CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	te this form.	1 Filer ID (Ethics Commis 00081727	sion Filers)	2 Total pages fi	iled: 39
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	David M.			Date Received	
					ELECTRONIC	ALLY FILED
	NICI/NAME			CHEEN	07/15/2025	, , , , , , , , , , , , , , , , , , , ,
	NICKNAME	LAST Middleton		SUFFIX II	01/13/2023	
	Mayes	Middleton		II		
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	1702 Beachtown Dr.					
ADDRESS					Receipt #	Amount
Change of Address	Galveston, TX 77550				Data Buranand	
					Date Processed	
					Date Imaged	
					Date illiaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>L</u>	
TREASURER		J.P.		IVII		
NAME	IVII.	J.F.				
	NIO(4) A A F					
		LAST		SUFFIX		
		Bryan				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO I	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	ATE; ZIP CODE
ADDRESS	1315 21st					
(Residence or Business)						
	Galveston, TX 77500					
7 CAMPAIGN	AREA CODE PHONE	- NILIMBED - E	VIENCION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(409) 443-7713					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	7 15th day after ca	ımpaign treasurer
] courtag serere		L	appointment (off	
	X July 15	8th day before e	election	Exceeded modified	Final Report (Att	ach C/OH-FR)
		-		reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	TH	ROUGH	06/30/202	5	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X Pr	rimary	Runoff	Other	
	03/03/2026	□G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Senator District 11			Attorney Genera		
				7	•	
				<u> </u>		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 89

13 C / OH NAME	Middleton II, David M	. (The Honorable)		14 Filer ID (00081727	Ethics C	ommission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may	epted or political expenditure have been made without to do not to report this information	he candidate's or office	holder's	knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS	S			
	SPECIFIC					
		COMMITTEE CAMPAIG	GN TREASURER NAME			
		COMMITTEE CAMPAIG	GN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED DOLITICAL CONTE	RIBUTIONS (OTHER THAN	NI DI EDGES I OANS		
TOTALS			ITRIBUTIONS MADE ELEC		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR (GUARANTEES OF LOANS	5)	\$	166,308.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPEN	IDITURES		\$	140.56
	4. TOTAL POLITIC	AL EXPENDITURES			\$	162,072.67
CONTRIBUTION BALANCE	REPORTING PE	RIOD	AINTAINED AS OF THE LA		\$	10,252,055.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		JTSTANDING LOANS AS	OF THE LAST DAY	\$	10,000,000.00
17 AFFIDAVIT						
		true a	ear, or affirm, under penalty and correct and includes al or Title 15, Election Code.			
			The Heneral	ole David M. Middlete	on II	
				Candidate or Officehol		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
	, 20, to co					•
Signature of office	cer administering	Printed name of off	icer administering	Title of officer	adminis	stering oath

SUBTOTALS - C/OH

FORM COH **COVER SHEET PG 3**

					3 01 89
	LER NAN	II, David M. (The Honorable)	19 Filer ID 00081727	(Eth	ics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	166,308.00
2.		\$			
3.	X	\$	35,000.00		
4.	X	SCHEDULE E: LOANS		\$	10,000,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	143,549.41
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	18,523.26
10). <u> </u>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	2. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONEI	NETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/23 Rpt: 4/89		
2	FILER NAME	5			3	Filer ID (Ethics Commission	on Filers)	
_		David M. (The Honorable)			Ļ	00081727		
4	Date 06/28/2025	5 Full name of contributor Adams, John6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00	
g	Principal occu	San Antonio, TX 78242 pation / Job title (See Instructions	<u>, </u>	Employer (See Instructions				
0	retired	pation / 300 title (See instructions	,	retired	>)			
	Date 06/26/2025	Full name of contributor BOLLICH, SUSAN Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$500.00	
	Deinsinal sass	Hankamer, TX 77560	\ \ \	Franksian (Caa Instruction	<u></u>			
	retired	pation / Job title (See Instructions)	Employer (See Instructions retired	5)			
	Date 06/30/2025	Full name of contributor Babbitt, Salli Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$25.00	
		San Leon, TX 77539						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	retired			retired				
	Date 06/28/2025	Full name of contributor Baillio, Leslie Contributor address; City; St Baytown, TX 77523	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$15.00	
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired	<u> </u> S)			
	Date 06/27/2025	Full name of contributor Bennett, Donald Contributor address; City; St Austin, TX 78746	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$2,500.00	
	Principal occu Managing Pa	pation / Job title (See Instructions artner		Employer (See Instructions Bennett Ventures LP	5)			

	MONEI	NETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains hov	v to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 2/23 Rpt: 5/89		
2	FILER NAME	De MA (The Heavel)				3	Filer ID (Ethics Commission	n Filers)	
_		David M. (The Honorable)				L	00081727		
4	Date 06/29/2025	5 Full name of contributorBlair, Tammy6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00	
•	Principal occu	Tyler, TX 75703 pation / Job title (See Instruction:	s) 1	<u> </u>	Employer (See Instructions				
0	CFO	pation / Job title (See instructions	5)	9	Smith Tank	»)			
	Date 06/30/2025	Full name of contributor Butchko, Katy Contributor address; City; S Nacogdoches, TX 75965	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u>			
	retired				retired				
	Date 06/26/2025	Full name of contributor Carnes, Jay Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00	
		Texas City, TX 77591							
	Principal occu Small Busine	pation / Job title (See Instructionsess Owner	5)		Employer (See Instructions Carnes Funeral Home	5)			
	Date 06/30/2025	Full name of contributor Cernosek, Larry Contributor address; City; S Pasadena, TX 77503	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00	
	Principal occu Automotive	pation / Job title (See Instructions	5)		Employer (See Instructions Larry Cernosek Ent Inc	s)			
	Date 06/30/2025	Full name of contributor Cernosek, Larry Contributor address; City; S Pasadena, TX 77503	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$250.00	
	Principal occu Automotive	pation / Job title (See Instructions	5)		Employer (See Instructions Larry Cernosek Ent Inc	s)			

	MONET	ARY POLITICAL CON		SCHEDULE A1			
	The Instruc	ction Guide explains how to c	omplete this forn	n.	1	Total pages Schedule A1: Sch: 3/23 Rpt: 6/89	
2	FILER NAME Middleton II,	David M. (The Honorable)			3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 06/28/2025	5 Full name of contributor out	ut-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$15.00
_		Baytown, TX 77521					
8	retired	pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Date 06/26/2025	Full name of contributor on covey, David Contributor address; City; State; Zi	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$250.00
	Dringing age	Orange, TX 77632		Employer (Coo Instructions			
	Account Mar	pation / Job title (See Instructions) nager		Employer (See Instructions CFI)		
	Date 06/23/2025	Full name of contributor out of craftPAC Contributor address; City; State; Zity	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78766					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/30/2025	Full name of contributor on Davis, Beverly Contributor address; City; State; Zinch Liberty, TX 77575	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Date 06/30/2025	Full name of contributor on Day, David Contributor address; City; State; Ziver Texas City, TX 77592	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions The Post Newspaper)		
			I				

	MONEI	NETARY POLITICAL CONTRIBUTIONS				SCHEDU	LE A1
	The Instru	ction Guide explains how	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/23 Rpt: 7/89	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		David M. (The Honorable)	_		L	00081727	
4	Date 06/28/2025	 5 Full name of contributor DeLaCruz, Ermelo 6 Contributor address; City; S 	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
		Deer Park , TX 77536					
8	Principal occu Retired	pation / Job title (See Instruction	s)	9 Employer (See Instructions Retired	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/30/2025	DeSalvo, Daniel					\$25.00
		Contributor address; City; S	tate; Zip Code				
		Georgetown, TX 78633					
	Principal occu SCM	pation / Job title (See Instruction	s)	Employer (See Instructions ODFL	s) 		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/28/2025	DeVine, Gaylyn					\$25.00
		Contributor address; City; S Pearland, TX 77581	tate; Zip Code				
	Principal occu	I pation / Job title (See Instruction	s)	Employer (See Instructions	 S)		
	Owner			DeVine Promotions			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/30/2025	Del Papa, Larry Contributor address; City; S	tate; Zip Code				\$10,000.00
		Texas City, TX 77591					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	Beverage Di	stribution		Del Papa Distributing C	om	pany	
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/30/2025	Denson, Linda					\$100.00
		Contributor address; City; S Galveston, TX 77554	tate; Zip Code				
	Principal occu	pation / Job title (See Instruction	s) I	Employer (See Instructions	<u>L</u> s)		
	Real Estate	(220	,	self			

	MONET	ARY POLITICAL (SCHEDUI	LE A1			
	The Instruc	ction Guide explains hov	v to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 5/23 Rpt: 8/89	
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 06/27/2025	5 Full name of contributor Dunkin, Mack6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
_		Huntington, TX 75949	, ,	_		<u> </u>		
8	Principal occu Minister	pation / Job title (See Instructions	5)	9	Employer (See Instructions Church of Christ	5)		
	Date 06/28/2025	Full name of contributor Dunn, Forrest Contributor address; City; S)		Amount of Contribution (\$)	\$50.00
	Dringinal occu	Angleton, TX 77515 pation / Job title (See Instructions			Employer (See Instructions	·/		
	retired	pation / Job title (See Instructions	5)		retired	·)		
	Date 06/27/2025	Full name of contributor Edwards, Anne Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00
		Austin, TX 78746						
	Principal occu Realtor	pation / Job title (See Instructions	5)		Employer (See Instructions Self	s)		
	Date 06/30/2025	Full name of contributor Elliott, Timothy Contributor address; City; S Houston, TX 77081)		Amount of Contribution (\$)	\$500.00
	Principal occu Underwriter	pation / Job title (See Instructions	5)		Employer (See Instructions Elpha Secure LLC	s)		
	Date 06/29/2025	Full name of contributor Elswick, Roger Contributor address; City; S Houston, TX 77068	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20,000.00
	Principal occu Dealer	pation / Job title (See Instruction:	5)		Employer (See Instructions Community Auto	5)		
			,					

	MONET	ARY POLITICAL (CONTRIBUTIO	S		SCHEDUI	_E A1	
	The Instru	ction Guide explains hov	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 6/23 Rpt: 9/89	
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 06/26/2025	5 Full name of contributor Eltife Campaig, Kevin6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
		Tyler, TX 75702						
8	Principal occu real estate	pation / Job title (See Instructions	(3)	9	Employer (See Instructions Eltife Properties	5)		
	Date 06/26/2025	Full name of contributor Fine, thaddeus Contributor address; City; S					Amount of Contribution (\$)	\$55.00
	Principal occu	La Porte, TX 77571 pation / Job title (See Instructions	2)		Employer (See Instructions	=,		
	Sales	pation / Job title (See Instructions	5)		SolvChem	·)		
	Date 06/30/2025	Full name of contributor Fite, Ralph Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77042						
	Principal occu SVP Finance	pation / Job title (See Instructions	5)		Employer (See Instructions Welcome Group	s)		
	Date 06/28/2025	Full name of contributor Fly, Mary Contributor address; City; S Austin, TX 78730	out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	s)		
	Date 06/28/2025	Full name of contributor Folson, Charlotte Contributor address; City; S San Antonio, TX 78218	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Insurance aç	pation / Job title (See Instructions gent	5)		Employer (See Instructions Self employed	5)		

	MONEI	ARY POLITICAL (SCHEDU	LE A1		
	The Instru	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 7/23 Rpt: 10/89	
2	FILER NAME Middleton II,	David M. (The Honorable)			3	Filer ID (Ethics Commissi 00081727	on Filers)
4	Date 06/30/2025	5 Full name of contributorFord, Steve6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Self	Houston, TX 77055 pation / Job title (See Instructions	5)	9 Employer (See Instructions Steve Ford	<u> </u> s)		
	Date 06/30/2025	Full name of contributor Ford, Terri Contributor address; City; S Flint, TX 75762	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions	5)	Employer (See Instructions retired	5)		
	Date 06/26/2025	Full name of contributor Frederickson, Cathleen Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
	Deinsinal	Galveston, TX 77550		For all and a Construction			
	CEO	pation / Job title (See Instructions	5)	Employer (See Instructions Aunt Cathys Zinc	s) 		
	Date 06/30/2025	Full name of contributor Gore, Rex Contributor address; City; S Austin, TX 78709	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10,000.00
	Principal occu advisor	pation / Job title (See Instructions	5)	Employer (See Instructions CleanScapes	<u>s)</u>		
	Date 06/30/2025	Full name of contributor Gore, Rex Contributor address; City; S Austin, TX 78709	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$10,000.00
	Principal occu advisor	pation / Job title (See Instructions	5)	Employer (See Instructions CleanScapes	5)		

