAME	<u> </u>				3	Filer ID (I	Ethics Commission Filers)
_	Sch: 42/66 Rpt: 49/80		H. (The Honorable)					00086083	
4	Date	5 Payee name							
	02/18/2025	Squarespace	•						
6	Amount (\$)	7 Payee address	s; City; S	State; Zip Co	de				
	\$50.77	8 Clarkson S	t						
_		New York, N							
8	PURPOSE OF		Categories listed at the top of the	his schedule)	(b)	Description	outei	de of Texas. Complet	ta Schadula T
	EXPENDITURE	Advertising E	xpense			므		officeholder living ex	
						Website hosti		,	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Office	eholder name	Office sou	ght			Office held	
	Date	Payee name							
	03/17/2025	Squarespace	•						
	Amount (\$)	Payee address	Payee address; City; State; Zip Code						
	\$50.77	8 Clarkson S	t						
		New York, N	Y 10014						
	PURPOSE OF		Categories listed at the top of the	his schedule)	(b)	Description			
	EXPENDITURE	Advertising E	xpense			=		de of Texas. Complet officeholder living ex	
						Website hosti		CCETIONAET HVIITY EX	po
							J		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Office	eholder name	Office sou	ght			Office held	
_	Data	Davies reserve							
	Date 04/17/2025	Payee name Squarespace							
_				State: 7'- C	de				
	Amount (\$) \$53.36	Payee address 8 Clarkson S	•	State; Zip Co	ue				
	\$53.30	o Ciaiksun Si	ι						
		New York, N	Y 10014						
	PURPOSE OF		Categories listed at the top of the	his schedule)	(b)	Description			
	EXPENDITURE	Advertising E	xpense			ш		de of Texas. Complet officeholder living ex	
						Website hosti		omeenolael living ex	polise
							-9		
	Complete ONLY if direct	Candidate/Office	eholder name	Office sou	ght			Office held	
	expenditure to benefit C/O	4			-				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 43/66 Rpt: 50/80	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	
	05/19/2025	Squarespace	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$53.36	8 Clarkson St	
		New York, NY 10014	
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	, TX, officeholder living expense
		Website host	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiorative to benefit C/Oi	'	
	Date	Payee name	
	06/17/2025	Squarespace	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$53.36	8 Clarkson St	
		New York, NY 10014	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	autoide of Taylor Complete Cabadule T
	EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Website host	ing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiordine to benefit C/Oi	1	
	Date	Payee name	
	01/28/2025	Stathatos, Parker	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,400.00	5160 N AW Grimes Blvd	
		Devel Devl. TV 70005	
		Round Rock, TX 78665	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/ Wages/ Contract Eabor	ı, TX, officeholder living expense
		Campaign wa	ages
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	exponential to belieff 6/01	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 44/66 Rpt: 51/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	03/12/2025	TFRW PAC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	13740 N Hwy 183 Ste J4
		Austin, TX 78750
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
		TFRW Legislative Day sponsorship
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	01/23/2025	Target
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$20.02	121 Louis Henna Blvd
		Round Rock, TX 78664
	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
		Office groceries
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	03/25/2025	Target
	Amount (\$)	Payee address; City; State; Zip Code
	\$93.57	121 Louis Henna Blvd
		Round Rock, TX 78664
	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
		Office groceries
		555 g. 555.155
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 45/66 Rpt: 52/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	05/05/2025	Target
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$98.92	121 Louis Henna Blvd
		Round Rock, TX 78664
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
		Office groceries
		Office groceries
9	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
	06/02/2025	TenTen
	Amount (\$)	Payee address; City; State; Zip Code
	\$140.22	501 W 6th 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
		Meeting to discuss campaign/officeholder issues
		mooting to disease sampaignomeenside issues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Data	Davies same
	Date	Payee name Toyas House Popublican Caucus
	02/21/2025	Texas House Republican Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 13305
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Caucus dues Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Caucus membership dues
	0 1. 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
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 46/66 Rpt: 53/80		mmission Filers)
4	·	5 Payee name Texas Republican County Chairmen's Association	
6	Amount (\$) \$521.15	7 Payee address; City; State; Zip Code P.O. Box 955	
8	PURPOSE OF EXPENDITURE	Corpus Christi, TX 78403 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense TRCCA Convention sponsorship	эТ.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held DH	
	Date 04/29/2025	Payee name Texas State Capitol	
	Amount (\$) \$100.00		
	PURPOSE OF EXPENDITURE	Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Committee gift for committee coordinate	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held DH	
	Date 05/20/2025	Payee name The Energy Council	
	Amount (\$) \$1,285.00	Payee address; City; State; Zip Code 13760 Noel Road	
		Dallas, TX 75240	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Conference registration for member a Energy Concil Conference	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held DH	

