FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082357 3 COMMITTEE NAME **OFFICE USE ONLY** #PROJECTREDTX Date Received **ELECTRONICALLY FILED** 07/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 10 N Caddo St. #108 Date Hand-delivered or Date Postmarked Change of Address Cleburne, TX 76033 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Patrick NAME NICKNAME LAST **SUFFIX** Hamilton STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 10 Caddo St. #108 STREET **ADDRESS** (Residence or Business) Cleburne, TX 76033 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 341027 MAILING **ADDRESS** Austin, TX 78734 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 615-2353 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
#PROJECTREDTX			0008235	7
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	158,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	42,244.35
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	478,132.47
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u>'</u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Patric	k Hamilton	
		Signature of Ca	mpaign Treas	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tl	nis the	day
		which, witness my hand and seal of office.		
Signature of officer adr	ministering oath	Printed name of officer administering oath	Title of off	icer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 26
17 COMMI [*] #PROJ	TEE NAME ECTREDTX	18 Filer ID 00082357	(Ethics Commission Filers)
	JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 133,000.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6. X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	GANIZATION	\$ 25,000.00
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	₹	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$ 42,244.35
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$
I			

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/26
2	FILER NAME #PROJECTREDTX	3 Filer ID (Ethics Commission Filers) 00082357
4	Date 06/27/2025 Full name of contributor out-of-state PAC (ID#:) Coalition Por For Texas PAC 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$133,000.
	Austin, TX 78738	
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ns)

6 Amount (\$)

4 Date

03/27/2025

5 Corporation / Labor Organization name

Las Vegas Sands

25,000.00

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpens Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers	
	Sch: 1/21 Rpt: 6/26		#PROJECT	REDTX						00082357		
4	Date	5	Payee name									
	06/02/2025		AT&T Mobil	ity								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode					
	\$132.05		PO Box 646	33								
Х	Expenditure from corporate funds		Carol Strea	m, IL 60197-646	3							
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Office Overl	head/Rental Exp	ense			=		de of Texas. Com		
								—		officeholder living	expense	
								Telephone Se	⊖ı VI	ic c		
9	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	laht Taht			Office he	eld.	
	expenditure to benefit C/Oh			- Tunic			-9·11					
	Date		Payee name									
	05/01/2025		AT&T Mobil	ity								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					
	\$132.05		PO Box 646	63								
Χ	Expenditure from corporate funds		Carol Strea	m, IL 60197-646	3							
	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exp				□		de of Texas. Com		
								ш		officeholder living	expense	
								Telephone Se	⊖ı VI	ic c		
	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offi	ceholder name	C	Office sou	l ught			Office he	eld	
	Superioritate to belieff 6/01	_										
	Date		Payee name									
L	04/01/2025	L	AT&T Mobil	ity								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					
	\$132.05		PO Box 646	3								
Х	Expenditure from corporate funds		Carol Strea	m, IL 60197-646	3							
	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exp						de of Texas. Com		
	LAI LIBITOIL									officeholder living	expense	
								Telephone Se	ervi	ice		
	Complete CNII V if direct	Ļ	andidata/O#:	coholder neme		Office as:	lap+			Office	nld	
	Complete ONLY if direct expenditure to benefit C/OH		anunate/OTH	ceholder name	C	Office sou	agnt			Office he	nu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/21 Rpt: 7/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
03/03/2025	AT&T Mobility
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$219.62	PO Box 6463
Evpanditura from	
X Expenditure from corporate funds	Carol Stream, IL 60197-6463
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 Telephone Service
	Telephone Service
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/03/2025	AT&T Mobility
Amount (\$)	Payee address; City; State; Zip Code
\$130.48	PO Box 6463
X Expenditure from	Caral Stroom II 60107 6462
Corporate funds	Carol Stream, IL 60197-6463
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
	Telephone Service
	· ·
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
01/01/2025	Apple
Amount (\$)	Payee address; City; State; Zip Code
\$0.99	1 Apple Park Way
,	
X Expenditure from corporate funds	Cupertino, CA 95014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to beliefft C/OI	•