	MONET	ARY POLITICAL CONTRI	S		SCHEDULE	A1	
	The Instru	ction Guide explains how to compl	ete this form	n.	1	Total pages Schedule A1: Sch: 8/23 Rpt: 11/89	
2	FILER NAME Middleton II,	David M. (The Honorable)			3	Filer ID (Ethics Commission I 00081727	-ilers)
4	Date 06/28/2025	5 Full name of contributor out-of-state Grady, Sandra K	te PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
_		Goldthwaite, TX 76844	- Ia	5 1 (0 1 1 1			
8	retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/28/2025	Gregory, Anthony Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Business ow	ner		Cornerstone Automotive	,		
	Date 06/30/2025	Full name of contributor out-of-stat Griffin, Suezette Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Dringing! aggs	Pearland, TX 77581	-	Employer (Coo Instructions	<u></u>		
	Office Manag	pation / Job title (See Instructions) ger		Employer (See Instructions CE Resources LLC	»)		
	Date 06/30/2025	Gulf States Toyota Inc State PAC)		Amount of Contribution (\$) \$10	0,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/23/2025	HARDEMAN, Joy)		Amount of Contribution (\$) \$:	5,000.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions CAG Austin	5)		
			,				

	MONET	ARY POLITICAL (CONTRIBUTION	5		SCHEDU	LE A1	
	The Instru	ction Guide explains how	to complete this for	rm	ı.	1	Total pages Schedule A1: Sch: 9/23 Rpt: 12/89	
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commissi 00081727	on Filers)
4	Date 06/30/2025	5 Full name of contributor Hankamer, Emerson6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10,331.00
		Houston, TX 77056						
8	Principal occu Travel	pation / Job title (See Instructions	9		Employer (See Instructions Vacation Publications	i)		
	Date 06/27/2025	Full name of contributor Hardeman, Will Contributor address; City; Si	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions	s)	E	Employer (See Instructions	<u> </u>		
	Dealer	(000	,		Continental auto group	,		
	Date 06/30/2025	Full name of contributor Hargraves, Bert Contributor address; City; Si	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
		Hankamer, TX 77560	<u>_</u> _					
	Principal occu Investor	pation / Job title (See Instructions	(3)		Employer (See Instructions Self	5)		
	Date 06/27/2025	Full name of contributor Hayes, Jim Contributor address; City; Si Beaumont, TX 77706	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions	(3)		Employer (See Instructions retired	i)		
	Date 06/30/2025	Full name of contributor Henry, Irene Contributor address; City; Si Hitchcock, TX 77563	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occuretired	pation / Job title (See Instructions	(5)		Employer (See Instructions retired	<u>,</u>		

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 10/23 Rpt: 13/89	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Middleton II,	David M. (The Honorable)				00081727	
4	Date 06/30/2025	 5 Full name of contributor Hinsdale, Lowell 6 Contributor address; City; State 	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$15.00
		League City, TX 77573	ate, zip coue				
8	Principal occu retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025	Hisler, Rachal					\$100.00
		Contributor address; City; Sta	ate; Zip Code				
		Anahuac, TX 77514					
		pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Bookkeeper			Rachal Hisler	_		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	440 000 00
	06/27/2025	Hock, Stacy				:	\$10,000.00
		Contributor address; City; Sta	ate; zip Code				
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	<u> </u>		
	retired	(retired	,		
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Г	Amount of Contribution (\$)	
	06/24/2025	James B. Frank Campaigr Contributor address; City; Sta	n Fund			(,)	\$2,500.00
		Wichita Falls, TX 76308	1				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025	Jenkins, Jeff					\$1,000.00
		Contributor address; City; Sta	ate; Zip Code				
	Dringing! cos:	Winnie, TX 77665	, I	Employor (Soo Instructions	·/		
	retired	pation / Job title (See Instructions)	1	Employer (See Instructions retired)		

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 11/23 Rpt: 14/89	
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 06/28/2025	5 Full name of contributor Johnson, Juan	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$20.00
_		Fort Worth, TX 76116		_				
8	Principal occu retired	pation / Job title (See Instructions	3)	9	Employer (See Instructions retired	5)		
	Date 06/28/2025	Full name of contributor Kalmbach, Christine Contributor address; City; S)		Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77095 Ipation / Job title (See Instructions	3)		Employer (See Instructions	 s)		
	Realtor				Self-employed			
	Date 06/27/2025	Full name of contributor Koenig, Guy Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)		Amount of Contribution (\$)	\$2,066.00
		Katy, TX 77494						
	Principal occu Executive	pation / Job title (See Instructions	s)		Employer (See Instructions Friedkin Group	5)		
	Date 06/28/2025	Full name of contributor Leandra, Carole Contributor address; City; S Austin, TX 78717	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions	s)		Employer (See Instructions retired	5)		
	Date 06/26/2025	Full name of contributor Lewis, Roxana Contributor address; City; S Alvin, TX 77511	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions	s)		Employer (See Instructions retired	s)		

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 12/23 Rpt: 15/89	
2	FILER NAME Middleton II,	David M. (The Honorable)			3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 06/28/2025	5 Full name of contributor Lindsey, Christopher6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$25.00
_		Round Rock, TX 78665		5 1 (0 1 : :	Ĺ		
8	Attorney	pation / Job title (See Instructions) [9	Employer (See Instructions Texas Attorney General			
	Date 06/29/2025	Full name of contributor Long, Jamie Contributor address; City; St)		Amount of Contribution (\$)	\$50.00
	Drincinal occu	Mc Queeney, TX 78123 pation / Job title (See Instructions		Employer (See Instructions	-, 		
	retired	pation / Job title (See Instructions		retired	>)		
	Date 06/30/2025	Full name of contributor Lonsdale, Joe Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10,000.00
		Austin, TX 78704					
	Principal occu Partner	pation / Job title (See Instructions		Employer (See Instructions 8VC	5)		
	Date 06/28/2025	Full name of contributor Lucas, Susan Contributor address; City; St Bryan, TX 77808	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$15.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired	5)		
	Date 06/30/2025	Full name of contributor Magill, Sandra Contributor address; City; St Beach City, TX 77523	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions		Employer (See Instructions retired	S)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDULE A1
	The Instruc	ction Guide explains hov	v to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 13/23 Rpt: 16/89
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission Filers) 00081727
4	Date 06/28/2025	5 Full name of contributor Marcellus, Katherine	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$5.00
_		Naples, FL 34120		_			
8	retired	pation / Job title (See Instructions	5)	9	Employer (See Instructions retired	5)	
	Date 06/30/2025	Full name of contributor McGill, John Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$) \$10,331.00
	Principal occu	Cypress, TX 77429 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> s)	
	Toyota Deale		,		Self	,	
	Date 06/24/2025	Full name of contributor McKinney, Zach Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code				Amount of Contribution (\$) \$50.00
		Damon, TX 77430					
	Principal occu Engineer	pation / Job title (See Instructions	5)		Employer (See Instructions Chevron	5)	
	Date 06/28/2025	Full name of contributor Morrison, Sherrie Contributor address; City; S El Paso, TX 79934					Amount of Contribution (\$) \$100.00
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	5)	
	Date 06/26/2025	Full name of contributor Nurdin, Donald Contributor address; City; S Galveston, TX 77554	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$) \$25.00
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	s)	

	MONEI	ARY POLITICAL C		SCHEDUL	E A1		
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 14/23 Rpt: 17/89	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Middleton II,	David M. (The Honorable)				00081727	
4	Date 06/28/2025	5 Full name of contributorOdom, Lisa6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$15.00
8	Principal occu	Tyler, TX 75701 pation / Job title (See Instructions)	9	Employer (See Instructions)		
•	RN	panen, oez ane (eee mendenene)		Aetna	,		
	Date 06/27/2025	Full name of contributor Old, Carter Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)		Employer (See Instructions	<u>, </u>		
	Executive	pation / 300 title (See Instructions)		Lyte Fiber, LLC)		
	Date	Full name of contributor	7	2,10 : 100., 220		Amount of Contribution (\$)	
	06/26/2025	Paxton, Christopher Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$25.00
		The Woodlands, TX 77382	<u>!</u>				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Attorney			Dupuis Law Firm			
	Date 06/27/2025	Full name of contributor Poling MD, Matt Contributor address; City; Sta College Station, TX 77840				Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Baylor Scott and White)		
	Date 06/28/2025	Full name of contributor Polson, Tami Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$15.00
		pation / Job title (See Instructions) cation Coordinator		Employer (See Instructions Nisd)		
			•				

	MONEI	ARY POLITICAL (CONTRIBUTIO)N:	5		SCHEDULE A	A1
	The Instru	ction Guide explains how	to complete this fo	orm	1.	1	Total pages Schedule A1: Sch: 15/23 Rpt: 18/89	
2	FILER NAME					3	Filer ID (Ethics Commission Filer	ers)
	Middleton II,	David M. (The Honorable)					00081727	
4	Date 06/30/2025	5 Full name of contributorPopolo, Joe6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$10,0	00.00
		Dallas, TX 75225						
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Founder				Charles Potomac Capita	ıl, l	LC	
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/26/2025	Poskey, Grant	_ ` _					\$25.00
		Contributor address; City; St	ate: Zin Code					
			a.c, <u>-</u> .p					
		Texas City, TX 77591						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	none				none			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025	Pyle, Edward	_		_		\$:	100.00
		Contributor address; City; St	ate; Zip Code					
		La Marque, TX 77568						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	retired				retired			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/28/2025	RICHARDS, RONALD					;	\$15.00
		Contributor address; City; St	ate; Zip Code					
		Clear Lake Shores, TX 77	565					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	retired				retired			
	Date	Full name of contributor	out-of-state PAC (ID#:				Amount of Contribution (\$)	
	06/28/2025	Redwine, Denis					:	\$25.00
		Contributor address; City; St	ate; Zip Code					
		La Marque, TX 77568						
		pation / Job title (See Instructions)		Employer (See Instructions)		
	retired				retired			

	MONEI	ARY POLITICAL (SCHEDUL	E A1			
	The Instru	ction Guide explains hov	v to complete this fo	orr	m.	1	Total pages Schedule A1: Sch: 16/23 Rpt: 19/89	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
	Middleton II,	David M. (The Honorable)					00081727	
4	Date 06/28/2025	5 Full name of contributor Richards, Della6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)	7	Amount of Contribution (\$)	\$5.00
		Kirbyville, TX 75956	,					
8	retired	pation / Job title (See Instruction:	5)	9	Employer (See Instructions retired			
	Date 06/26/2025	Full name of contributor Robertson, PAULA A Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00
		Kemah, TX 77565				<u> </u>		
	Caregiver	pation / Job title (See Instructions	5)		Employer (See Instructions None	5)		
	Date 06/25/2025	Full name of contributor Robinson, Beth Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
		Friendswood, TX 77546						
	Principal occu Business Ov	pation / Job title (See Instructions	5)		Employer (See Instructions Optometrist	5)		
	Date 06/30/2025	Full name of contributor Rosenberger, Gregory Contributor address; City; S Beaumont, TX 77708	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instruction:	5)		Employer (See Instructions retired	5)		
	Date 06/27/2025	Full name of contributor Rowland, Stephanie Contributor address; City; S Wallisville, TX 77597	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
	Principal occu Manager	pation / Job title (See Instruction:	5)		Employer (See Instructions Texas White Tiger Taek		ndo	

	MONEI	DNETARY POLITICAL CONTRIBUTIONS					SCHEDULI	A1
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 17/23 Rpt: 20/89	
2	FILER NAME					3	Filer ID (Ethics Commission	Filers)
		David M. (The Honorable)	_				00081727	
4	Date 06/27/2025	5 Full name of contributor Rowland, Stephen6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
		Wallisville, TX 77597						
8	Principal occu	pation / Job title (See Instructions	5)	9	Employer (See Instructions	5)		
	Teacher				San Jacinto College			
	Date 06/28/2025	Full name of contributor SPENCER, PHILIP Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$15.00
		Dallas, TX 75219						
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	<u></u>		
	retired				retired			
	Date 06/29/2025	Full name of contributor Sasser, Milton Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
		Houston, TX 77008						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Consultant				Wood Mackenzie			
	Date 06/28/2025	Full name of contributor Schindler, Margaret Contributor address; City; S Galveston, TX 77550	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$15.00
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	<u>(</u>		
	Date 06/28/2025	Full name of contributor Schoolcraft, Alan Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu	Mcqueeney, TX 78123 pation / Job title (See Instructions	5)		Employer (See Instructions) 		
	CEO	pansii, oos uuo (ooo insuudidik	-1		TXdocs	·)		