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 comp	nplete 1	this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 47/66 Rpt: 54/80	Tepper, Carl H. (The Honorable)		00086083
4	Date	5 Payee name		
	02/03/2025	The Nicolett		
6	Amount (\$)	7 Payee address; City; State; Zip Code	le	
	\$114.18	511 Broadway St		
		Lubbard, TV 70404		
Ļ		Lubbock, TX 79401		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) De	escription Theck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense	E	Check if Austin, TX, officeholder living expense
			M	eeting to discuss campaign/officeholder issues
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	ht	Office held
_	<u> </u>			
	Date	Payee name The Payel Separts Weekington, DC Capital Hill		
	06/06/2025	The Royal Sonesta Washington, DC Capitol Hill		
	Amount (\$) \$955.42	Payee address; City; State; Zip Code 20 Massachusetts Ave NW	ie	
	φ955.42	20 Massachusells Ave NVV		
		Washington, DC 20001		
	PURPOSE		(h) Do	escription
	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	X (C.	a ·
	EXPENDITURE			Check if Austin, TX, officeholder living expense
			St	taff hotel to attend the Energy Council Conference
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·		C.II.GC II.GC
-	Date	Payee name		
	06/05/2025	The Royal Sonesta Washington, DC Capitol Hill		
	Amount (\$)	Payee address; City; State; Zip Code	le	
	\$955.42	20 Massachusetts Ave NW		
		Washington, DC 20001		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	(b) De	escription
	OF EXPENDITURE	Travel Out of District	X	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			∟ St	taff hotel to attend the Energy Council Conference
				5,
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht	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 Co 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		nittee I	_egal Services	Sala		iges/	Contract Labor		OTHER (ente		gory not listed above)
	oroun oura r aymone		•	The Instruction Gu	iide explains how	to com	ple	te this form.				
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Et	thics Commission Filers)
	Sch: 48/66 Rpt: 55/80	Τ	Tepper, Carl	H. (The Honor	able)					00086083	3	
4	Date	5 F	Payee name									
	06/07/2025	T	he Royal S	onesta Washin	gton, DC Capito	ol Hill						
6	Amount (\$)	7 F	Payee addres	s; City;	State; Zip	Cod	е					
	\$21.36	2	20 Massach	usetts Ave NW								
		v	Vashington,	DC 20001								
8	PURPOSE	(a) (Category (See	e Categories listed at the	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE			age Expense	,			X Check if travel of	outsi	de of Texas. C	omplete	Schedule T.
	EXPENDITURE							Check if Austin,				
								Meeting to dis	scu	ss campa	ign/of	ficeholder issues
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name	Office	soug	ht			Office	held	
	expenditure to benefit C/Oi											
	Date	F	Payee name									
	06/10/2025	1	The Royal S	onesta Washin	gton, DC Capito	ol Hill						
	Amount (\$)	F	Payee addres	s; City;	State; Zip	Cod	е					
	\$955.42	2	20 Massach	usetts Ave NW								
		Įν	Washington,	DC 20001								
	PURPOSE	(a) (Category (See	e Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	ד	ravel Out o	f District				X Check if travel of				
								Check if Austin,				
								notei to atteii	iu ti	ie Ellelgy	Cour	ncil Conference
_	Complete ONLY if direct		ndidato/Offic	eholder name	Office	soug	ht			Office	hold	
	expenditure to benefit C/OI		andidate/Onic	enoluei name	Office	Soug	H			Office	Heiu	
		_										
	Date	l	Payee name									
	01/16/2025		The UPS Sto	ore								
	Amount (\$)	l	Payee addres	•	State; Zip	Cod	е					
	\$136.04	1	.108 Lavaca	a St #110								
		ļ A	Austin, TX 7	8701								
	PURPOSE	(a) (Category (See	e Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	١	<i>l</i> ailing					Check if travel of				
	ZA ZHOHOKZ							Check if Austin,				ense
								Mailing artwo	IΚι	o district (Jilice	
	Commission ONU Wife allows	$\check{\Gamma}$	andidat-10ti		Ott.		la é			Off.	ا- لمط	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		มานเนลเย/บทีเด	eholder name	Опісе	soug	ΠÜ			Office	nela	