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Ontations 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/21 Rpt: 8/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
02/03/2025	Apple
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.99	1 Apple Park Way
- Evpanditura from	
X Expenditure from corporate funds	Cupertino, CA 95014
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
	Software
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/21/2025	Apple
Amount (\$)	Payee address; City; State; Zip Code
\$108.24	1 Apple Park Way
X Expenditure from corporate funds	Cupertino, CA 95014
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 Software
	Solitiais
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/03/2025	Apple
Amount (\$)	Payee address; City; State; Zip Code
\$0.99	1 Apple Park Way
Ψ0.33	1 Apple Fair Way
X Expenditure from corporate funds	Cupertino, CA 95014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Cross of the Control of the Contro
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to beliefft C/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/21 Rpt: 9/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
05/03/2025	Apple
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.99	1 Apple Park Way
X Expenditure from corporate funds	Cupertino, CA 95014
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 Software
	Sollware
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
05/07/2025	Apple
Amount (\$)	Payee address; City; State; Zip Code
\$32.46	1 Apple Park Way
X Expenditure from corporate funds	Cupertino, CA 95014
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 Software
	Sollware
Organists ONII Wife discret	One distributed (Office health
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u>'</u>	
Date	Payee name
06/03/2025	Apple
Amount (\$)	Payee address; City; State; Zip Code
\$0.99	1 Apple Park Way
X Expenditure from corporate funds	Cupertino, CA 95014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	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: 5/21 Rpt: 10/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
03/03/2025	Apple
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.99	1 Apple Park Way
Evpanditura from	
X Expenditure from corporate funds	Cupertino, CA 95014
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
	Software
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/29/2025	Catalyst Advisors Group LLC
Amount (\$)	Payee address; City; State; Zip Code
\$420.88	1108 Lavaca St #110-506
X Expenditure from corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Web Domain Sev
	vos Bolliam Gov
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/19/2025	ChatGPT
Amount (\$)	Payee address; City; State; Zip Code
\$21.28	3180 18th St
X Expenditure from corporate funds	San Francisco, CA 94110
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Software
	Sullwate
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made Ry - Giff/Alwards/Mei

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/21 Rpt: 11/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
02/19/2025	ChatGPT
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$21.28	3180 18th St
X Expenditure from corporate funds	San Francisco, CA 94110
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
	Software
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Н
Date	Payee name
04/19/2025	ChatGPT
Amount (\$)	Payee address; City; State; Zip Code
\$21.28	3180 18th St
X Expenditure from corporate funds	San Francisco, CA 94110
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
	Software
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/19/2025	ChatGPT
Amount (\$)	Payee address; City; State; Zip Code
\$21.28	3180 18th St
X Expenditure from corporate funds	San Francisco, CA 94110
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Software
	Sultware
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 7/21 Rpt: 12/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
06/19/2025	ChatGPT
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$21.28	3180 18th St
X Expenditure from corporate funds	San Francisco, CA 94110
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 Software
	Soliware
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	T
Date	Payee name
03/19/2025	ChatGPT
Amount (\$)	Payee address; City; State; Zip Code
\$21.28	3180 18th St
Expenditure from	
Expenditure from corporate funds	San Francisco, CA 94110
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
	Software
	Gollman
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
01/02/2025	DocuSign
Amount (\$)	Payee address; City; State; Zip Code
\$319.80	221 Main St., Suite 1000
Expenditure from corporate funds	San Francisco, CA 94105
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 Software
	Sultware
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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
	· · · · · · · · · · · · · · · · · · ·	_
1 Total pages Schedule F1: Sch: 8/21 Rpt: 13/26	2 FILER NAME3 Filer ID(Ethics Commission Filers)#PROJECTREDTX00082357	
4 Date	5 Payee name	_
03/12/2025	Dropbox	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$127.79	1800 Owens St	
X Expenditure from corporate funds	San Francisco, CA 94158	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Software	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	_
06/27/2025	Frontier Bank	
	Poves address: City Cade	
Amount (\$)	Payee address; City; State; Zip Code	
\$20.00	5600 Burnet Rd	
- Evpanditure from		
X Expenditure from corporate funds	Austin, TX 78756	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	—
OF		
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Bank Fee	
Commiste ONII V if divest	Constitute / Office helds no new Constitute of the constitute of t	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/15/2025	Gary Seven	
Amount (\$)	Payee address; City; State; Zip Code	
()	1108 Lavaca St #110-708	
\$2,000.00	1108 Lavaca St #110-708	
Expenditure from		
corporate funds	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Office Overhead/Rental Expense Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Rent	
Complete ONLY !! -!!	Condidate/Officeholder name	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
onponuntaro to borioni 0/01	·	