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains hov	to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 18/23 Rpt: 21/89	
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	n Filers)
4	Date 06/29/2025	5 Full name of contributor Scott, Janice 6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$10.00
		Desoto, TX 75115						
8	Principal occu retired	pation / Job title (See Instructions	s)	9	Employer (See Instructions retired	5)		
	Date 06/28/2025	Full name of contributor Sena, Richard Contributor address; City; S)		Amount of Contribution (\$)	\$25.00
	Dringing agg	Boerne, TX 78006	- N		Employer (See Instructions	<u></u>		
	Insurance Aç	pation / Job title (See Instructions gent	o)		Employer (See Instructions Self	»)		
	Date 06/30/2025	Full name of contributor Sheridan, Jonette Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$15.00
		Pearland, TX 77581						
	Principal occu retired	pation / Job title (See Instructions	s)		Employer (See Instructions retired	5)		
	Date 06/28/2025	Full name of contributor Sherlock, Colleen Contributor address; City; S Houston, TX 77019)		Amount of Contribution (\$)	\$100.00
	Principal occu Real estate	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>I</u> 5)		
	Date 06/27/2025	Full name of contributor Smith, Helen Contributor address; City; S Baytown, TX 77523	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	s)		

	MONET	ARY POLITICAL (SCHEDUI	SCHEDULE A1			
	The Instru	ction Guide explains hov	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 19/23 Rpt: 22/89	
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 06/26/2025	5 Full name of contributor Sparks, Marian	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$5.00
_		Baytown, TX 77520		_		_		
8	Principal occu retired	pation / Job title (See Instructions	s)	9	Employer (See Instructions retired	5)		
	Date 06/28/2025	Full name of contributor Stalter, Sally Contributor address; City; S)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Huntsville, TX 77320 pation / Job title (See Instructions	6)		Employer (See Instructions	 s)		
	retired				retired			
	Date 06/26/2025	Full name of contributor SucreVail, Margaret Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)	•	Amount of Contribution (\$)	\$100.00
		Houston, TX 77062						
	Principal occu Wealth Advis	pation / Job title (See Instructions	5)		Employer (See Instructions Sucre-Vail Wealth Advis	•	S	
	Date 06/30/2025	Full name of contributor TARGA Resources Corp Contributor address; City; S Houston, TX 77002)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 06/28/2025	Full name of contributor Taylor, Melba Contributor address; City; S Pearland, TX 77584	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$15.00
	Principal occu retired	pation / Job title (See Instructions	5)		Employer (See Instructions retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/23 Rpt: 23/89			
2	FILER NAME Middleton II,	David M. (The Honorable)		3	Filer ID (Ethics Commission 00081727	on Filers)		
4	Date 06/23/2025	Full name of contributor		7	Amount of Contribution (\$)	\$10,000.00		
_		Austin, TX 78701						
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))				
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Texas Optometic PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00		
	Principal occu	Austin, TX 78705 pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID#:_ Thompson, Linda Contributor address; City; State; Zip Code Wallisville, TX 77597			Amount of Contribution (\$)	\$15.00		
	Principal occuretired	pation / Job title (See Instructions)	Employer (See Instructions retired)				
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Tidwell, Russell Contributor address; City; State; Zip Code League City, TX 77574			Amount of Contribution (\$)	\$250.00		
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired)				
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Tidwell, Russell Contributor address; City; State; Zip Code League City, TX 77574			Amount of Contribution (\$)	\$250.00		
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired)				

	MONET	ARY POLITICAL C		SCHEDUL	E A1		
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 21/23 Rpt: 24/89	
2	FILER NAME Middleton II,	David M. (The Honorable)			3	Filer ID (Ethics Commission 00081727	n Filers)
4	Date 06/28/2025	5 Full name of contributor [Tipton, Guy6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$5.00
_	<u> </u>	Lavon, TX 75166		5 1 (0 1 : "			
8	retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
	Date 06/28/2025	Full name of contributor Vaughan, Richard Contributor address; City; Sta				Amount of Contribution (\$)	\$100.00
	Principal occu	Pearland, TX 77584 pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/27/2025	Full name of contributor [Von Schmidt, Charles Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Livingston, TX 77351 pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Developer R	ancher		Waterstone Developmen	nt (Group Von Schmidt Land a	nd Cattle
	Date 06/28/2025	Full name of contributor Wall, Dave Contributor address; City; Sta Seabrook, TX 77586	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$15.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	()		
	Date 06/28/2025	Full name of contributor [Wallace, Bonnie Contributor address; City; Sta Llano, TX 78643	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	()		

	MONET	ARY POLITICAL CON	SCHEDULE A1				
	The Instruc	ction Guide explains how to c	1	Total pages Schedule A1: Sch: 22/23 Rpt: 25/89			
2	FILER NAME Middleton II,	David M. (The Honorable)		3	Filer ID (Ethics Commission 00081727	on Filers)	
4	Date 06/27/2025	Date 5 Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$)	\$25.00
8	Principal occu	Stowell, TX 77661 pation / Job title (See Instructions)	l ₉	Employer (See Instructions) 		
	retired	pation 7 305 title (See Instructions)		retired	')		
	Date Full name of contributor out-of-state PAC (ID#:) 06/23/2025 Weekley, Richard Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$5,000.00
	Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instruction						
	Self Employe	ed		Real Estate Developer			
Date Full name of contributor out-of-state PAC (ID#: 06/30/2025 Wendt, Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$15.00		
		Galveston, TX 77554	1				
	retired	pation / Job title (See Instructions)		Employer (See Instructions retired	i) 		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$15.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions) State of Texas Self				Employer (See Instructions Self	<u> </u>		
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Willcox, Pudge Contributor address; City; State; Zip Code Anahuac, TX 77514			Amount of Contribution (\$)	\$25.00		
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
			•				

The Instruction Guide explains now to complete this form. 2 FILER NAME Middleton II, David M. (The Honorable) 4 Date O6/28/2025	Total pages Schedule A1: Sch: 23/23 Rpt: 26/89 Filer ID (Ethics Commission Filers) 00081727 Amount of Contribution (\$) \$5.00
Middleton II, David M. (The Honorable) 4 Date	00081727 Amount of Contribution (\$)
06/28/2025 Wilson, Meg 6 Contributor address; City; State; Zip Code Austin, TX 78704 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	

PLEDG	SED CONTRIBUT	IONS				SCHEDULE B			
The	Instruction Guide expla	te this form.	1	Total pages Sched Sch: 1/1 Rpt: 27					
2 FILER NAMI Middleton II	E I, David M. (The Honorable)		3	Filer ID (Ethic	cs Commission Filers)				
4 TOTAL O	F UNITEMIZED PLEDGE	ES			\$	0.00			
5 Date	6 Full name of pledgor Bennett , Monty J. 7 Pledgor Address;	out-of-state PAC (ID#:_		8	Amount of pledge (\$) \$25,000.00	9 In-kind description (If applicable)			
06/30/2025	Dallas, TX 75254			 [Check if travel outsi	de of Texas. Complete Schedule T.			
10 Principal occ Real Estate	T cupation / Job title (See Instruct e	ions)	11 Employer (See Instru Chairman & CEO		ons)				
5 Date 6 Full name of pledgorout-of-state PAC (ID#:_ Hunt , Woody 7 Pledgor Address; City; State; Zip Code				8	Amount of pledge (\$) \$10,000.00	9 In-kind description (If applicable)			
06/30/2025	El Paso , TX 79922				Check if travel outsi	de of Texas. Complete Schedule T.			
10 Principal occ Chairman &	Cupation / Job title (See Instruct & CEO	ions)	11 Employer (See Instru Business Owner						

LOANS				SCHEDULE E					
The Instruction	The Instruction Guide explains how to complete this form. 1 Total pa								
2 FILER NAME Middleton II, Da	vid M. (The Honorable)		3 Filer ID 000817	(Ethics Commission Filers)					
4 TOTAL OF UN	NITEMIZED LOANS			\$					
5 Date of loan 06/30/2025	7 Name of lender	C (ID#:)	9 Loan Amount (\$) \$10,000,000.00					
6 Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate					
No	Galveston , TX 77550			11 Maturity Date 12/31/2025					
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions Middleton Oil Company	•						
14 Description of Col	lateral	15 Check if personal funds we		into political account (See Instructions)					
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)					
X not applicable	18 Guarantor address; City; State;	Zip Code							
20 Principal occupation	on	21 Employer (See Instructions	5)						

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: 1/57 Rpt: 29/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	03/25/2025	Bay Area Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.00	PO Box 58103
		Webster, TX 77598
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 Dues & Subscriptions
		Dues & Subscriptions
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	Data	
	Date	Payee name
	01/07/2025	Bennett, Kaleb
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	1389 Quail Run Dr
		Troy, TX 76579
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expenses.
		Check if Austin, TX, officeholder living expense Wages & Salaries
		wages a salanes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	v
_	Data	David and the second se
	Date	Payee name
	02/06/2025	Bennett, Kaleb
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	1389 Quail Run Dr
		Troy, TX 76579
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Wages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma 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/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form				OTHER (enter a category not listed above)			
·		The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission File	ers)
	Sch: 2/57 Rpt: 30/89	Middleton II	, David M. (The Ho	norable)				00081727		
4	Date	5 Payee name								
	03/10/2025	Bennett, Ka	lleb							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$500.00	1389 Quail	Run Dr							
		Troy, TX 76	579							
8	PURPOSE	(a) Category (s	ee Categories listed at the top	on of this schedule)	(b)	Description				
	OF		ages/Contract Labor		l` ´		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					Check if Austin	, TX,	officeholder living	g expense	
						Wages & Sal	arie	es		
9	Complete ONLY if direct		ceholder name	Office sou	ight			Office h	eld	
	expenditure to benefit C/O	1								
	Date	Payee name								
	04/07/2025	Bennett, Ka	lleb							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$500.00	1389 Quail	Run Dr							
		Troy, TX 76	579							
	PURPOSE	(a) Category (s	ee Categories listed at the top	o of this schodulo)	(b)	Description				
	OF		ages/Contract Labor		l` ´		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					Check if Austin	, TX,	officeholder living	g expense	
						Wages & Sal	arie	es		
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ıght			Office h	eld	
	experiorarie to berieff C/Or	1								
	Date	Payee name								
	05/06/2025	Bennett, Ka	lleb							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$500.00	1389 Quail	Run Dr							
		Troy, TX 76	579							
	PURPOSE	(a) Category (S	ee Categories listed at the top	o of this schedule)	(b)	Description				
	OF EXPENDITURE		ages/Contract Labor			ш			plete Schedule T.	
	EXPENDITORE					ш		officeholder living	g expense	
						Wages & Sal	arie	es		
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office sou	ıght			Office h	eld	
	oxponuncio to pononi Orom									