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

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

OTHER (enter a category not listed above)

Solicitation/Fundraising Expense

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 49/66 Rpt: 56/80 00086083 Tepper, Carl H. (The Honorable) 4 Date Payee name 05/05/2025 Townsquare Media Lubbock 6 Amount (\$) Payee address; City; State; Zip Code \$1,025.00 4413 82nd St #300 Lubbock, TX 79424 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/03/2025 Triple J Chophouse & Brew Co. Amount (\$) Payee address; City; State; Zip Code \$43.14 1807 Buddy Holly Ave Lubbock, TX 79401 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/06/2025 U.S. House of Representatives Dining Lounge Amount (\$) Payee address: City: State: Zip Code \$86.00 100 Constitution Avenue NW Washington, DC 20004 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF X Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues 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

	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: 50/66 Rpt: 57/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	01/28/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.59	1725 3rd St
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Travel to meeting in Downtown Austin
		Travel to meeting in Downtown Adding
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/28/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.59	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Travel from meeting in Downtown Austin
		Travel from theeting in Downtown Addun
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/24/2025	Uber
H	Amount (\$)	Payee address; City; State; Zip Code
	\$15.94	1725 3rd St
		San Francisco, CA 94158
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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Travel to district event
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 51/66 Rpt: 58/80	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	
	04/02/2025	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$7.99	1725 3rd St	
		San Francisco, CA 94158	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if tra	vel outside of Texas. Complete Schedule T.
			ıstin, TX, officeholder living expense neeting in Downtown Austin
		Traverto ii	leeting in Downtown Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		Office Held
_	Date	Davisa nama	
	06/09/2025	Payee name Uber	
	Amount (\$) \$31.99	Payee address; City; State; Zip Code 1725 3rd St	
	\$31.99	1725 310 51	
		0.5.	
		San Francisco, CA 94158	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000/Develage Expense	ıvel outside of Texas. Complete Schedule T. ıstin, TX, officeholder living expense
			DCA Airport to hotel for Energy Council
		Conferenc	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	06/05/2025	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.32	1725 3rd St	
		San Francisco, CA 94158	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	, ,	evel outside of Texas. Complete Schedule T.
	EXPENDITURE	·	ustin, TX, officeholder living expense
		Uber from	DCA Airport
	0 1. 0		05.
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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		
1	Total pages Schedule F1:		5)
	Sch: 52/66 Rpt: 59/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	
L	06/08/2025	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$26.53	1725 3rd St	
		San Francisco, CA 94158	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District X Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Uber to DCA Airport	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
_			
	Date	Payee name	
	06/06/2025	Uber State 7's Oath	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$18.92	1725 3rd St	
		San Francisco, CA 94158	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District X Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Uber to meet with Congressional Members	
		See to most than congressional members	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	06/08/2025	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$28.66	1725 3rd St	
		San Francisco, CA 94158	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District X Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Uber to DCA Airport	
		SSS. to 2 S. (Amport	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	н	
_			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1			ics Commission Filers)
Ļ	Sch: 53/66 Rpt: 60/80		
4	Date 06/06/2025	5 Payee name Uber	
_			
٥	Amount (\$) \$39.95	7 Payee address; City; State; Zip Code 1725 3rd St	
	Ψ39.93	1723 314 31	
		San Francisco, CA 94158	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Travel Out of District X Check if travel outside of Texas. Complete S	Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living exper	
		Uber to Energy Council Conferer	nce
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
⊨	Date	Payee name	
	01/12/2025	Uber	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.99		
		San Francisco, CA 94158	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete S	
	LAFENDITORE	Check if Austin, TX, officeholder living exper	nse
		Uber in Austin	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
F	Date	Payee name	
	02/11/2025	Uber	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.34	1725 3rd St	
		San Francisco, CA 94158	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete S	
		Check if Austin, TX, officeholder living exper	ise
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
ı			

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 54/66 Rpt: 61/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	02/17/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.88	1725 3rd St
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		Obel III/lusuii
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Dete	
	Date	Payee name
	02/18/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.76	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		ODEL III AUSUII
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/19/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.78	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Uber in Austin
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

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: 55/66 Rpt: 62/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	02/20/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$68.17	1725 3rd St
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		Obel III Addill
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	03/03/2025	Uber
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.24	1725 3rd St
L		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		Obel III/ (dodii)
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	03/04/2025	Uber
		5.77
	Amount (\$) \$11.05	Payee address; City; State; Zip Code 1725 3rd St
	Φ11.05	1725 310 31
		05
		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Uber in Austin
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 56/66 Rpt: 63/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	03/04/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.65	1725 3rd St
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
 	Date	Payee name
	03/05/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.37	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/05/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.93	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		ODEL III AUSUIT
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 57/66 Rpt: 64/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	03/06/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.44	1725 3rd St
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		Obel III/lusuii
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	03/10/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.94	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Uber in Austin
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	03/10/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.99	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Uber in Austin
_	Commission ONU Wife allows	Condidate/Officeholder name Office county
	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)

se 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	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 58/66 Rpt: 65/80	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	
	03/17/2025	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$24.91	1725 3rd St	
		San Francisco, CA 94158	
8	PURPOSE		Providetion
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Gat of Bloanet	Check if Austin, TX, officeholder living expense
			Uber in Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office field
⊨	Date	Payee name	
	03/20/2025	Uber	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.30	1725 3rd St	
		San Francisco, CA 94158	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Uber in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	1	
	Date	Payee name	
	03/24/2025	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$27.96	1725 3rd St	
		San Francisco, CA 94158	
L	PURPOSE		Providetion
	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Gat of Bloanet	Check if Austin, TX, officeholder living expense
			Uber in Austin
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 59/66 Rpt: 66/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	03/28/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.29	1725 3rd St
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		Obel III Addill
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
L	03/31/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.62	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
		Obel III Adollii
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	
	Date	Payee name
	04/03/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.94	1725 3rd St
L		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber in Austin
1		ODEI III AUSUII
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 60/66 Rpt: 67/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	04/22/2025	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$26.59	1725 3rd St
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Uber in Austin
		Social Annaesta
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
_		Г
	Date	Payee name
	04/23/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.57	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Uber in Austin
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	·	
	Date	Payee name
	04/24/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.57	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Uber in Austin
	Operation ONLY if all part	Out distance (Office health annual and office a sought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

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:			3 Filer ID (Ethics Commission Filers)
	Sch: 61/66 Rpt: 68/80	Tepper, Carl H. (The Honorable)		00086083
4	Date 04/28/2025	5 Payee name		
-		Uber		
ь	Amount (\$) \$26.90	7 Payee address; City; State; Zip Code 1725 3rd St	е	
	+ 20.00	2, 20 0, 20		
		San Francisco, CA 94158		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Uber in Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	05/02/2025	Uber		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$25.25	1725 3rd St		
		Con Francisco CA 041E0		
	PURPOSE	San Francisco, CA 94158	h)	Page selection
	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel eat of Biotriet		Check if Austin, TX, officeholder living expense
				Uber in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI			
	Date	Payee name		
	05/05/2025	Uber		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$27.25	1725 3rd St		
		San Francisco, CA 94158		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver out of district		Check if Austin, TX, officeholder living expense
				Uber in Austin
	Complete ONLY if direct	Candidata/Officeholder.nome	ht	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ııı	Office held
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1		2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Ļ	Sch: 62/66 Rpt: 69/80	Tepper, Carl H. (The Honorable)	00086083
4	Date 05/16/2025	5 Payee name Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	\$18.24	1725 3rd St	
	¥-0:-		
		San Francisco, CA 94158	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE		Check if Austin, TX, officeholder living expense Uber in Austin
			ODEI III AUSUIT
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	05/29/2025	Uber	
┢	Amount (\$)	Payee address; City; State; Zip Code	
l	\$11.64	1725 3rd St	
l			
		San Francisco, CA 94158	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Uber in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	06/01/2025	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.90	1725 3rd St	
L		San Francisco, CA 94158	
	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense
			Uber in Austin
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Superiordical to belieff 6/01	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 63/66 Rpt: 70/80	Tepper, Carl H. (The Honorable) 00086083
4 Date	5 Payee name
06/05/2025	Uber
6 Amount (\$) \$33.58	7 Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District X Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber from DCA Airport
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/06/2025	Uber
Amount (\$) \$30.88	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/07/2025	Uber
Amount (\$) \$47.62	Payee address; City; State; Zip Code 1725 3rd St
	San Francisco, CA 94158
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber to DCA Airport
Complete ONLY if direct expenditure to benefit C/OF	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 complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 64/66 Rpt: 71/80	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	05/16/2025	Vera Bradley
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$265.63	11222 Stonebridge Road
		Roanoke, IN 46783
8	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 Committee gifts for the State-Federal Relations
		Subcommittee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	01/08/2025	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.78	4215 S Loop 289
		·
		Lubbock, TX 79423
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 06/10/2025	Payee name Walmart
	Amount (\$) \$66.34	Payee address; City; State; Zip Code 4215 S Loop 289
	Ψ00.54	4213 3 Loop 203
		Lubbock, TX 79423
	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
		Office supplies
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	S.portation to bottom 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

l	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)	
l	Sch: 65/66 Rpt: 72/80	Tepper, Carl H. (The Honorable) 00086083	
4	Date	5 Payee name	_
l	01/27/2025	Whole Foods Market	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$79.52	525 N Lamar Blvd	
l			
l		Austin, TX 78703	
8	PURPOSE	1	_
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Meeting to discuss campaign/officeholder issues	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
Г	Date	Payee name	_
l	02/06/2025	Whole Foods Market	
H	Amount (\$)	Payee address; City; State; Zip Code	_
l	\$65.85	525 N Lamar Blvd	
l			
l		Austin, TX 78703	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Meeting to discuss campaign/officeholder issues	
L			_
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			_
l	Date	Payee name	
L	03/26/2025	Whole Foods Market	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$34.62	525 N Lamar Blvd	
l			
l		Austin, TX 78703	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
l		Check if Austin, TX, officeholder living expense	
		Meeting to discuss campaign/officeholder issues	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

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 Gift/Awards/Memorials Expense Printing Expense Travel Out of District Travel Out of District Travel Out of District 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)
Tepper, Carl H. (The Honorable) 00086083
5 Payee name
Zwiener, Erin (The Honorable)
7 Payee address; City; State; Zip Code
PO Box 184
Driftwood, TX 78619
(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense
Committee gift
Candidate/Officeholder name Office sought Office held

SCHEDULE T

The Instruction Guide explains how to complete this form.					1 Total pages Schedule T: Sch: 1/7 Rpt: 74/80				
2 FILER NAME					3 Filer ID (Ethics Commission	on Filers)			
Tepper, Carl H.	<u>` </u>				00086083				
		ation or Labor Org	anization / Pledgor /Paye	ee					
American Airline									
I `	5 Contribution / Expenditure reported on:								
Schedule A2	브	Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1							
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
6 Dates of Travel		of person(s) travel							
	Statha	atos, Parker (Mr.)						
	8 Depart	ture city or name o	f departure location						
06/05/2025	Austin	1							
		-	of destination location						
06/08/2025	Wash	ington, D.C.							
10 Means of transport		•	avel (including name of c		other event)				
Commercial Airp	olane ————	Attend the E	nergy Council Confer	ence					
Name of Contribut	or / Corpor	ation or Labor Org	anization / Pledgor /Paye	ee					
Mission Navy Ya	ard								
Contribution / Expe	enditure rep	oorted on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D X	Schedule F1			
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
Dates of Travel Name of person(s) traveling									
	Терре	er, Carl (The Hor	orable)						
	Depart	ure city or name o	f departure location						
06/05/2025	Lubbo	ock							
	Destin	ation city or name	of destination location						
07/07/2025	Wash	ington, D.C.							
Means of transpor	tation	·	avel (including name of c		other event)				
		Attend the E	nergy Council Confer	ence					
Name of Contribut	or / Corpor	ation or Labor Org	anization / Pledgor /Paye	ee					
Ronald Reagan	Washingt	on National Airpo	ort						
Contribution / Expe	enditure rep	oorted on:							
Schedule A2	Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1								
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
Dates of Travel	Name	of person(s) travel	ing						
	Терре	er, Carl (The Hor	orable)						
	Depart	ture city or name o	f departure location						
06/05/2025	Lubbo	ock							
Destination city or name of destination location									
06/07/2025	Washington, D.C.								
Means of transpor	tation	Purpose of tra	avel (including name of c	onference, seminar, or	other event)				
		Attend the E	nergy Council Confer	ence					
		•							
I									

SCHEDULE T

4 Name of Contribut Southwest Airlin		ation or Labor Orga	anization / Pledgor /Pay	ee					
5 Contribution / Expo Schedule A2 Schedule F2		ported on: Schedule B Schedule F4	Schedule B(J) Schedule G	Schedule C2	Schedule D Schedule COH-UC	X Schedule F1			
6 Dates of Travel									
		, Arianna (Ms.)							
06/05/2025	8 Depart Austir		f departure location						
	9 Destin	ation city or name	of destination location						
06/08/2025	Wash	ington, D.C.							
10 Means of transpor	tation	11 Purpose of tra	vel (including name of o	conference, seminar, or	other event)				
Commercial Airp	olane	Attend the E	nergy Council Confe	rence					
Name of Contribut Southwest Airlin	•	ation or Labor Orga	anization / Pledgor /Pay	ee					
Contribution / Expe	enditure rep	ported on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1			
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC	_			
Dates of Travel		of person(s) traveli atos, Parker (Mr.)							
			f departure location						
06/05/2025	5 Austin								
	Destination city or name of destination location								
06/08/2025	Wash	ington, D.C.							
Means of transpor		· ·		conference, seminar, or	other event)				
Commercial Airp	olane	Attend the E	nergy Council Confe	rence					
Name of Contribut	or / Corpor	ation or Labor Orga	anization / Pledgor /Pay	ee					
The Royal Sone	sta Washi	ington, DC Capit	ol Hill						
Contribution / Expe	enditure rep	ported on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1			
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC	_			
Dates of Travel	Name of person(s) traveling Joslin, Arianna (Ms.)								
			f denember ne le cabiere						
06/05/2025	Departure city or name of departure location								
00/05/2025	Austir								
06/08/2025	Destination city or name of destination location Washington, D.C.								
	l		I Con all collins on an annual after		-41				
Means of transportation Purpose of travel (including name of conference, seminar, or other event) Attend the Energy Council Conference									
		•							
I									

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee The Royal Sonesta Washington, DC Capitol Hill 5 Contribution / Expenditure reported on: X Schedule F1 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC Dates of Travel Name of person(s) traveling Joslin, Arianna (Ms.) Departure city or name of departure location 06/05/2025 9 Destination city or name of destination location 06/08/2025 Washington, D.C. 11 Purpose of travel (including name of conference, seminar, or other event) 10 Means of transportation Attend the Energy Council Conference Name of Contributor / Corporation or Labor Organization / Pledgor /Payee The Royal Sonesta Washington, DC Capitol Hill Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC Dates of Travel Name of person(s) traveling Stathatos, Parker (Mr.) Departure city or name of departure location 06/05/2025 Austin Destination city or name of destination location 06/08/2025 Washington, D.C. Purpose of travel (including name of conference, seminar, or other event) Means of transportation Attend the Energy Council Conference

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

Schedule B

Schedule F4

Name of person(s) traveling Tepper, Carl (The Honorable)

Departure city or name of departure location

Destination city or name of destination location

The Royal Sonesta Washington, DC Capitol Hill

Lubbock

Washington, D.C.

Contribution / Expenditure reported on:

Schedule A2

Schedule F2

Dates of Travel

06/05/2025

06/07/2025

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Schedule B(J)

Schedule G

Attend the Energy Council Conference

Schedule C2

Schedule H

Schedule D

Schedule COH-UC

X Schedule F1

SCHEDULE T

		_	anization / Pledgor /Pay	ee				
		atives Dining Lou	nge —————					
5 Contribution / Exp					_			
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1		
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC			
6 Dates of Travel		of person(s) traveli						
		er, Carl (The Hon						
	8 Depart	ture city or name of	f departure location					
06/05/2025	Lubbo							
			of destination location					
06/08/2025		ington, D.C.						
10 Means of transpor	tation	•		conference, seminar, or o				
		Attend the E	nergy Council Confe	rence and meet with C	Congressional Members			
Name of Contribut	tor / Corpor	ation or Labor Orga	anization / Pledgor /Pay	ee				
Uber								
Contribution / Exp	enditure rep	oorted on:						
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1		
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC			
Dates of Travel	Name	of person(s) traveli	ng					
	Joslin	, Arianna (Ms.)						
	Depart	Departure city or name of departure location						
06/05/2025	Austin							
	Destination city or name of destination location							
06/08/2025	Wash	ington, D.C.						
Means of transpor		Purpose of tra	vel (including name of	conference, seminar, or o	other event)			
Commercial Aut	omobile	Attend the E	nergy Council Confe	rence				
Name of Contribut	tor / Corpor	ation or Labor Orga	anization / Pledgor /Pay	ee				
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Contribution / Exp	enditure rep	ported on:						
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	Destina	ation city or name	of destination location					
06/08/2025	Washington, D.C.							
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		, Arianna (Ms.)					
	· .		f departure location				
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	9 Destina	ation city or name	of destination location				
06/08/2025	Wash	ington, D.C.					
10 Means of transpor	<u>I</u> tation	11 Purpose of tra	vel (including name of o	conference, seminar, or	other event)		
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Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC		
Dates of Travel	Name	of person(s) traveli	ing				
	Statha	atos, Parker					
	Denart	ure city or name of	f denarture location				
06/05/2025	Departure city or name of departure location						
00/05/2025	Austin						
	Destina	ation city or name	of destination location				
06/08/2025	Wash	ington, D.C.					
Means of transpor	tation	Purpose of tra	ivel (including name of c	conference, seminar, or	other event)		
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Dates of Travel	Name	of person(s) traveli	ng				
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	Depart	ure city or name of	f departure location				
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6 Dates of Travel	7 Name of person(s) traveling								
	Tepper, Carl (The Honorable)								
			f departure location						
06/05/2025	Lubbo	ock							
			of destination location						
06/07/2025		ington, D.C.							
10 Means of transpor				conference, seminar, or	other event)				
Commercial Aut	omobile	Meet with Co	ongressional Membe	ers					
Name of Contribut	or / Corpor	ation or Labor Org	anization / Pledgor /Pay	/ee					
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	Departure city or name of departure location								
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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Uber 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel Name of person(s) traveling Tepper, Carl (The Honorable) 8 Departure city or name of departure location 06/05/2025 Lubbock Destination city or name of destination location 06/07/2025 Washington, D.C. 11 Purpose of travel (including name of conference, seminar, or other event) 10 Means of transportation Commercial Automobile Attend the Energy Council Conference