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		Legal Services	Salaries/\	Wages	s/Contract Labor		OTHER (enter a	a category not listed above)	
			le explains how to co	omple	ete this form.				
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers	;)
Sch: 9/21 Rpt: 14/26	#PROJECT	REDTX					00082357		
4 Date	5 Payee name								
01/17/2025	Gary Sever	l							
6 Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
\$3,200.00	1109 Lavac	a St #110-708							
Expenditure from corporate funds	Austin, TX	78702							
8 PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
OF EXPENDITURE	Consulting				_			nplete Schedule T.	
LAFLINDITORL					_		officeholder livin	ig expense	
					PAC Manage	eme	ent		
Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ight			Office h	eld	
Date									_
	Payee name								
01/30/2025	Gary Sever	<u> </u>							
Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
\$900.00	1108 Lavac	a St #110-708							
X Expenditure from corporate funds	Austin, TX	78701							
PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
OF EXPENDITURE	Consulting				Check if travel	outsi	de of Texas. Cor	nplete Schedule T.	
EXPENDITORE		•			ш		officeholder livin	g expense	
					PAC Manage	eme	ent		
Complete ONLY if direct		ceholder name	Office sou	ught			Office h	eld	
expenditure to benefit C/OI	4								
Date	Dayoo nama								_
	Payee name								
02/15/2025	Gary Sever								
Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
\$2,000.00	1108 Lavac	a St #110-708							
X Expenditure from corporate funds	Austin, TX	78701							
PURPOSE	(a) Category	ee Categories listed at the	ton of this schedule)	(b)	Description				
OF		head/Rental Expe		l` ′		outsi	de of Texas. Cor	nplete Schedule T.	
EXPENDITURE	Omice over	nedd/rtental Expe			Check if Austin,	, TX,	officeholder livin	ig expense	
					Rent				
Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ught			Office h	eld	
expenditure to benefit C/OI			22	J			J		

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

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/21 Rpt: 15/26	2 FILER NAME #PROJECTREDTX 3 Filer ID (Ethics Commission Filers) 00082357
4 Date	5 Payee name
02/19/2025	Gary Seven
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,500.00	1108 Lavaca St #110-708
X Expenditure from	Auetin TY 79701
Corporate funds	Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
2/1 2/13/13/12	Check if Austin, TX, officeholder living expense
	PAC Management
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/15/2025	Gary Seven
	,
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	1108 Lavaca St #110-708
X Expenditure from corporate funds	Austin, TX 78701
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel queside of Taylor Complete Schedule Taylor Comp
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Rent
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
04/21/2025	
04/21/2025	Gary Seven
Amount (\$)	Payee address; City; State; Zip Code
\$3,500.00	1108 Lavaca St #110-708
X Expenditure from corporate funds	Auglia TV 70701
corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
LAFLINDITUKE	Check if Austin, TX, officeholder living expense
	PAC Management
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 Commit

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

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/21 Rpt: 16/26	#PROJECTREDTX	00082357
4 Date	5 Payee name	<u>'</u>
05/15/2025	Gary Seven	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,000.00	1108 Lavaca St #110-708	
Expenditure from		
X corporate funds	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Rent
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		
Date	Payee name	
05/19/2025	Gary Seven	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,500.00	1108 Lavaca St #110-708	
40,000.00		
X Expenditure from corporate funds	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		PAC Management
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		
Date	Payee name	
06/15/2025	Gary Seven	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,000.00	1108 Lavaca St #110-708	
X Expenditure from corporate funds	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE		Check if Austin, TX, officeholder living expense
		Rent
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office Held