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)
	Sch: 3/57 Rpt: 31/89	Middleton II, David M. (The Honorable) 00081727	
4	Date	5 Payee name	
	06/03/2025	Bennett, Kaleb	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	1389 Quail Run Dr	
		Troy, TX 76579	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Wages & Salaries	
		wages a salaires	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	06/30/2025	Bennett, Kaleb	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1389 Quail Run Dr	
		Troy, TX 76579	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Avetin TV, officeholder if the proposes	
		Check if Austin, TX, officeholder living expense Wages & Salaries	
		Magos a Salanos	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	06/30/2025	Berry Communications	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15,000.00	1014 W Milton St	
		Austin, TX 78704	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Consulting Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Strategy Consulting	
	Operation ONE V. C. P.	Out tile to (Office helden and a constitution of the constitution	
	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)
g Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica 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: 4/57 Rpt: 32/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/07/2025	Big Horn BBQ Manvel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$33.01	20211 Hwy 6
L		Manvel, TX 77578
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
		Meal for Meeting
		mode for modeling
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Date	Payee name
	06/28/2025	CampaignHQ
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$31,041.63	109 W Front St
		Brooklyn, IA 52211
	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 Text Messages
		Tok Meddaged
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	06/30/2025	CampaignHQ
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 109 W Front St
	φ500.00	109 W FIORE SE
		B 11 14 F2244
		Brooklyn, IA 52211
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Text Messages
		1 OAL MOSSAGES
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/57 Rpt: 33/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/07/2025	Caruso, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,750.00	14606 Sweetwater Dr
		Baytown, TX 77523
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Wages & Salaries
		wages & Salanes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
\vdash	Date	Payee name
	02/05/2025	Caruso, Ryan
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,750.00	14606 Sweetwater Dr
		Baytown, TX 77523
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expenses.
		Check if Austin, TX, officeholder living expense Wages & Salaries
		Wages a Salaties
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	03/07/2025	Payee name Caruso, Ryan
		-
	Amount (\$)	Payee address; City; State; Zip Code 14606 Sweetwater Dr
	\$1,750.00	14000 Sweetwater Di
		Baytown, TX 77523
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages & Salaries
		1.3390 3. 03.3.100
	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 Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Валкіпд Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services						t				
Credit Card Payment				The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(1	Ethics Commission Filer	s)
	Sch: 6/57 Rpt: 34/89		Middleton II	, David M. (The H	onorable)				1	0008172	27		
4	Date	5	Payee name										
	04/07/2025		Caruso, Rya	an									
_		-			Ctata	Zin C	nd c						
6	Amount (\$)	′	Payee addres		State;	Zip Co	ue						
	\$1,750.00		14606 Swee	etwater Dr									
			Baytown, T	X 77523									
8	PURPOSE	(a)	Category (S4	ee Categories listed at the t	ton of this scho	dula)	(b)	Description					
	OF	<u> </u> `		ages/Contract Lab		uuic)	<u> </u>	Check if travel	outsi	de of Texas.	Complet	te Schedule T.	
	EXPENDITURE			5				Check if Austin			living ex	pense	
								Wages & Sal	larie	es			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	O1	ffice sou	ıght			Offic	e held		
	Date		Payee name										
	05/08/2025		Caruso, Rya	an									
	Amount (\$)	\vdash	Payee addres		State:	Zin Co	nde						
	\$1,750.00	Payee address; City; State; Zip Code 14606 Sweetwater Dr											
	Φ1,750.00		14000 SWE	Elwalei Di									
			Baytown, T	X 77523									
	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this sche	dule)	(b)	Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor				Check if travel outside of Texas. Complete Schedule T.							
	Za Enditone		-				Check if Austin, TX, officeholder living expense						
								Wages & Sal	arie	es			
	Complete ONLY if direct		Candidate/Offi	ceholder name	Ot	ffice sou	ıght			Offic	e held		
	expenditure to benefit C/O	7											
	Date		Payee name										
	06/09/2025		Caruso, Rya	an									
\vdash		\vdash	Payee addres		Ctoto	Zin Co	nde						
	Amount (\$)		,		Siale;	Zip Co	Jue						
	\$1,750.00		14606 Swee	etwater Df									
			Baytown, T	X 77523									
	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this sche	dule)	(b)	Description					
	OF EXPENDITURE		•	ages/Contract Lab	•	-		Check if travel					
	EVENDLICKE							Check if Austin			living ex	pense	
								Wages & Sal	larie	es			
L		L					L						
	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice sou	ıght			Offic	e held		
	expenditure to benefit C/OI	Н											

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/57 Rpt: 35/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/07/2025	Caruso, Ryan
6	Amount (\$) \$28.14	7 Payee address; City; State; Zip Code 14606 Sweetwater Dr
		Baytown, TX 77523
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	03/25/2025	Caruso, Ryan
	Amount (\$) \$1,038.90	Payee address; City; State; Zip Code 14606 Sweetwater Dr
		Baytown, TX 77523
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	06/30/2025	Caruso, Ryan
	Amount (\$) \$312.83	Payee address; City; State; Zip Code 14606 Sweetwater Dr
		Baytown, TX 77523
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/57 Rpt: 36/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/09/2025	Clear Creek Republican Women
6	Amount (\$) \$350.00	7 Payee address; City; State; Zip Code PO Box 2171 League City, TX 77574
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense Event Sponsorship
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/09/2025	Clear Creek Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	PO Box 2171
		League City, TX 77574
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event Sponsorship
		Event Sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/18/2025	Clear Creek Republican Women
-	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	PO Box 2171
	Φ23.00	PO BOX 21/1
		League City, TX 77574
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Dues & Subscriptions
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rertising 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 Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/57 Rpt: 37/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	06/05/2025	Coastal Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.57	1827 Strand St
		Galveston, TX 77550
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
		Galveston Island Pachyderms Luncheon
		Calveston lolana i acrigacimo zanericon
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/06/2025	Coastal Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$22.57	1827 Strand St
		Galveston, TX 77550
	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
		Pachyderm Luncheon
		a de ly de la
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	04/03/2025	Coastal Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.52	1827 Strand St
		Galveston, TX 77550
	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
		Pachyderm Luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 10/57 Rpt: 38/89	2 FILER NAME Middleton II, David M. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081727
4	Date 06/30/2025	5 Payee name Drogin Group
	Amount (\$) \$13,500.00	7 Payee address; City; State; Zip Code 6705 W Hwy 290 Suite 50281 Austin, TX 78735
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Communications Consulting
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 01/09/2025	Payee name FedEx
	Amount (\$) \$52.93	Payee address; City; State; Zip Code 936 South Shady Grove Rd Memphis, TN 38120
	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 Shipping
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/03/2025	Payee name FedEx
	Amount (\$) \$7.11	Payee address; City; State; Zip Code 936 South Shady Grove Rd
		Memphis, TN 38120
	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 Shipping
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memori nmittee Legal Services			se s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed abo	ove)
	Credit Card Payment		The Instruction	Guide explains how to co	omple	ete this form.				
1	Total pages Schedule F1:	2					3	Filer ID	(Ethics Commission	on Filers)
	Sch: 11/57 Rpt: 39/89		Middleton II, David M. (Th	e Honorable)				00081727		
4	Date	5	Payee name							
	02/13/2025		FedEx							
6	Amount (\$)	7	Payee address; City;	State; Zip Co	ode					
	\$54.11		936 South Shady Grove F	Rd						
			Memphis, TN 38120							
8	PURPOSE OF	(a)	Category (See Categories listed a		(b)	Description				
	EXPENDITURE		Office Overhead/Rental E	xpense		=		officeholder living	plete Schedule T. expense	
						Shipping		•	•	
9	Complete ONLY if direct		andidate/Officeholder name	Office sou	ught			Office he	eld	
	expenditure to benefit C/OI	H								
	Date		Payee name							
	02/18/2025		FedEx							
	Amount (\$)		Payee address; City;	State; Zip Co	ode					
	\$61.89		936 South Shady Grove F	Rd						
			Memphis, TN 38120							
	PURPOSE OF	(a)	Category (See Categories listed a		(b)	Description		d4.T O	olaka Oaloadula T	
	EXPENDITURE		Office Overhead/Rental E	xpense				officeholder living	plete Schedule T. g expense	
						Shipping				
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ught			Office he	eld	
	experialiture to benefit C/OI	_								
	Date		Payee name							
	03/06/2025		FedEx							
	Amount (\$)		Payee address; City;	State; Zip Co	ode					
	\$88.93		936 South Shady Grove F	Ra						
			Mamahia TN 20120							
	DUDDOS.	_	Memphis, TN 38120		1					
	PURPOSE OF	(a)	Category (See Categories listed a Office Overhead/Rental E		(b)	Description Check if travel o	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Office Overflead/Refital E	xperise				officeholder living	•	
						Shipping				
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ught			Office he	eld	
		•								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Le	t/Awards/Memorials Ex gal Services ne Instruction Guid	Si		ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	12			-		_		3	Filer ID	(Ethics Commission Filers)	,
•	Sch: 12/57 Rpt: 40/89			avid M. (The H	lonorable)					00081727	(=3.100 001.11110010111 11010)	'
L	·	L		aviu ivi. (THE H	oniorable)					00001121		
4	Date	5	Payee name									
	03/20/2025		FedEx									
6	Amount (\$)	7	Payee address;	City;	State; Z	Zip Cod	de					
	\$54.11		936 South Sha	ady Grove Rd								
			Momphie TN	20120								
			Memphis, TN	30120								
8	PURPOSE OF	(a)		Categories listed at the		ıle)	(b)	Description				
	EXPENDITURE		Office Overhe	ad/Rental Expe	ense			=			plete Schedule T.	
								—	, IX,	officeholder living	g expense	
								Shipping				
9	Complete ONLY if direct		Candidate/Office	nolder name	Offic	ce soug	ght			Office he	eld	
L	expenditure to benefit C/OI	П										
	Date		Payee name									
	06/13/2025		FedEx									
\vdash	Amount (\$)	\vdash	Payee address;	City;	State; Z	Zip Cor	de					
	\$179.79		936 South Sha	•	- Ciaio, 2							
	Ψ113.13		550 50util 511	ady Glove Ru								
L		L	Memphis, TN	38120								
	PURPOSE	(a)	Category (See (Categories listed at the	top of this schedu	ıle)	(b)	Description				
	OF EXPENDITURE			ad/Rental Expe				-			plete Schedule T.	
	LAI LINDITORL							_	, TX,	officeholder living	g expense	
								Shipping				
L												
	Complete ONLY if direct		Candidate/Office	nolder name	Offic	ce soug	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	06/16/2025		FedEx									
_	Amount (\$)	\vdash		City:	State: 7	Zin Coo	de					
			Payee address;		State; Z	rih COC	JE					
	\$56.36		936 South Sha	auy Giove Rd								
			Memphis, TN	38120								
	PURPOSE	(a)	Category (See (Categories listed at the	top of this schedu	ıle)	(b)	Description				
	OF EVDENDITUDE			ad/Rental Expe					outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			•					, TX,	officeholder living	g expense	
								Shipping				
L												
	Complete ONLY if direct		Candidate/Office	nolder name	Offic	ce soug	ght			Office he	eld	
	expenditure to benefit C/OI	Н										

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/57 Rpt: 41/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	06/23/2025	FedEx
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.03	936 South Shady Grove Rd
		Memphis, TN 38120
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Shipping
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	04/08/2025	Galveston County Republican Party
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1401 W League City Pkwy
	Ψ230.00	1401 W League City Fkwy
		League City, TX 77573
	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 Event Sponsorship
		Event Sponsorship
L	Commiste ONII V if diseast	Condidate/Officeholder neme
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
┕		
	Date	Payee name
	06/25/2025	Galveston Regional Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	2228 Mechanic St
		#101
		Galveston, TX 77550
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Event Sponsorship
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1

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		mmittee	Legal Services The Instruction Gi	·		Vages	/Contract Labor		OTHER (enter	a category not listed a	above)
┝	T-+-1 O-b1-1- F1.	_	EU ED MANA						_	Ell ID	/Eth: 0	-i Fil)
l∸	Total pages Schedule F1:	-							3	Filer ID	(Ethics Commis	ssion Filers)
l	Sch: 14/57 Rpt: 42/89		Middleton I	I, David M. (The	Honorable)					00081727		
4	Date	5	Payee name									
	06/24/2025			Republican Won	nen							
ᆫ		<u> </u>										
6	Amount (\$)	7	Payee addre		State;	Zip Co	de					
	\$3,500.00		908 Layfair	Place								
			Friendswoo	d, TX 77546								
ᆫ		╙										
8	PURPOSE	(a)	Category (S	ee Categories listed at t	he top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense							mplete Schedule T.	
	EXI ENDITORE							_		officeholder livir	ng expense	
								Event Sponso	ors	hip		
l												
9	Complete ONLY if direct	<u> </u>	Candidate/Off	ceholder name	0	Office sou	ght			Office h	neld	
	expenditure to benefit C/OI	Н					•					
⊨		_										
l	Date		Payee name									
l	04/08/2025		Galveston I	Republican Won	nen							
H	Amount (\$)		Payee addre	ss; City;	State:	Zip Co	de					
l	\$45.00		908 Layfair		,	•						
l	Ψ43.00		300 Laylan	Tacc								
l			Friendswoo	d, TX 77546								
Г	PURPOSE	(a)	Category (s	ee Categories listed at t	ha tan of this sahe	adula)	(b)	Description				
	OF	l`	Fees	ee Calegories listed at t	rie top or triis scrie	euuie)	` ´	_	outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE		1 003					=		officeholder livir		
								Dues & Subs	cri	otions		
l												
⊢	Commission ONII V if divers	<u> </u>	Condidate/Off			\#:				Office le	- alal	
	Complete ONLY if direct expenditure to benefit C/OI		Januluale/On	ceholder name	U	Office sou	gnı			Office h	ieiu	
L	experientare to benefit e/ei	_										
	Date		Payee name									
l	01/15/2025		•	Republican Won	nen							
L												
	Amount (\$)		Payee addre		State;	Zip Co	ae					
l	\$30.00		908 Layfair	Place								
l			Friendswoo	d, TX 77546								
┡		<u> </u>										
	PURPOSE OF	(a)	,	ee Categories listed at t	he top of this sche	edule)	(b)	Description				
	EXPENDITURE		Fees					브			mplete Schedule T.	
									, TX,	officeholder livir	ng expense	
l								Event Ticket				
L		L										
	Complete ONLY if direct		Candidate/Off	ceholder name	0	Office sou	ght			Office h	neld	_
l	expenditure to benefit C/OI	Н										
\vdash												
l												
1												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g 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
Leal 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: 15/57 Rpt: 43/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	03/06/2025	Galveston Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	908 Layfair Place
		Friendswood, TX 77546
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 Event Ticket
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/29/2025	Galveston Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	908 Layfair Place
		Friendswood, TX 77546
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Event Ticket
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
_	Date	Davisa nama
	04/22/2025	Payee name Galveston Seafarers Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	221 20th St
	Ψ13.00	221 2011 31
		EEE, TX 77550
	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
		Event Ticket
	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 Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District ract Labor OTHER (enter a category not listed above)
	Credit Card Fayment	The Instruction Guide explains how to complete th	is form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/57 Rpt: 44/89	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	•
	01/21/2025	Google	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
٠	\$42.08	1600 Amphitheatre Parkway	
	Ψ-12.00	1000 / implimiteduct answay	
		Mountain View CA 04202	
		Mountain View, CA 94303	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Des	
	EXPENDITURE	ellice everneda/rentai Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			es & Subscriptions
			oo a casconphone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office Held
	Date	Payee name	
	01/21/2025	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$67.57	1600 Amphitheatre Parkway	
		Mountain View, CA 94303	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scrintion
	OF		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		Due	es & Subscriptions
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	02/03/2025	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$23.16	1600 Amphitheatre Parkway	
		Mountain View, CA 94303	
	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Des	Chiption Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overficacintental Expense	Check if Austin, TX, officeholder living expense
			es & Subscriptions
	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 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/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/57 Rpt: 45/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	03/03/2025	Google
6	Amount (\$) \$65.24	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway
		Mountain View, CA 94303
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 Dues & Subscriptions
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/09/2025	Google
	Amount (\$) \$17.40	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway
		Mountain View, CA 94303
	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 Dues & Subscriptions
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/10/2025	Google
	Amount (\$) \$65.24	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway
		Mountain View, CA 94303
	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 Dues & Subscriptions
	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 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: 18/57 Rpt: 46/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	05/01/2025	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.61	1600 Amphitheatre Parkway
		Mountain View, CA 94303
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 Dues & Subscriptions
		Dues & Subscriptions
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	06/02/2025	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.59	1600 Amphitheatre Parkway
		Mountain View, CA 94303
	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 Dues & Subscriptions
		Dues & Subscriptions
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 04/29/2025	Payee name Croster Hauston Council of Fodoration of Donublican Women
		Greater Houston Council of Federation of Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	7941 Katy Freeway
		#272
		Houston, TX 77024
	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
		Event Sponsorship
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

Fees

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 19/57 Rpt: 47/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	03/17/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$132.47	1000 E 41st
		Austin, TX 78751
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/06/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$134.65	1000 E 41st
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/17/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.16	1000 E 41st
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Cinec Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (expense extenses and listed above)

	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: 20/57 Rpt: 48/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	02/12/2025	Herrell, Andrew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages & Salaries
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/12/2025	Herrell, Andrew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/13/2025	Herrell, Andrew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	7

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 21/57 Rpt: 49/89	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	•
	04/08/2025	Herrell, Andrew	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	1912 Whitaker Dr	
		Austin, TX 78754	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ľ	OF		el outside of Texas. Complete Schedule T.
l	EXPENDITURE		in, TX, officeholder living expense
		Wages & Sa	alaries
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	
Г	Date	Payee name	
l	05/06/2025	Herrell, Andrew	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1912 Whitaker Dr	
l			
l		Austin, TX 78754	
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	· · · · · · · · · · · · · · · · · · ·	el outside of Texas. Complete Schedule T.
l	EXPENDITURE		in, TX, officeholder living expense
l		Wages & Sa	alaries
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	
	Date	Payee name	
l	06/20/2025	Herrell, Andrew	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1912 Whitaker Dr	
l			
l		Austin, TX 78754	
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		el outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Aust	in, TX, officeholder living expense
l		Wages & Sa	alaries
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1 	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 22/57 Rpt: 50/89	Middleton II, David M. (The Honorable) 00081727	
4	Date	5 Payee name	
	02/25/2025	Homewood Suites by Hilton Parking	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$51.96	78 East Ave	
		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 Brazoria County Days Parking	
		Brazona County Bays Farking	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	expenditure to benefit C/OI		
⊨	Date	Payee name	=
	02/13/2025	Homewood Suites by Hilton Parking	
┡			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$103.92	78 East Ave	
L		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 Clear Lake Leadership Parking	
		Clour Land Loadership Farming	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
H	Date	Payee name	=
	03/28/2025	Houston Chronicle	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$287.52	4747 Southwest Fwy	
	Ψ201.02	4141 Goddinesti Ny	
		Houston, TX 77027	
L	PURPOSE	I and	_
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Legislative Public Notice	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
Г			_
ı			

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 23/57 Rpt: 51/89	Middleton II, David M. (The Honorable) 00081727	
4	Date	5 Payee name	
	03/06/2025	Hyatt Centric Parking	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$59.54	721 Congress Ave	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense	
		Galveston County Day Parking	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to benefit Gree		_
	Date	Payee name	
	03/20/2025	Hyatt Centric Parking	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$59.54	721 Congress Ave	
		Austin, TX 78701	
	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 TFRW Parking	
		THE TAXABLE PROPERTY OF THE PR	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	_
	02/25/2025	Hyatt Regency Austin Parking	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$23.15	208 Barton Springs Rd	
	Ψ20.10	200 Barton Opinigo i Na	
		Austin, TX 78704	
	DUDDOOF		
	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	
		Brazoria County Legislative Breakfast Parking	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
_	expenditure to benefit C/OI	1	_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

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		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide (ense		pense ages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		
1	Total pages Schedule F1:								Filer ID	(Ethics Commission Filers)	
Ļ	Sch: 24/57 Rpt: 52/89		II, David M. (The Hor	norable)					00081727		
4	Date	5 Payee name									
	01/13/2025	Jones, Rya									
6	Amount (\$)	7 Payee addre	•	State;	Zip Cod	de					
	\$500.00		ngress Ave								
		Apt #2313	70745								
_	DUDE CC-	Austin, TX				<i>n</i> . `					
8	PURPOSE OF		See Categories listed at the top		dule)	(a) 1	Description Check if travel o	outsid	te of Texas Com	nplete Schedule T.	
	EXPENDITURE	Jaianes/W	/ages/Contract Labor	I		ļ			officeholder living		
						,	Wages & Sala	arie	!S		
L											
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Of	ffice soug	ght		_	Office h	eld	
Π	Date	Payee name									_
	02/10/2025	Jones, Rya	an			_		_			
	Amount (\$)	Payee addre	ess; City;	State;	Zip Cod	de			=		
	\$500.00	6001 S Co	ngress Ave								
		Apt #2313									
		Austin, TX	78745			_		_			
	PURPOSE OF		See Categories listed at the top		dule) ((b)	Description				
	OF EXPENDITURE	Salaries/W	/ages/Contract Labor	r		ļ	-		de of Texas. Com officeholder living	nplete Schedule T. g expense	
						ļ	Wages & Sala			○	
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Of	ffice soug	ght			Office he	eld	
	Date	Payee name)								
	03/04/2025	Jones, Rya									
	Amount (\$)	Payee addre	ess; City;	State;	Zip Cod	de					
	\$500.00	6001 S Co	ngress Ave								
		Apt #2313									
		Austin, TX	78745								
	PURPOSE	(a) Category (S	See Categories listed at the top	of this sched	dule) ((b)	Description				
	OF EXPENDITURE	l	ages/Contract Labor			ļ	Check if travel o			nplete Schedule T.	
						ļ	Check if Austin, Wages & Sala		officeholder living	y expense	
							goo & Jak	A1 10	-		
	Complete ONLY if direct	LCandidate/Of	ficeholder name	Of	ffice soug	,ht			Office h	eld	
	expenditure to benefit C/OF		-		9						

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: 25/57 Rpt: 53/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/07/2025	Jones, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Wages & Salaries
		wayes a Salaties
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/15/2025	Jones, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Wages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/03/2025	Jones, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Wages & Salaries
\vdash	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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 26/57 Rpt: 54/89	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	
	06/19/2025	La Brisa League City	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$20.93	501 N. Wesley Dr	
		League City, TX 77573	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 Courbeverage Expense	l outside of Texas. Complete Schedule T.
		I — I —	n, TX, officeholder living expense Network of Galveston County Dinner
		republican	verwerk or curvestorr country Emmer
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	02/07/2025	La Brisa League City	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.00	501 N. Wesley Dr	
		League City, TX 77573	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	T T T T T T T T T T T T T T T T T T T	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		CCRW Lunc	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Н	
	Date	Payee name	
	01/03/2025	La Brisa League City	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.00	501 N. Wesley Dr	
		League City, TX 77573	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 1 000/Develage Expense	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
			Republican Women Luncheon
		3.03.1	
	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 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: 27/57 Rpt: 55/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/04/2025	La Brisa League City
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	501 N. Wesley Dr
		League City, TX 77573
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Clear Creek Republican Women Luncheon
		Global Grook Ropublican Women Zunencen
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	05/02/2025	La Brisa League City
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	501 N. Wesley Dr
	φ20.00	301 N. Wesley Di
		League City, TX 77573
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Clear Creek Republican Women Luncheon
		Global Grook Ropublican Wolfield Editoriosin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	06/26/2025	Larry M. Hicks, CPA
_		·
	Amount (\$)	
	\$372.00	4145 Gessner
		B-415
		Houston, TX 77080
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Consulting Services
		Consulting Convices
\vdash	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 Com

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services The Instruction Guid	Salaries	/Wage	es/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed above))
1	Total pages Cabadula F1:	2 EII ED N				1	2	Filor ID	(Ethios Commission	Filore)
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission	riieis)
	Sch: 28/57 Rpt: 56/89	Middlet	on II, David M. (The H	lonorable)				00081727		
4	Date	5 Payee n	ame							
	06/26/2025		I. Hicks, CPA							
6	Amount (\$)	7 Payee a		State; Zip (odo.					
0		_		State, Zip C	Joue					
	\$925.00	4145 G	essner							
		B-415								
		Housto	n, TX 77080							
8	PURPOSE	(a) Categor	V (0 0 1 1 1 1 1 1 1		(b)	Description				
Ū	OF		(See Categories listed at the	top of this schedule)	(2)		outsi	de of Texas, Com	plete Schedule T.	
	EXPENDITURE	Accour	iting/Banking					officeholder living		
						Consulting Se			,	
_	0 1: 0 1: 0		/O.W.	0,50				0,1,1		
9	Complete ONLY if direct expenditure to benefit C/OI		e/Officeholder name	Office so	ought	•		Office h	eld	
	experialitate to benefit 6/61	•								
	Date	Payee n	ame							
	04/03/2025	Law Er	forcement Alliance for	Galveston Cou	nty					
	Amount (\$)	Payee a		State; Zip (
	` '	1 1		State, Zip C	Jude					
	\$1,000.00	1252 B	riar Creek Dr							
		Friends	wood, TX 77546							
	PURPOSE	(a) Categor	V (0 0 1 1 1 1 1 1 1		(b)	Description				
	OF		y (See Categories listed at the	top of this schedule)	(2)	_	outsi	de of Texas, Com	plete Schedule T.	
	EXPENDITURE	Auveni	sing Expense					officeholder living		
						Event Sponso				
								r		
	Commission ONII V if alice at	Condidat	e/Officeholder name	Office				Office h	- l d	
	Complete ONLY if direct expenditure to benefit C/OI		e/Onicenolder name	Office so	ougni			Office fi	eiu	
	Date	Payee n	ame							
	06/25/2025	Lions C	Club of Pearland							
	Amount (\$)	Payee a	ddress; City;	State; Zip (:ode					
	\$2,500.00	· ·	Main St	Otato, Zip C	Jouc					
	Φ2,500.00	3330 3	Maii St							
		Pearlar	nd, TX 77581							
	PURPOSE	(a) Categor	y (See Categories listed at the	ton of this schedule)	(b)	Description				
	OF		sing Expense	top of this serieddie)	`		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	, tavora	onig Expense			Check if Austin,	TX,	officeholder living	g expense	
						Event Sponso	orsl	hip		
						-				
	Complete ONLY if direct	Candidate	e/Officeholder name	Office so	niap+			Office h	eld	
	expenditure to benefit C/OI		a chiceholder hame	Office St	rugiil			Onice III	Ciu	
	· · · ·									40.10(.10