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	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: 12/21 Rpt: 17/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
06/27/2025	Gary Seven
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,500.00	1108 Lavaca St #110-708
X Expenditure from corporate funds	Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense PAC Management
	1 Ac Management
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/15/2025	Gary Seven
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	1108 Lavaca St #110-708
- Funanditura from	
X Expenditure from corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Rent
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
03/19/2025	Gary Seven
Amount (\$)	Payee address; City; State; Zip Code
\$3,500.00	1108 Lavaca St #110-708
X Expenditure from corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	PAC Management
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to beliefft G/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 13/21 Rpt: 18/26	#PROJECTREDTX 00082357	
4 Date	5 Payee name	
04/20/2025	GoDaddy	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$42.16	2155 E Warner Rd	
Expenditure from corporate funds	Tempe, AZ 85284	
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.	
LAFLINDITORL	Check if Austin, TX, officeholder living expense	
	Web Domain Sev	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
05/21/2025	GoDaddy	
Amount (\$)	Payee address; City; State; Zip Code	_
\$185.93	2155 E Warner Rd	
\$100.90	2155 E Waitlei Ru	
X Expenditure from corporate funds	Tempe, AZ 85284	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Web Domain Sev	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
02/20/2025	GoDaddy	
Amount (\$)	Payee address; City; State; Zip Code	_
\$70.93	2155 E Warner Rd	
\$10.93	2155 E Walliel Ru	
X Expenditure from corporate funds	Tempe, AZ 85284	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Office Overhead/Rental Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Web Domain Sev	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	Н	
		-

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 14/21 Rpt: 19/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
03/02/2025	GoDaddy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$102.21	2155 E Warner Rd
X Expenditure from corporate funds	Tempe, AZ 85284
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
	Web Domain Sev
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialities to beliefft C/O	
Date	Payee name
03/11/2025	GoDaddy
Amount (\$)	Payee address; City; State; Zip Code
\$102.21	2155 E Warner Rd
·	
X Expenditure from corporate funds	Tempe, AZ 85284
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 Web Domain Sev
	Web Bolliam Sev
Complete ONLY if direct	Candidate/Officeholder name Office country Office hold
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
01/01/2025	Install Connect
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	505 W State St.
X Expenditure from corporate funds	Garland, TX 75040
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense Storage Unit Cleaning
	Storage Only Cleaning
Complete CAU V if dire	Condidate/Officeholder name Office country
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/21 Rpt: 20/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
01/01/2025	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$37.31	2801 E Commerce Center PI
X Expenditure from corporate funds	Tuscon, AZ 85707
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 Software
	Software
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/10/2025	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$37.31	2801 E Commerce Center PI
X Expenditure from corporate funds	Tuscon, AZ 85707
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
02/10/2025	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$37.31	2801 E Commerce Center PI
- "	
X Expenditure from corporate funds	Tuscon, AZ 85707
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to beliefft C/Of	•