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 29/57 Rpt: 57/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/08/2025	Little, Briana
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	211 Cinnabar Bay Dr
		League City, TX 77573
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
•	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	02/12/2025	Little, Briana
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	211 Cinnabar Bay Dr
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	03/10/2025	Little, Briana
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	211 Cinnabar Bay Dr
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	ponditare to bonont 0/01	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - 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 Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 30/57 Rpt: 58/89 Middleton II, David M. (The Honorable) 00081727 4 Date Payee name 04/16/2025 Little, Briana 6 Amount (\$) Payee address; State; Zip Code \$500.00 211 Cinnabar Bay Dr League City, TX 77573 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages & Salaries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/14/2025 Little, Briana Amount (\$) Payee address; City; State; Zip Code \$500.00 211 Cinnabar Bay Dr League City, TX 77573 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages & Salaries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/10/2025 Little, Briana Amount (\$) Payee address; City: State; Zip Code \$500.00 211 Cinnabar Bay Dr League City, TX 77573 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages & Salaries 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

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing 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: 31/57 Rpt: 59/89	Middleton II, David M. (The Honorable) 00081727	
4	Date 02/12/2025	5 Payee name Little, Briana	
6	Amount (\$) \$913.57	7 Payee address; City; State; Zip Code 211 Cinnabar Bay Dr League City, TX 77573	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/10/2025	Little, Briana	
	Amount (\$) \$790.79	Payee address; City; State; Zip Code 211 Cinnabar Bay Dr League City, TX 77573	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/16/2025	Little, Briana	
	Amount (\$) \$1,108.94	Payee address; City; State; Zip Code 211 Cinnabar Bay Dr	
		League City, TX 77573	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	_
To:	rms provided by Tayas F	thics Commission www.athics state ty us Version V// 1.0 f10d0fc	_

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	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: 32/57 Rpt: 60/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	05/14/2025	Little, Briana
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$816.97	211 Cinnabar Bay Dr
		League City, TX 77573
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
		willeage Neimbursement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
\vdash	Date	Dougo nama
	06/20/2025	Payee name
		Little, Briana
	Amount (\$)	Payee address; City; State; Zip Code
	\$715.12	211 Cinnabar Bay Dr
		League City, TX 77573
	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
		Militage Normalisation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/30/2025	Little, Briana
	Amount (\$)	Payee address; City; State; Zip Code 211 Cinnabar Bay Dr
	\$792.54	211 Cililiadai Bay Di
		League City, TX 77573
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
	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 C

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 33/57 Rpt: 61/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/08/2025	Lyrock, Josh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	83 County Road 401
		Dayton, TX 77535
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Wages & Salaries
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	02/11/2025	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	83 County Road 401
		Dayton, TX 77535
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Wages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н
	Date	Payee name
	03/11/2025	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	83 County Road 401
		Dayton, TX 77535
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Wages & Salaries
		wages a salaries
	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 Con 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: 34/57 Rpt: 62/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/15/2025	Lyrock, Josh
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 83 County Road 401 Dayton, TX 77535
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages & Salaries
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/14/2025	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	83 County Road 401
		Dayton, TX 77535
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages & Salaries
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/10/2025	Lyrock, Josh
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 83 County Road 401
		Dayton, TX 77535
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages & Salaries
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Ivertising Expense Event Expense Loan Repayment/Reimbu

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

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: 35/57 Rpt: 63/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/08/2025	Lyrock, Josh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$289.44	83 County Road 401
		Dayton, TX 77535
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
		Will cage Tell indusement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Davisa nama
	02/11/2025	Payee name
		Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$235.20	83 County Road 401
		Dayton, TX 77535
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	05/14/2025	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$211.40	83 County Road 401
		Dayton, TX 77535
	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.
	EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 36/57 Rpt: 64/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	06/18/2025	Lyrock, Josh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$93.45	83 County Road 401
		Dayton, TX 77535
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
		Militage Normalisement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/18/2025	Lyrock, Josh
_	Amount (\$)	Payee address; City; State; Zip Code
	\$235.20	83 County Road 401
	Ψ200.20	oo oouniy Rodd 401
		Dayton, TX 77535
	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
		Willouge Normalisement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/30/2025	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.80	83 County Road 401
		Dayton, TX 77535
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related
		Expense Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Il Cor	nmittee	Gift/Awards/Memorials I Legal Services	Expense	Printing Ex Salaries/W		e //Contract Labor		Travel Out of I OTHER (enter	District a category not liste	ed above)
L	Credit Card Payment			The Instruction Gu	ide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comr	nission Filers)
	Sch: 37/57 Rpt: 65/89		Middleton II	, David M. (The	Honorable))				00081727	,	
4	Date	5	Payee name									
	01/21/2025		MailChimp									
6	Amount (\$)	7	Payee addres	ss; City;	State;	; Zip Co	de					
	\$437.06		675 Ponce	de Leon Ave NE								
			Suite 5000									
			Atlanta, GA	30308								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exp		.oud.o,		_ `	outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITORE							_		officeholder livi	ng expense	
								Dues & Subs	crip	otions		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	C	Office sou	ght			Office	held	
		_										
	Date		Payee name									
	02/12/2025		MailChimp									
	Amount (\$)		Payee addres	ss; City;	State;	; Zip Co	de					
	\$437.06		675 Ponce	de Leon Ave NE								
			Suite 5000									
			Atlanta, GA	30308								
	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exp				=			omplete Schedule T	
								ш		officeholder livi	ng expense	
								Dues & Subs	CH	JUU115		
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name			aht			Office	held	
	expenditure to benefit C/O			oonordor manno		J00 00u,	9			000		
	Date		Payee name									
	03/12/2025		MailChimp									
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$437.06		675 Ponce	de Leon Ave NE								
			Suite 5000									
			Atlanta, GA	30308								
	PURPOSE	(a)	Category (%)	ee Categories listed at th	e top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE	ĺ <i>′</i>		head/Rental Exp		,	. ,		outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITURE									officeholder livi	ng expense	
								Dues & Subs	crip	otions		
	0 1 0 0 0 0 0 0	L	- P. F. 1 - 1 - 1			- T						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Jandidate/Offi	ceholder name	(Office sou	gnt			Office	neia	
_												

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 38/57 Rpt: 66/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/15/2025	MailChimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$437.06	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Dues & Subscriptions
		Dues & Subscriptions
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/12/2025	MailChimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$437.06	675 Ponce de Leon Ave NE
	*	Suite 5000
		Atlanta, GA 30308
	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
		Dues & Subscriptions
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	л
	Date	Payee name
	06/24/2025	MailChimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$437.06	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	E/4 E/40	Check if Austin, TX, officeholder living expense Dues & Subscriptions
		Dues α Subscriptions
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit 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 -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

Travel in Disti Travel Out of Contract Labor OTHER (ente

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: 39/57 Rpt: 67/89 Middleton II, David M. (The Honorable) 00081727 4 Date Payee name 01/06/2025 McFarlin, Hope 6 Amount (\$) Payee address; State; Zip Code \$500.00 719 Green Oak Dr Dripping Springs, TX 78620 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages & Salaries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/05/2025 McFarlin, Hope Amount (\$) Payee address; City; State; Zip Code \$500.00 719 Green Oak Dr Dripping Springs, TX 78620 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages & Salaries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/04/2025 McFarlin, Hope Amount (\$) Payee address: City: State; Zip Code \$500.00 719 Green Oak Dr Dripping Springs, TX 78620 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages & Salaries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi 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	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: 40/57 Rpt: 68/89	Middleton II, David M. (The Honorable) 00081727	
4	Date	5 Payee name	
	04/07/2025	McFarlin, Hope	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$500.00	719 Green Oak Dr	
		Dripping Springs, TX 78620	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Wages & Salaries	
		wages & salaties	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	
	05/05/2025	McFarlin, Hope	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$500.00	719 Green Oak Dr	
		Dripping Springs, TX 78620	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Wages & Salaries	
		Tragge a Canalice	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
_	Data		=
	Date	Payee name	
	06/02/2025	McFarlin, Hope	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	719 Green Oak Dr	
		Dripping Springs, TX 78620	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Wages & Salaries	
			_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	The straight of the straight of the		_
_			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/57 Rpt: 69/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/07/2025	Minor, Mathew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	507 Fern Ct
		Cedar Park, TX 78613
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	
H	D-4-	
	Date	Payee name
	02/05/2025	Minor, Mathew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	507 Fern Ct
		Cedar Park, TX 78613
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	03/04/2025	Minor, Mathew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	507 Fern Ct
		Cedar Park, TX 78613
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	y
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/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: 42/57 Rpt: 70/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/04/2025	Minor, Mathew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	507 Fern Ct
		Cedar Park, TX 78613
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages & Salaries
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-1
	Date	Payee name
	05/05/2025	Minor, Mathew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	507 Fern Ct
		Cedar Park, TX 78613
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/02/2025	Minor, Mathew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	507 Fern Ct
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Cedar Park, TX 78613
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
	0 1: 0::::::	
	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 Committee
Credit Card Payment

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

	orean oara rayment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 43/57 Rpt: 71/89	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	
	01/08/2025	Ochoa, Lindy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	1803 Whitney Way	
		Austin, TX 78741	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		W	/ages & Salaries
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
		·	
	Date	Payee name	
	02/10/2025	Ochoa, Lindy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1803 Whitney Way	
		Austin, TX 78741	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		l L	/ages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	03/04/2025	Ochoa, Lindy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1803 Whitney Way	
	4000.00	2000 11111110, 1143,	
		Austin, TX 78741	
	PURPOSE		opprinting
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	escription Theck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Cornitact Eabor	Check if Austin, TX, officeholder living expense
		\overline{w}	ages & Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 44/57 Rpt: 72/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/07/2025	Ochoa, Lindy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1803 Whitney Way
		Austin, TX 78741
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Wages & Salaries
		Wagoo a Salahoo
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	05/12/2025	Ochoa, Lindy
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1803 Whitney Way
		Austin, TX 78741
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expanse.
		Check if Austin, TX, officeholder living expense Wages & Salaries
		Wages a Salaries
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/03/2025	Ochoa, Lindy
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1803 Whitney Way
		Austin, TX 78741
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Wages & Salaries
		vvayes a Salalles
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

	Candidate/Officeholder/Politica Credit Card Payment		ommittee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commissio	n Filers)			
	Sch: 45/57 Rpt: 73/89	Middleton	II, David M. (The Ho	norable)				00081727					
4	Date	5 Payee name	e										
	01/07/2025	Patterson,	Matt										
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode								
	\$500.00	324 Limes	tone Trail										
		Austin, TX	78737										
8	PURPOSE OF		See Categories listed at the to		(b)	Description							
	EXPENDITURE	Salaries/W	ages/Contract Labo	or		=		ide of Texas. Com , officeholder living	plete Schedule T.				
						Wages & Sala			у слропос				
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office he	eld				
F	Date	Payee name											
	02/05/2025	Patterson,	Matt										
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode								
	\$500.00	324 Limes											
		Austin, TX	78737										
	PURPOSE OF		See Categories listed at the to		(b)	Description							
	EXPENDITURE	Salaries/W	ages/Contract Labo	or		_		ide of Texas. Com , officeholder living	plete Schedule T.				
						Wages & Sala			у схренос				
						J							
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office he	eld				
F	Date	Payee name	<u> </u>										
	03/04/2025	Patterson,											
┢	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode								
	\$500.00	324 Limes		Otato, Zip O	ouc								
	4000.00	02 1 200	torio rraii										
		Austin, TX	78737										
	PURPOSE OF		See Categories listed at the to		(b)	Description							
	EXPENDITURE	Salaries/W	ages/Contract Labo	or				ide of Texas. Com , officeholder living	plete Schedule T.				
						Wages & Sala			j expense				
						wages a said	an						
\vdash	Complete ONLY if direct	[Candidate/Of	ficeholder name	Office so	uaht			Office he	2ld				
	expenditure to benefit C/O		nconduct flattic	Office Sur	agrit			Onice III	JIQ.				
\vdash													
Ļ													

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: 46/57 Rpt: 74/89	Middleton II, David M. (The Honorable) 00081727	
4	Date	5 Payee name	
	04/04/2025	Patterson, Matt	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$500.00	324 Limestone Trail	
		Austin, TX 78737	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Wages & Salaries	
		wages & salaries	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/Ol	1	
	Date	Payee name	=
	05/05/2025	Patterson, Matt	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$500.00	324 Limestone Trail	
		Austin, TX 78737	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Wages & Salaries	
		wages & Salaries	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
_	D :		=
	Date	Payee name	
	06/04/2025	Patterson, Matt	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	324 Limestone Trail	
		Austin, TX 78737	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Wages & Salaries	
	Commisto Chilly's II	Condidate/Officeholder name	_
	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 Committee

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

Credit Card Payment	The Instruction Guide explains how to complete t	his form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 47/57 Rpt: 75/89	Middleton II, David M. (The Honorable)	00081727
4 Date	5 Payee name	·
01/07/2025	Pinehurst Mail & Ship	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$65.99	7714 TX-146	
	Baytown, TX 77523	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
	Sn Sn	nipping
O Commisto ONII V if divers	Condidate/Officeholder reges	Office held
9 Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought OH	Office held
Date	Payee name	
06/06/2025	Pinehurst Mail & Ship	
Amount (\$)	Payee address; City; State; Zip Code	
\$20.87	7714 TX-146	
	Baytown, TX 77523	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) De	escription
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		nipping
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/C)H	
Date	Payee name	
06/16/2025	Pinehurst Mail & Ship	
Amount (\$)	Payee address; City; State; Zip Code	
\$20.87	7714 TX-146	
,		
	Baytown, TX 77523	
PURPOSE	,	escription
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
	Sh	nipping
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought	Office held
experiulture to beliefft C/C	71	

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Total pages Schedule F1. Total page address; City; State; Zip Code Total Collectif Austin, Tx, difficientle Riving expense Total Collectif Pages Schedule T1. Total pages Schedule F1. Total pages		Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	r - Il Committee	Gift/Awards/Memorials Ex Legal Services		ting Exper aries/Wage	nse es/Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
Sch: 48/57 Rpt: 76/89 Middleton II, David M. (The Honorable) 00081727 4 Date 04/01/2025 Payee name Rotary Club of Texas City 5 Amount (\$) 7 Payee address; City; State; Zip Code 2010 5th Ave N Texas City, TX 77590 8 PURPOSE OF EXPENDITURE Q Candidate/Officeholder name Office sought Check if sweet outside of Texas. Complete Schedule T. Check II Availation TX. officeholder Many expense Event Sports III Availation TX. officeholder in the top of this schedule) Mebister, TX 77590 PURPOSE OF EXPENDITURE Q Complete ONLY if direct expenditure to benefit C/OH Date 02/28/2025 Savannah Caf Savannah Caf Suite 180 Webster, TX 77598 PURPOSE OF EXPENDITURE Q Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Check if sweet outside of Texas. Complete Schedule T. Check II Availation TX. officeholder in the top of this schedule) Check if sweet outside of Texas. Complete Schedule T. Check II Availation TX. officeholder in the top of this schedule) Check II Availation TX. officeholder in the top of this schedule of Texas. Complete Schedule T. Check II Availation TX. officeholder in the Complete ONLY if direct expenditure to benefit C/OH Date O3/27/2025 Payee name O3/27/2025 Shelpy County News Amount (\$) Payee name Shelpy County News Purpose O5 Shelpy County News Shelpy County News Selma, AL 36702 Purpose O5 Selma, AL 36702 Date O4/2015 Type Code O4/2015 Type O4	L	Cicuit Card Fayincill		The Instruction Guid	le explains how	to comp	lete this form.		
4 Date O4/01/2025 5 Payee name Rotary Club of Texas City 6 Amount (\$) \$175.00 7 Payee address; City; State; Zip Code 2010 5th Ave N Texas City, TX 77590 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense Office Sought Office held Office held Office held Office held Office held Office held Office Sought Office Sought Office held Office he	1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID	(Ethics Commission Filers)
Amount (\$) Rolary Club of Texas City State; Zip Code		·			onorable)			00081727	
Amount (\$) \$175.00 \$	4								
S175.00 2010 5th Ave N Texas City, TX 77590	L	04/01/2025	Rotary Clu	b of Texas City					
Texas City, TX 77590	6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code			
B PURPOSE OF EXPENDITURE		\$175.00	2010 5th A	ve N					
B PURPOSE OF EXPENDITURE									
Advertising Expense Office sought Office held Office hel			Texas City	, TX 77590					
Advertising Expense	8		(a) Category (See Categories listed at the	top of this schedule)	(b) Description		
Complete ONLY if direct expenditure to benefit C/OH									•
9 Complete ONLY if direct expenditure to benefit C/OH Date O2/28/2025							_		g expense
Date O2/28/2025 Savannah Caf Amount (\$) Payee address; City; State; Zip Code 14020 Galveston Rd Suite 180 Webster, TX 77598 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Date O3/27/2025 Shelby County News Amount (\$) Payee name Shelby County News Amount (\$) Payee address; City; State; Zip Code Purpose O4/27/2025 Shelby County News Amount (\$) Payee address; City; State; Zip Code P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) OF EXPENDITURE (b) Description (b) Description (b) Description (b) Description (c) Description (c) Description (d) Description (e) Description (f) Description (h) Des							Event Spons	υιοιιιμ	
Date O2/28/2025 Savannah Caf Amount (\$) Payee address; City; State; Zip Code 14020 Galveston Rd Suite 180 Webster, TX 77598 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Date O3/27/2025 Shelby County News Amount (\$) Payee name Shelby County News Amount (\$) Payee address; City; State; Zip Code Purpose O4/27/2025 Shelby County News Amount (\$) Payee address; City; State; Zip Code P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) OF EXPENDITURE (b) Description (b) Description (b) Description (b) Description (c) Description (c) Description (d) Description (e) Description (f) Description (h) Des	<u>_</u>	Complete ONLY 'C. "	00-10-10-10-10-10-10-10-10-10-10-10-10-1	#i.a.a.b.a.l.al = :: - : =	0,00			0" '	a lad
Date	9			Ticenolaer name	Office	sough	Į.	Office h	eia
O2/28/2025 Savannah Caf Amount (\$) Payee address; City; State; Zip Code \$14.37 \$ \$14.020 Galveston Rd Suite 180 Webster, TX 77598 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if I ravel outside of Texas. Complete Schedule T. Check if Justin, TX, officeholder living expense Odyssey Academy Lunch Meeting Office sought Office held Payee name O3/27/2025 Shelby County News Amount (\$) Payee address; City; State; Zip Code P-O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			Г						
Amount (\$)			1						
\$14.37	L	02/28/2025	Savannah	Caf					
Suite 180 Webster, TX 77598 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 Odyssey Academy Lunch Meeting Complete ONLY if direct expenditure to benefit C/OH Date O3/27/2025 Amount (\$) Payee name Shelby County News Amount (\$) Payee address; City; State; Zip Code \$134.36 P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		Amount (\$)	Payee addr	ess; City;	State; Zip	Code			
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 Odyssey Academy Lunch Meeting Complete ONLY if direct expenditure to benefit C/OH Date O3/27/2025 Amount (\$) Payee name Shelby County News Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if Austin, TX, officeholder Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		\$14.37	14020 Gal	veston Rd					
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 Odyssey Academy Lunch Meeting Complete ONLY if direct expenditure to benefit C/OH Date 03/27/2025 Amount (\$) Payee name Shelby County News Payee address; City; State; Zip Code Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			Suite 180						
Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Odyssey Academy Lunch Meeting Office held Payee name Shelby County News Amount (\$) Payee address; City; State; Zip Code P.O. Box 2080 Selma, AL 36702 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			Webster, 7	TX 77598					
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			(a) Category	See Categories listed at the	top of this schedule)	(b) Description		
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/27/2025 Shelby County News Amount (\$) Payee address; City; State; Zip Code \$134.36 P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Office sought Office held			l		-,		Check if travel		
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/27/2025 Shelby County News Amount (\$) Payee address; City; State; Zip Code P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Office sought Office held Office held Office held (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		LAI LINDITORL							
Date 03/27/2025 Payee name Shelby County News Amount (\$) Payee address; City; State; Zip Code P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							Odyssey Aca	laemy Lunch M	leeting
Date 03/27/2025 Payee name Shelby County News Amount (\$) Payee address; City; State; Zip Code P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	_	Occupated Chilly in	0 " : /-	::: l l -l					-1.4
O3/27/2025 Shelby County News Amount (\$) Payee address; City; State; Zip Code \$134.36 P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				ticenoider name	Office	sough	[Office h	eia
O3/27/2025 Shelby County News Amount (\$) Payee address; City; State; Zip Code \$134.36 P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	⊨	Date	Doves no						
Amount (\$) Payee address; City; State; Zip Code P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			l í						
\$134.36 P.O. Box 2080 Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	_			-	<u> </u>				
Selma, AL 36702 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			1		State; Zip	Code			
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		\$134.36	P.O. Box 2	2080					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
OF EXPENDITURE Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	L		Selma, AL	36702					
EXPENDITURE Advertising Expense Check if Austin, TX, officeholder living expense					top of this schedule)	(b			
Check if Austin, TX, officenoider living expense			Advertisin	g Expense			ш		
Legislative i abile Notice							_		g expense
							Logisialive Fi	45110 1 1 101165	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Complete ONLV if direct	Candidate/O	ficeholder name	Office	Soliabi	<u> </u>	Office h	2ld
expenditure to benefit C/OH				ncenduci Haine	Onice	sougili	ı	Office III	ciu

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions' Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						OTHER (enter a category not listed above)			
	·				iide explains ho	w to cor	nple	ete this form.	_				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)	
	Sch: 49/57 Rpt: 77/89		Middleton II	, David M. (The	Honorable)					00081727			
4	Date	5	Payee name										
	03/28/2025		Shelby Cour	nty News									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de						
	\$41.40		202 Field St	:									
			Center, TX	75935									
8	PURPOSE	(2)				ı	(h)	Description					
°	OF	(a)		ee Categories listed at th	ne top of this schedu	ule)	(D)	Description	nutei	de of Teyes Con	nplete Schedule T.		
	EXPENDITURE	l	Advertising	Expense						officeholder livin	•		
		l						Legislative Pu					
								J					
9	Complete ONLY if direct		 Candidate/Offic	ceholder name	Off	ice sou	aht			Office h	eld		
	expenditure to benefit C/O	Н					,						
_	Date	Г	Payee name										
	02/03/2025		TDCJ										
		┝		City:	Ctoto:	7in Co	do						
	Amount (\$) \$883.32		Payee addres	ss; City;	State;	Zip Cui	ue						
	Φ003.32												
			Unit B										
			Huntsville, T	TX 77320									
	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this schedu	ule)	(b)	Description					
	OF EXPENDITURE	l		s/Donations Ma	,			=			nplete Schedule T.		
			Candidate/C	Officeholder/Poli	tical Committ	tee		_		officeholder livin	g expense		
								Donation Iten	11				
	2	L											
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Off	ice sou(ght			Office h	eld		
		_											
	Date		Payee name										
	02/05/2025		TDCJ										
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de						
	\$883.32		861 I-45										
		l	Unit B										
			Huntsville, T	X 77320									
	PURPOSE	(a)	Category (sc	ee Categories listed at th	o top of this school	ulo)	(b)	Description					
	OF	``		se Categories listed at the instance of the in		uie)	(- ,		outsi	de of Texas. Con	nplete Schedule T.		
	EXPENDITURE	l		Officeholder/Poli		tee		Check if Austin,	, TX,	officeholder livin	g expense		
								Donation Iten	n				
	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	ice sou	ght			Office h	eld		
	expenditure to benefit C/O	H											
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/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: 50/57 Rpt: 78/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	01/09/2025	Tanner, Stephanie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3101 Patricia Lane
		Pearland, TX 77581
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages & Salaries
		Transport of States
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	02/20/2025	Tanner, Stephanie
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3101 Patricia Lane
		Pearland, TX 77581
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Wages & Salaries
		wages & Salaires
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Date	Payee name
	03/13/2025	Tanner, Stephanie
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3101 Patricia Lane
		Pearland, TX 77581
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Wages & Salaries
	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 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 Cara r ayment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 51/57 Rpt: 79/89	Middleton II, David M. (The Honorable)		00081727
4	Date	5 Payee name		•
	04/17/2025	Tanner, Stephanie		
6	Amount (\$)	7 Payee address; City; State; Zip Coc	de	
	\$500.00	3101 Patricia Lane		
		Pearland, TX 77581		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Wages & Salaries
				Wagoo a Galanoo
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/O		,	
-	Date	Payee name		
	05/15/2025	Tanner, Stephanie		
_	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$500.00	3101 Patricia Lane		
		Pearland, TX 77581		
	PURPOSE		(b)	Description
	OF	Salaries/Wages/Contract Labor	(~)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Wages & Salaries
	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:			000
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	gnt	Office held
	Date	Payee name		
	06/16/2025	Tanner, Stephanie		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$500.00	3101 Patricia Lane		
		Pearland, TX 77581		
	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Wages & Salaries
				S
Н	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	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 Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 52/57 Rpt: 80/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	04/17/2025	Tanner, Stephanie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$305.20	3101 Patricia Lane
		Pearland, TX 77581
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.
	LXI LINDITORE	Expense Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date 05/15/2025	Payee name
		Tanner, Stephanie
	Amount (\$)	Payee address; City; State; Zip Code
	\$742.35	3101 Patricia Lane
		Pearland, TX 77581
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/23/2025	Tanner, Stephanie
	Amount (\$)	Payee address; City; State; Zip Code
	\$406.49	3101 Patricia Lane
		Pearland, TX 77581
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
	Operation ONE VIII II	Out that Office halden are seen as the second as the secon
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	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: 53/57 Rpt: 81/89	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	02/20/2025	Tanner, Stephanie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$614.32	3101 Patricia Lane
		Pearland, TX 77581
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related
	EXPENDITORE	Expense Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiorure to beriefit C/Of	
	Date	Payee name
L	03/13/2025	Tanner, Stephanie
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,026.34	3101 Patricia Lane
		Pearland, TX 77581
	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
		Mileage Reimbursement
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/30/2025	Payee name Tanner, Stephanie
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$344.12	3101 Patricia Lane
		Pearland, TX 77581
	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
		Mileage Reimbursement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