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 Commis	sion Filers)
	Sch: 16/21 Rpt: 21/26		
4	Date	5 Payee name	
	04/10/2025	Intuit	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$37.31	2801 E Commerce Center PI	
Χ	Expenditure from corporate funds	Tuscon, AZ 85707	
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	
		Software	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
,	expenditure to benefit C/O	o	
	Date	Payee name	
	05/01/2025	Intuit	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$96.44	2801 E Commerce Center PI	
_	■ Evponditure from		
Χ	Expenditure from corporate funds	Tuscon, AZ 85707	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Check Stock	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to benefit of or		
	Date	Payee name	
	05/10/2025	Intuit	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$37.31	2801 E Commerce Center PI	
Χ	Expenditure from corporate funds	Tuscon, AZ 85707	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Software	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	JM	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 17/21 Rpt: 22/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
06/10/2025	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$37.31	2801 E Commerce Center PI
X Expenditure from corporate funds	Tuscon, AZ 85707
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
	Software
	Soliware
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Davies same
Date	Payee name
03/10/2025	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$37.31	2801 E Commerce Center PI
Evponditure from	
X Expenditure from corporate funds	Tuscon, AZ 85707
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	
Date	Payee name
04/16/2025	Norton
Amount (\$)	Payee address; City; State; Zip Code
\$205.65	350 Ellis St.
X Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to co	emplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/21 Rpt: 23/26	#PROJECTREDTX	00082357
4 Date	5 Payee name	
01/31/2025	RightSide Compliance, LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$420.00	PO Box 341027	
X Expenditure from corporate funds	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Compliance Consulting
		Compliance Consulting
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	 light Office held
expenditure to benefit C/O		onice nelu
Date	Payee name	
01/20/2025	Surfshark	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$13.99	16192 Coastal Hwy	
Evpanditure from		
X Expenditure from corporate funds	Lewes, DE 19958	
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
		Software
Complete ONLY if direct	Candidate/Officeholder name Office sou	L aght Office held
expenditure to benefit C/OI		g
Data	Device serve	
Date	Payee name Surfebark	
03/20/2025	Surfshark	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$13.99	16192 Coastal Hwy	
Expenditure from		
corporate funds	Lewes, DE 19958	
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
		Software
Complete CNII V if direct	Condidate/Officeholder norms	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight 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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Leg	/Awards/Memorials Expense al Services		ages/0	Contract Labor		OTHER (enter a	category not listed above)	
		e Instruction Guide explai	ns now to con	npiet	-				
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Fi	lers)
Sch: 19/21 Rpt: 24/26	#PROJECTRE	DTX					00082357		
4 Date	5 Payee name								
04/20/2025	Surfshark								
6 Amount (\$)	7 Payee address;	City; Sta	ite; Zip Cod	de					
\$13.99	16192 Coasta	Hwy							
X Expenditure from corporate funds	Lewes, DE 19	958							
8 PURPOSE		ategories listed at the top of this	schodulo)	(b) I	Description				
OF		ad/Rental Expense	scriedule)	` , .]	_ :	outsio	de of Texas. Com	plete Schedule T.	
EXPENDITURE		adir toritar Exportor		į	Check if Austin,	TX,	officeholder living	g expense	
				-	Software				
9 Complete ONLY if direct	Candidate/Officel	nolder name	Office soug	ght			Office he	eld	
expenditure to benefit C/O	Н								
Date	Payee name								
05/21/2025	Surfshark								
Amount (\$)	Payee address;	City; Sta	ite; Zip Cod	de					
\$13.99	16192 Coasta	Hwy							
		,							
X Expenditure from corporate funds	Lewes, DE 19	958							
PURPOSE				(h) ı	Dogarintian				
OF		ategories listed at the top of this	schedule)	(v) 1	Description Check if travel of	nutsio	de of Texas, Com	plete Schedule T.	
EXPENDITURE	Office Overne	ad/Rental Expense		ļ			officeholder living		
					- Software				
Complete ONLY if direct	Candidate/Officel	nolder name	Office soug	ght			Office he	eld	
expenditure to benefit C/O	Н								
Date	Payee name								
06/20/2025	Surfshark								
		City: Sto	to: Zin Coo	40					
Amount (\$)	Payee address;	-	ite; Zip Cod	Je					
\$13.99	16192 Coasta	Hwy							
Expenditure from									
x corporate funds	Lewes, DE 19	958	_						
PURPOSE	(a) Category (See C	ategories listed at the top of this	schedule)	(b) I	Description				
OF EXPENDITURE	Office Overhe	ad/Rental Expense		[-			plete Schedule T.	
EXI ENDITORE				Ļ		TX,	officeholder living	g expense	
				;	Software				
Opening Children	0		O#:-	. I. d				-1-1	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officel H	loider name	Office soug	gnt			Office he	eia	
2 2 2 2 2 2 2 2 2 2									

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 File	r ID (Ethics Commission Filers)
Sch: 20/21 Rpt: 25/26	#PROJECTREDTX 000	082357
4 Date	5 Payee name	
02/20/2025	Surfshark	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$13.99	16192 Coastal Hwy	
X Expenditure from corporate funds	Lewes, DE 19958	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of	Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Check if Austin, TX, office	
	Software	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
Date 05/07/2025	Payee name Texas State Historical Association	
Amount (\$)	Payee address; City; State; Zip Code	
\$70.32		
,		
X Expenditure from corporate funds	Austin, TX 78703	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense Check if travel outside of Check if Austin, TX, office	
	Research	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
	1	
Date 01/22/2025	Payee name UPS Store	
Amount (\$)	Payee address; City; State; Zip Code	
\$45.66		
, , , , ,		
X Expenditure from corporate funds	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Texas. Complete Schedule T.
	Check if Austin, TX, office Shipping	moluci liviliy experise
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	DH	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 21/21 Rpt: 26/26	#PROJECTREDTX 00082357
4 Date	5 Payee name
01/21/2025	Vistaprint
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$48.69	95 Hayden Ave
X Expenditure from corporate funds	Lexington, MA 02421
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.
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H