Fees Office Food/Beverage Expense Pollini Gift/Awards/Memorials Expense Printi Legal Services Salar

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

	Credit Card Payment		The Instruction Guid	de explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	FILER NAME				3	3	Filer ID	(Ethics Commission Filers
	Sch: 54/57 Rpt: 82/89	Middleton II,	David M. (The H	lonorable)				00081727	
4	Date	Payee name							
	02/27/2025		ation of Republic	can Women					
6	Amount (\$)	Payee address	s; City;	State; Zip Co	de				
	\$94.06	PO Box 1713	146						
		Austin, TX 78	8717						
8	PURPOSE	Category (See	e Categories listed at the	ton of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/Bevera		top of this scriedule)	, ,	Check if travel ou			
	EXPENDITORE					Check if Austin, 7	TX,	officeholder living	expense
						Event Ticket			
_		- " - '- '- ''							
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Offic	eholder name	Office sou	ght			Office he	eld
	Date	Payee name	_						
	03/27/2025	The Brazosp							
	Amount (\$)	Payee address		State; Zip Co	de				
	\$97.22	720 S. Main	Street						
		Clute, TX 77	531						
	PURPOSE	Category (See	e Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising E	Expense			ш		de of Texas. Com	
						Check if Austin, 1 Legislative Pul			expense
						Legislative i al	, ii	o i volice	
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	aht			Office he	eld
	expenditure to benefit C/O				9				
	Date	Payee name							
	03/27/2025	The Examine	<u>ar</u>						
				State; Zip Co	do				
	Amount (\$) \$30.00	Payee address	s, City,	State, Zip Ct	ue				
	Ψ30.00	733 WIIIOW							
		Decument T	-V 77701						
		Beaumont, T							
	PURPOSE OF		e Categories listed at the	top of this schedule)	(b)	Description Check if travel out	ıtci	do of Toyon Com	ploto Sabodulo T
	EXPENDITURE	Advertising E	Expense			Check if Austin, 1			
						Legislative Pul			•
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght			Office he	eld
	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 Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 55/57 Rpt: 83/89	2 FILER NAME Middleton II, David M. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081727
4	Date 06/23/2025	5 Payee name Webb County Republican Party
	Amount (\$) \$200.00	7 Payee address; City; State; Zip Code Requested Laredo, TX 78041
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Ticket
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 06/30/2025	Payee name Winred
	Amount (\$) \$4,596.45	Payee address; City; State; Zip Code 1776 Wilson Arlington, MA 22209
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees 06/23/2025 - 06/30/2025
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 01/14/2025	Payee name Xero
	Amount (\$) \$9.09	Payee address; City; State; Zip Code 1615 Platte St Suite 400 Denver, CO 80202
	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 Dues & Subscriptions
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By Candidate/Officeholder/Political			nmittee	Gift/Awards/Memoria Legal Services	ls Expense	Printing Ex Salaries/W		e /Contract Labor		Travel Out of District OTHER (enter a category not listed above)			
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 Commi	ssion Filers)	
	Sch: 56/57 Rpt: 84/89		Middleton II	, David M. (Th	e Honorable)				0008172	7		
4	Date	5	Payee name										
	01/29/2025		Xero										
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de						
	\$89.00		1615 Platte	St									
			Suite 400										
			Denver, CO	80202									
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE			nead/Rental E		,		<u> </u>			omplete Schedule T.		
	LAFENDITORE							Check if Austin,			ring expense		
								Dues & Subs	crip	otions			
<u> </u>	0 1 0 0 0 0 0 0	L	- P. I. : 10										
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	(Office sou	ght			Office	neld		
	5.	_											
	Date		Payee name										
	02/10/2025	L	Xero										
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de						
	\$47.00		1615 Platte	St									
			Suite 400										
			Denver, CO	80202									
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Office Overl	nead/Rental E	kpense			=			omplete Schedule T.		
								Check if Austin,			ing expense		
								Dues & Subs	CH	JUUIS			
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	(Office sou	ght			Office	held		
	expenditure to benefit C/OI		-		·					5			
H	Date		Payee name										
	03/10/2025		Xero										
	Amount (\$)	\vdash	Payee addres	ss; City;	State	; Zip Co	de						
	\$47.00		1615 Platte		Ciato	,, 500							
	Ψ-1.50		Suite 400										
				80202									
	DUDDOCE	1:3	Denver, CO				/l- \	Description of the second of t					
	PURPOSE OF	^(a)		e Categories listed at		nedule)	(D)	Description Check if travel of	outsi	de of Texas	omplete Schedule T.		
	EXPENDITURE		Onice Overl	nead/Rental E	kpense			Check if Austin,					
								Dues & Subs			•		
	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office	held		
	expenditure to benefit C/OI	Н											

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	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	pense Printing Salaries	Expense Expense s/Wages/Contract Labor complete this form.	Travel in Di Travel Out OTHER (er	
1	Total pages Schedule F1:	1				3 Filer ID	(Ethics Commission Filers)
	Sch: 57/57 Rpt: 85/89		II, David M. (The H	onorable)		000817	27
4	Date	5 Payee nam	e				
	06/23/2025	Xero					
6	Amount (\$)	7 Payee addi		State; Zip C	Code		
	\$29.77	1615 Platt	e St				
		Suite 400	0.0000				
		Denver, C			T		
8	PURPOSE OF		(See Categories listed at the t		(b) Description	al outside of Toyon	Complete Schedule T.
	EXPENDITURE	Office Ove	erhead/Rental Expe	nse	. —	tin, TX, officeholder	
					Dues & Sub	scriptions	
9	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office so	ought	Offic	e held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/4 Rpt: 86/89 Middleton II, David M. (The Honorable) 00081727 4 Date Payee name 04/11/2025 Clear Lake Chamber of Commerce Payee address; Amount (\$) City; State; Zip Code \$285.00 1201 E NASA Pkwy Reimbursement from political contributions Х intended Houston, TX 77058 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Ticket** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/08/2025 College of the Mainland Foundation Amount (\$) Payee address; City; State; Zip Code \$207.56 1200 Amburn Road Reimbursement from political contributions Χ Texas City, TX 77591 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 04/29/2025 Goose Creek CISD Education Foundation Payee address: City; State; Zip Code Amount (\$) \$1,000.00 4544 I-10 East Reimbursement from Χ political contributions intended Baytown, TX 77521 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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/Political Committee Credit Card Payment			G tee Le	Gift/Awards/Memorials Expense Printing Expense Trave					Travel in District Travel Out of District OTHER (enter a categor	y not listed above)		
1	Total pages Schedule G: Sch: 2/4 Rpt: 87/89	l	ER NAME	David M. (The Ho	norable)			3	Filer ID (Ethics 0	Commission Filers)		
4	Date	5 Pay	yee name					<u> </u>				
	02/14/2025	1		hristian Ministries								
6	Amount (\$)	7 Pay	yee address	; City;	State;	Zip Co	de					
	\$1,549.90	800	0 Grand Av	/e								
	Reimbursement from political contributions intended	Ba	acliff, TX 77	518								
8	PURPOSE	(a) Cat	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.									
	OF EXPENDITURE	Ad	Advertising Expense Check if Austin, TX, officeholder living expense							older living expense		
	-	Event Sponso					Event Sponsorsh	ship				
		L										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candida	late/Officeho	lder name			Office sought		Office h	eld		
	Date	Pay	yee name									
	02/25/2025	Pe	arland ISD	Education Funda	ıtion							
	Amount (\$)	Payee address; City; State; Zip Code										
	\$3,500.00 1928 N Main St											
	Reimbursement from political contributions intended	Pe	earland, TX	77581								
	PURPOSE OF	l		Categories listed at the top	o of this sched	dule)	Description	=		xas. Complete Schedule T.		
	EXPENDITURE	Ad	Ivertising E	xpense			L		neck if Austin, TX, officeho	older living expense		
							Event Sponsorsh	пр				
	Complete ONLY if direct expenditure to benefit C/OH	 Candida	late/Officeho	lder name			Office sought		Office h	neld		
	Date	Pay	yee name									
	06/12/2025	Ry	⁄an Data ar	nd Research								
	Amount (\$)	Pay	yee address	; City;	State;	Zip Co	de					
	\$3,200.00	P.C	O. Box 202	675								
	X Reimbursement from political contributions intended	Au	ıstin, TX 78	3720								
	PURPOSE	Cat	tegory (See	Categories listed at the top	o of this sched	dule)	Description	=		xas. Complete Schedule T.		
	OF EXPENDITURE	Co	onsulting Ex	kpense			L	Ch	neck if Austin, TX, officeho	older living expense		
							Data Service					
	Complete ONLY if direct	Candid:	late/Officeho	lder name			Office sought		Office h	neld		
	expenditure to benefit C/OH	oundide	iaic/Omcerio	naci naine			Omice adugnit		Office I	iciu		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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			Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services	Polling Ex Printing E Salaries/A			Travel in District Travel Out of District OTHER (enter a category not listed above)				
	Great Cara r ayment		The Instruction Guide explains I	how to co	mplete this form.						
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 3/4 Rpt: 88/89		Middleton II, David M. (The Honorable)				00081727				
4	Date	5	Payee name								
	04/11/2025		Santa Fe Chamber of Commerce								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode						
	\$240.00		12121 FM 1764 Rd								
	Reimbursement from										
x political contributions intended Santa Fe, TX 77510											
8	PURPOSE	URPOSE (a) Category (See Categories listed at the top of		edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.					
OF EXPENDITURE		` `	Advertising Expense			Check if Austin, TX, officeholder living expense					
	EXPENDITURE				Event Ticket						
9	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name		Office sought		Office held				
	C/OH										
	Date		Payee name								
	01/17/2025		Santa Fe Chamber of Commerce								
	Amount (\$)		Payee address; City; State; Zip Code								
	\$540.80	12121 FM 1764 Rd									
	Reimbursement from										
	X political contributions intended		Santa Fe, TX 77510								
	PURPOSE		Category (See Categories listed at the top of this sche	edule)	Description	=	neck if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE			Advertising Expense	Check if Austin, TX, officeholder living expense							
					Event Sponsorsh	nip					
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held				
		_									
	Date		Payee name								
	02/05/2025	L	Texas City ISD Education Foundation								
Amount (\$)			Payee address; City; State; Zip Code								
	\$250.00		1700 9th Ave N								
	X Reimbursement from political contributions										
	intended		Texas City, TX 77590								
	PURPOSE		Category (See Categories listed at the top of this sche	edule)	Description	=	neck if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE		Advertising Expense			_	neck if Austin, TX, officeholder living expense				
					Event Sponsorsh	nip					
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule G: FILER NAME (Ethics Commission Filers) Sch: 4/4 Rpt: 89/89 Middleton II, David M. (The Honorable) 00081727 Date Payee name 03/14/2025 Texas City La Marque Chamber of Commerce Amount (\$) Payee address; State; Zip Code City; \$750.00 9702 Emmett F Lowry Expy Reimbursement from political contributions Х intended Texas City, TX 77591 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/02/2025 Texas Federation Of Republican Women Convention PAC Amount (\$) Payee address; City; State; Zip Code \$7,000.00 131 Vista Del Monte Reimbursement from political contributions Χ San Antonio, TX 78216 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH