CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete	e this form.	1 Filer ID (Ethics Commis 00086202		2 Total pages f	iled: 67
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Stanley Arthur			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME			CUEELY	07/15/2025	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		AST Gerdes		SUFFIX	0171372023	
	Stari	Jerues				
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE #; CITY	/ ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	PO Box 1060					<u> </u>
ADDRESS					Receipt #	Amount
Change of Address	Smithville, TX 78957					
	,				Date Processed	
					Date Imaged	
					Date illiaged	
5 CAMPAIGN	MS/MRS/MR F	IRST		MI		
TREASURER		amantha Laru	ıΔ	1411		
NAME	IVII 5.	amamma Laru	iC			
	NIOIALANE			OUEEN/		
		AST		SUFFIX		
	Sam	Serdes				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO B	OX PLEASE);	AP	r / SUITE #; CITY	γ; ST	ATE; ZIP CODE
ADDRESS	606 Gresham Street					
(Residence or Business)						
	Smithville, TX 78957					
7 0444041041	ADEA CODE DUONE		VTENICIONI			
7 CAMPAIGN TREASURER		NUMBER E	XTENSION			
PHONE	(512) 605-9998					
8 DEDODT						
8 REPORT TYPE	January 15	30th day before	election \square	Runoff	15th day after ca	ampaign treasurer
	July 3dilidary 15	John day Belore	Ciccion	ranon	appointment (off	
	X July 15	8th day before e	lection	Exceeded modified	Final Report (Att	tach C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	y Year	
COVERED	01/01/2025	TH	ROUGH	06/30/20)25	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X Pri	imary	Runoff	Other	
	03/03/2026	П	eneral	Special		
				ш.		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	IT (if known)	
III OFFICE	State Representative Distric	t 17			ntative District 17	
	Otate Representative Bistric			Ciate Represen	itative District 17	
		GO T	O PAGE 2			
1						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 67

13 C / OH NAME Gerdes, Stanley Arthur (The Honorable) 14 Filer ID (Etl 00086202						nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus may have been made without equired to report this information	the candidate's or offic	ceholder's ki	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ME			
Ш	GENERAL					
		COMMITTEE ADD	PRESS			
	SPECIFIC					
		COMMITTEE CAM	MPAIGN TREASURER NAME			
		COMMITTEE CAM	MPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER THA CONTRIBUTIONS MADE ELE		\$ \$	0.00
		CAL CONTRIBUTIO PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	73,729.09
EXPENDITURE TOTALS						3,067.40
4. TOTAL POLITICAL EXPENDITURES						127,375.14
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	73,967.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					-	
			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
				ole Stanley Arthur G		
			Signature of	Candidate of Officers	oluci	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		day
of	, 20, to c	ertify which, witness	my hand and seal of office.			
Signature of offi	cer administering	Printed name	of officer administering	Title of office	er administe	ring oath

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

				3 of 67
18 FILER NAME Gerdes, Sta	inley Arthur (The Honorable)	19 Filer ID 00086202	(Ethics Commis	ssion Filers)
20 SCHEDULE S			SUBTOTA	AL AMOUNT
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	73,229.09
2. X S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	121,762.09
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	5,613.05
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	1,927.32

	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete thi	s for	m.	1	Total pages Schedule A1: Sch: 1/19 Rpt: 4/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)			3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/30/2025	 Full name of contributor out-of-state PAC (II Aimone, John Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$200.00
_	Deinsinal	Victoria, TX 77904	- 10				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/25/2025	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 Dation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (II Axis Strategic Partners LLC Contributor address; City; State; Zip Code Austin, TX 78701	D#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (III Baker, Laura Contributor address; City; State; Zip Code Smithville, TX 78957				Amount of Contribution (\$)	\$52.05
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (II Blackridge Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			•				

	MONET	ARY POLITICAL CONTRIBUTI	ION	S		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	s forr	n.	1	Total pages Schedule A1: Sch: 2/19 Rpt: 5/67
2	FILER NAME Gerdes, Star	lley Arthur (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086202
4	Date 06/24/2025	 Full name of contributor			7	Amount of Contribution (\$) \$1,041.02
		Brenham, TX 77833				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)	
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID Brewer, Shelley Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$20.00
	Dringing aggr	Lockhart, TX 78644	_	Employer (See Instructions		
	Pilitipai occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 06/26/2025	Full name of contributor out-of-state PAC (IDBrundrett, Chris Contributor address; City; State; Zip Code	D#:			Amount of Contribution (\$) \$1,041.02
		Fredericksburg, TX 78624				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID Brymer, Daphni Contributor address; City; State; Zip Code Hutto, TX 78634				Amount of Contribution (\$) \$26.03
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID Brymer, Jimmy Contributor address; City; State; Zip Code Hutto, TX 78634				Amount of Contribution (\$) \$52.05
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/19 Rpt: 6/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	n Filers)
4	Date 06/25/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_		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#:_ Capital Leadership Fund Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
		,	, ,,			
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ CenterPoint Energy, Inc. PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77210				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Ceraldi, Sarah Contributor address; City; State; Zip Code Smithville, TX 75957			Amount of Contribution (\$)	\$26.03
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Citrano, Kyle Contributor address; City; State; Zip Code McGregor, TX 76657			Amount of Contribution (\$)	\$520.51
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/19 Rpt: 7/67	
2	FILER NAME Gerdes, Star	iley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/26/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Deireirel	Woodway, TX 76712	le Frankrick (On Instruction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID#: Connor, Geoffrey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Bastrop, TX 78602	1			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Considine, Travis Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$104.10
		San Antonio, TX 78209				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID#: Cyrier, John Contributor address; City; State; Zip Code Lockhart, TX 78644			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#: DTH Strategies, LLC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			ı			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/19 Rpt: 8/67	
2	FILER NAME Gerdes, Star	iley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	n Filers)
4	Date 06/26/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
		Buda, TX 78610				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Energy Transfer Partners Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
		Dallas, TX 75225				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor X out-of-state PAC (ID#: C Entergy Corp PAC (ENPAC) Contributor address; City; State; Zip Code	00363879		Amount of Contribution (\$)	\$2,500.00
		Little Rock, AR 72201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Etheredge, Charles Contributor address; City; State; Zip Code Smithville, TX 78957)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Gardella, Braedon Contributor address; City; State; Zip Code Smithville, TX 78957			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/19 Rpt: 9/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/24/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$52.05
_	Deinsinal	Smithville, TX 78957	O Frankrika (Constructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/24/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$104.10
	Principal occu	Smithville, TX 78957 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	i ililoipai occa	sation, con the (occ instructions)	Employer (See instructions	٠,		
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID#:_ Gerdes III, Herman (Trey) (Dr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Woodway, TX 76712				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/24/2025	Full name of contributor out-of-state PAC (ID#:_Gibbons, Wesley Contributor address; City; State; Zip Code Austin, TX 78704)	•	Amount of Contribution (\$)	\$1,041.02
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID#:_ Giesinger, Jeff Contributor address; City; State; Zip Code Brooklyn, NY 11231			Amount of Contribution (\$)	\$260.25
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1					
	The Instru	ction Guide explains how to cor	mplete this forr	n.	1	Total pages Schedule A1: Sch: 7/19 Rpt: 10/67	
2	FILER NAME Gerdes, Star	iley Arthur (The Honorable)			3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/27/2025	5 Full name of contributor out-o	of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00
_		Austin, TX 78701	- Ia				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/30/2025	Full name of contributor out-o Giraud, Deborah Contributor address; City; State; Zip 0	of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Smithville, TX 78957					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/30/2025	Full name of contributor out-o Giraud, John Contributor address; City; State; Zip 0	of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Smithville, TX 78957					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/26/2025	Glass, David	of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/30/2025	Graham, Thomas	of-state PAC (ID#:)		Amount of Contribution (\$)	\$4,164.06
	Principal occu Public relation	oation / Job title (See Instructions) ns		Employer (See Instructions Self)		
			,				

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/19 Rpt: 11/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)			3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/27/2025	5 Full name of contributor Haddock, Jerry	out-of-state PAC (ID#:_	·	7	Amount of Contribution (\$)	\$100.00
_		Houston, TX 77079			Ļ		
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instructions	s)		
	Date 06/27/2025	Full name of contributor Haddock, Stan Contributor address; City; S)		Amount of Contribution (\$)	\$3,123.05
	Principal occu	Rockwall, TX 75032 pation / Job title (See Instruction	e)	Employer (See Instructions	s)		
	Retired	pation / oob title (occ motraction	5)	Retired	<i>-</i> ,		
	Date 06/30/2025	Full name of contributor Haigler, Kathy Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
		Dale, TX 78616					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	Date 06/30/2025	Full name of contributor Hamilton, Matteson Contributor address; City; S Houston, TX 77005				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	Date 06/23/2025	Full name of contributor Harrington, Laura Contributor address; City; S Smithville, TX 78957	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.21
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 9/19 Rpt: 12/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)			3	Filer ID (Ethics Commissio 00086202	n Filers)
4	Date 06/25/2025	Hawkins, Joseph	t-of-state PAC (ID#: o Code)	7	Amount of Contribution (\$)	\$208.20
_	Dringing age	Amarillo, TX 79109	lo.	Employer (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/25/2025	Full name of contributor out HillCo PAC Contributor address; City; State; Zip)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/23/2025	Full name of contributor out Hoffman, Laurie Contributor address; City; State; Zip	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.82
		Bastrop, TX 78602					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/25/2025	Full name of contributor out Holzheauser, Craig Contributor address; City; State; Zip Austin, TX 78756)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/23/2025	Hurst, Janice	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.41
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains hov	v to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 10/19 Rpt: 13/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)				3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/30/2025	5 Full name of contributor Jackson, Kacee6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$4,164.06
_	Driverine Leave	Austin, TX 78701		_	Franksian (Cook batwatian			
8	Owner	pation / Job title (See Instruction	5)	9	Employer (See Instructions The 360 Company	5)		
	Date 06/30/2025	Full name of contributor Jahnke, Kyle Contributor address; City; S)		Amount of Contribution (\$)	\$1,041.02
		Fort Worth, TX 76116	, ,			Ĺ		
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor Johnson, Edward Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Houston, TX 77024						
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	5)		
	Date 06/28/2025	Full name of contributor Johnson, Morgan Contributor address; City; S Austin, TX 78704	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$260.25
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	<u> </u> 5)		
	Date 06/26/2025	Full name of contributor Kahanek, Elizabeth Contributor address; City; S Smithville, TX 78957	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	<u>(</u>		

	MONET	ARY POLITICAL CONTRIBU	TIONS			SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	nis form.		1	Total pages Schedule A1: Sch: 11/19 Rpt: 14/67	
2	FILER NAME Gerdes, Star	AME Stanley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	n Filers)	
4	Date 06/26/2025	 Full name of contributor	-		7	Amount of Contribution (\$)	\$100.00
_	Deignaignal	Smithville, TX 78957	lo 5	Javay (Can Instructions			
8	Principal occu	pation / Job title (See Instructions)	a Fuit	oloyer (See Instructions)		
	Date 06/25/2025	Full name of contributor out-of-state PAC Kampfer, Trey Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$260.25
		Dallas, TX 75238					
	Principal occu	pation / Job title (See Instructions)	Emp	oloyer (See Instructions	()		
	Date 06/25/2025	Full name of contributor out-of-state PAC Kampfer, Trey Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$780.76
		Dallas, TX 75238					
	Principal occu	oation / Job title (See Instructions)	Emp	oloyer (See Instructions)		
	Date 06/27/2025	Full name of contributor out-of-state PAC Kellar, Bobby Contributor address; City; State; Zip Code Smithville, TX 78957	-			Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Emp	oloyer (See Instructions	<u> </u>		
	Date 06/27/2025	Full name of contributor out-of-state PAC Kellar, Linda Contributor address; City; State; Zip Code Smithville, TX 78957				Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Emp	oloyer (See Instructions	<u> </u>		
			ı				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	truction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 12/19 Rpt: 15/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/26/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
		Bastrop, TX 78602				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Linthicum, Lane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Bakersfield, CA 93309 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Manager		DTOP			
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Liriano, Carlos Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Bastrop, TX 78602				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Macioce, Robert Contributor address; City; State; Zip Code Smithville, TX 78957			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Macioce, Robert Contributor address; City; State; Zip Code Smithville, TX 78957			Amount of Contribution (\$)	\$52.05
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how t	to complete this for	m.	1	Total pages Schedule A1: Sch: 13/19 Rpt: 16/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)			3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/27/2025	5 Full name of contributor Macioce, Sharon6 Contributor address; City; Stat	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
_	Deireciant	Smithville, TX 78957	- In		$\overline{\Gamma}$		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 06/27/2025	Full name of contributor Marquez, Brandy Contributor address; City; Stat)		Amount of Contribution (\$)	\$1,000.00
	Dringing aggr	Austin, TX 78735	1	Employer (See Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/28/2025	Full name of contributor Matise, Corbin Contributor address; City; Stat	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$260.25
		Smithville, TX 78957					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor McClaren, Robert Contributor address; City; Stat Cameron, TX 76520	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions McClaren Partners,LLC	5)		
	Date 06/30/2025	Full name of contributor McClellan, Jonathon Contributor address; City; State Sugar Land, TX 77479	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$260.25
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 14/19 Rpt: 17/67	
2	FILER NAME Gerdes, Star	IAME , Stanley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	n Filers)
4	Date 06/25/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
Ω	Dringinal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions	·,		
0	Principal occu	oalion7 Job title (See instructions)	e Employer (See instructions)		
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID#:_Moore, Julie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$520.51
		Austin, TX 78735		<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor			Amount of Contribution (\$)	\$260.25
		Austin, TX 78703				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_ Powers, Gay Contributor address; City; State; Zip Code Smithville, TX 78957			Amount of Contribution (\$)	\$52.05
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID#:_Ralph, Faith Contributor address; City; State; Zip Code Smithville, TX 78957			Amount of Contribution (\$)	\$20.82
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 15/19 Rpt: 18/67	
2	FILER NAME Gerdes, Star	NAME es, Stanley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/23/2025	 Full name of contributor	_	7	Amount of Contribution (\$)	\$25.00
		Smithville, TX 78957				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#: Ridley, Sara Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$520.51
	Principal occu	Austin, TX 78738 pation / Job title (See Instructions)	Employer (See Instructions	·/		
	i illicipai occu	sation, sob title (see instructions)	Employer (See manucuons	')		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#: Ron Lewis & Associates Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_Rural Friends of Texas Electric Cooperatives Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Schmidt, Bobby Contributor address; City; State; Zip Code Kyle, TX 78640			Amount of Contribution (\$)	\$2,500.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Schmidt Ranch	5)		
			,			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 16/19 Rpt: 19/67	
2	FILER NAME Gerdes, Star	R NAME es, Stanley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/26/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$104.10
_	Deignaignal annu	Bastrop, TX 78602	2. Faralous (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#: Schwertner, Jim Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Schwertner, TX 76573				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Springer, Lydia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Muenster, TX 76252				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Texas Beverage Alliance of the Texas Package S Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 17/19 Rpt: 20/67	
2	FILER NAME Gerdes, Star	iley Arthur (The Honorable)			3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/25/2025)	7	Amount of Contribution (\$)	\$1,000.00
_	D: : 1	Austin, TX 78701	la la				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/25/2025	Texas Our Texas PAC Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)		Employer (See Instructions)		
	•	,			,		
	Date 06/25/2025	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$104.10
		Leon Valley, TX 78238					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/30/2025	Timmreck, Lou Ann	of-state PAC (ID#:)		Amount of Contribution (\$)	\$104.10
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/26/2025	Todd, Richard	of-state PAC (ID#:)		Amount of Contribution (\$)	\$260.25
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 18/19 Rpt: 21/67	
2	FILER NAME Gerdes, Star	nley Arthur (The Honorable)		3	Filer ID (Ethics Commission 00086202	on Filers)
4	Date 06/27/2025	 Full name of contributor out-of-state PAC (ID#: Townsend, Trent Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$520.51
_		Austin, TX 78703		Ļ		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ıs)		
	Date 06/29/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,041.02
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	· ····o.pa. ooda			,		
	Date 06/25/2025	Full name of contributor)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)		
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID#: Weekley, Richard Contributor address; City; State; Zip Code Houston, TX 77027			Amount of Contribution (\$)	\$2,500.00
	Principal occu Developer	pation / Job title (See Instructions)	Employer (See Instruction Self	ıs)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#: Wholesale Beer Distributors Of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
			,			

MC	NET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE	A1
The	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 19/19 Rpt: 22/67	
2 FILEF		nley Arthur (The Honorable)		3	Filer ID (Ethics Commission F 00086202	ilers)
4 Date 06/25	5/2025	 Full name of contributor out-of-state PAC (ID#:_ Williams, Mark Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$250.00
		Austin, TX 78756				
8 Princi	ipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Cuide explains how to complete this	£ = 4100	1 Total pages Schedule A2:
The Instruction Guide explains how to complete this	TOTM.	Sch: 1/1 Rpt: 23/67
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Gerdes, Stanley Arthur (The Honorable)		00086202
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date 6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description
06/30/2025 HS Law PAC	6/30/2025 HS Law PAC	
7 Contributor address; City; State; Zip Code		\$250.00 Venue Expense for Campaign Event
		l i
Austin TV 70701		
Austin, TX 78701	11 Franks on (FOR NON	Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Date Full name of contributor out-of-state PAC (ID#:)	Amount of ! In-kind contribution
06/25/2025 Texas REALTORS PAC (TREPAC)		contribution (\$) description
Contributor address; City; State; Zip Code		\$250.00 Advertising for Campaign
		Event
Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor is a child law firm of parent(s) (if any) (FOR HIDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By 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/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: 1/34 Rpt: 24/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	01/15/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$153.35	PO Box 81226
		Seattle, WA 98108
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
		Supplies for Capitol Office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/07/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.94	PO Box 81226
		Seattle, WA 98108
	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
		Supplies for Capitol Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/20/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$147.19	PO Box 81226
		Seattle, WA 98108
	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
		Supplies for Capitol Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		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: 2/34 Rpt: 25/67	Gerdes, Stanley Arthur (The Honorable)	00086202
4	Date	5 Payee name	
	04/01/2025	Austinskyline Cleaning	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
U	\$269.54	2010 W Koenig Ln, Ste105	
	Ψ209.34	2010 W Roenig Lit, Ste103	
		Austin, TX 78756	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Onice Overhead/Atenda Expense	outside of Texas. Complete Schedule T.
		l H	TX, officeholder living expense ense for Officeholder Austin Housing
		Orealing Exp	erise for emberiolder / lastin riodsing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/O		Office field
	Date	Payee name	
	04/15/2025	Austinskyline Cleaning	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$269.54	2010 W Koenig Ln, Ste105	
		Austin, TX 78756	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
	EXPENDITORE	l	TX, officeholder living expense
		Cleaning Exp	ense for Officeholder Austin Housing
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/29/2025	Austinskyline Cleaning	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$269.54	2010 W Koenig Ln, Ste105	
		Austin, TX 78756	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	, , <u> </u>	outside of Texas. Complete Schedule T.
	EXPENDITURE	X Check if Austin,	TX, officeholder living expense
		Cleaning Exp	ense for Officeholder Austin Housing
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experiorare to belieff C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica		nmittee Legal Services Salaries/Wage:				OTHER (enter a	trict category not listed above))
	Credit Card Payment		The Instruction Guide explains how to compl	let	e this form.				
1	Total pages Schedule F1:	2	FILER NAME		[3	3	Filer ID	(Ethics Commission	Filers)
	Sch: 3/34 Rpt: 26/67		Gerdes, Stanley Arthur (The Honorable)				00086202		
4	Date	5	Payee name						
	05/13/2025		Austinskyline Cleaning						
6	Amount (\$)	7	Payee address; City; State; Zip Code						
٠	\$269.54	ľ	2010 W Koenig Ln, Ste105						
	Ψ200.04		2010 W Roenig En, Glotoo						
			Austin TV 707FC						
			Austin, TX 78756						
8	PURPOSE OF	(a)	6) (Con tamegemen mener an are top or anno constant)) [Description				
	EXPENDITURE		Office Overhead/Rental Expense	Ļ	=		le of Texas. Comp officeholder living		
								holder Austin Hou	ısina
						,,,,			g
9	Complete ONLY if direct		Candidate/Officeholder name Office sought	t			Office he	ald.	
9	expenditure to benefit C/OI		andidate/Officeriolder name Office sought	·			Office fie	au	
		_							
	Date		Payee name						
	05/27/2025		Austinskyline Cleaning						
	Amount (\$)		Payee address; City; State; Zip Code						
	\$269.54		2010 W Koenig Ln, Ste105						
			Austin, TX 78756						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b)) [Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	[Check if travel ou	utsio	le of Texas. Comp	olete Schedule T.	
	LAFENDITORE				X Check if Austin,				
				(Cleaning Expe	ens	se for Office	holder Austin Hou	using
		L							
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sought	t			Office he	eld	
	<u>'</u>								
	Date		Payee name						
	06/10/2025		Austinskyline Cleaning						
	Amount (\$)		Payee address; City; State; Zip Code						
	\$269.54		2010 W Koenig Ln, Ste105						
			Austin, TX 78756						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b)) [Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	[utsio	le of Texas. Comp	olete Schedule T.	
	EXPENDITURE		·				officeholder living		
				(Cleaning Expe	ens	se for Office	holder Austin Hou	using
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sought	t			Office he	eld	
	experialitate 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 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/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: 4/34 Rpt: 27/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	03/27/2025	Bastrop County Republican Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	443 Hwy 71 West
		Bastrop, TX 78602
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Party Event Sponsorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	04/10/2025	Berdoll Pecan Farm
	Amount (\$)	Payee address; City; State; Zip Code
	\$420.33	2626 Hwy 71 W
		Cedar Creek, TX 78612
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Pecans for Campaign Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	-
	Date	Payee name
	02/06/2025	Botard, Christina and Rob
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,500.00	3939 Ramble Creek Dr
		Missouri City, TX 77459
	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.
	-	\times \t
		Nental Expense for Officerolder Austin Flousing
	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 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	Committee Legal Services Salaries/Waq The Instruction Guide explains how to com	ges/C	Contract Labor		OTHER (enter a	category not listed above)
_	T		Pict	-	_	E". 15	/Ellete O	E1
1	Total pages Schedule F1:				3	Filer ID	(Ethics Commission	Filers)
	Sch: 5/34 Rpt: 28/67	Gerdes, Stanley Arthur (The Honorable)	_			00086202		
4	Date	Payee name						
	04/15/2025	Botard, Christina and Rob						
6	Amount (\$)	7 Payee address; City; State; Zip Code	Э					
	\$5,500.00	3939 Ramble Creek Dr						
		Missouri City, TX 77459						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)		Description				
	OF EXPENDITURE	Office Overhead/Rental Expense	Ĺ		outsi	ide of Texas. Com	olete Schedule T.	
	EXPENDITURE	·		_		, officeholder living		
			F	Rental Expen	se	for Officeho	lder Austin Hous	ing
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt			Office he	eld	
	experioration benefit C/O							
	Date	Payee name						
	05/15/2025	Botard, Christina and Rob						
	Amount (\$)	Payee address; City; State; Zip Code	e					
	\$5,500.00	3939 Ramble Creek Dr						
		Missouri City, TX 77459						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) (d	Description				
	OF EXPENDITURE	Office Overhead/Rental Expense	Ī	_		ide of Texas. Com		
	2/11/2/10/12					, officeholder living		
			ŀ	кепіаі ⊑хреп	se	ior Officerio	lder Austin Hous	ing
	Complete ONLY if direct	Condidate/Officeholder name Office country				Office he	J.d	
	expenditure to benefit C/OI	Candidate/Officeholder name Office sough	π			Office fie	eiu	
			_					
	Date	Payee name						
	01/04/2025	Burleson County Republican Party						
	Amount (\$)	Payee address; City; State; Zip Code	Э					
	\$500.00	PO Box 770						
		Caldwell , TX 77836						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	o) [Description				
	OF EXPENDITURE	Event Expense	Ţ			ide of Texas. Com		
			Ļ			, officeholder living	expense	
			:	Sponsorship (UI I	rany ⊏vent		
	Complete ONII V if direct	Condidate/Officeholder norse				Office I-	uld.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	IL			Office he	au	
	•							

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: 6/34 Rpt: 29/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	03/24/2025	Caldwell County Fair Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	PO Box 1046
		Lockhart, TX 78644
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Chantable Contribution
_	Compulate ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	•	
	Date	Payee name
	03/24/2025	Cameron Area Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	102 E. First St
		Cameron, TX 76520
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sponsorship of Chamber Event
		Sponsorship of Chamber Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/21/2025	Capitol Commission Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	104 Casa Verde Cove
		Georgetown, TX 78633
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Charitable Contribution
_	Complete ONLY !! -!!	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 2 25 3/01	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries	/Wages	/Contract Labor		OTHER (enter a	category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission F	-ilers)
Sch: 7/34 Rpt: 30/67	Gerdes, Sta	nley Arthur (The H	onorable)				00086202		
4 Date	5 Payee name								
01/14/2025	Catalyst Ad	visors Group							
6 Amount (\$) \$1,131.78	7 Payee address 1108 Lavac Austin, TX 7	a St 110-506	State; Zip C	ode					
8 PURPOSE	(a) Category (Se	ee Categories listed at the to	p of this schedule)	(b)	Description				
OF EXPENDITURE	Advertising				Check if Austin	, TX	de of Texas. Com officeholder living ribution of D		
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Offi H	ceholder name	Office so	ught			Office he	eld	
Date	Payee name								
01/14/2025	Catalyst Ad	visors Group							
Amount (\$) \$2,500.00		a St 110-506	State; Zip C	ode					
	Austin, TX 7	78701							
PURPOSE OF EXPENDITURE	(a) Category _{(Se} Consulting I	ee Categories listed at the to Expense	p of this schedule)	(b)	=	, TX	de of Texas. Com officeholder living ulting Fee		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Offi H	ceholder name	Office so	ught			Office he	eld	
Date	Payee name								
01/29/2025	Catalyst Ad	visors Group							
Amount (\$) \$2,166.34	Payee addres	ss; City; a St 110-506	State; Zip C	ode					
	Austin, TX 7	'8701							
PURPOSE OF EXPENDITURE	(a) Category (Se Advertising	ee Categories listed at the to Expense	p of this schedule)	(b)	Check if Austin	, TX	de of Texas. Com officeholder living ribution of D		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Offi H	ceholder name	Office so	ught			Office he	eld	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	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: Sch: 8/34 Rpt: 31/67	2 FILER NAME Gerdes, Stanley Arthur (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086202
4	Date	5 Payee name
	01/31/2025	Catalyst Advisors Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	1108 Lavaca St 110-506
		Austin, TX 78701
8	PURPOSE	
°	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Consulting Fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oi	1
	Date	Payee name
	02/21/2025	Catalyst Advisors Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$945.02	1108 Lavaca St 110-506
	Ψ0-10.02	1100 Lavada Ot 110 000
		Austin, TX 78701
	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 Design and Distribution of Digital Constituent
		Outreach
_	Complete ONLY if direct	Condidate/Office holder name Office county
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/04/2025	Catalyst Advisors Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1108 Lavaca St 110-506
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Consulting Fee
L		
	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 - 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: 9/34 Rpt: 32/67 Gerdes, Stanley Arthur (The Honorable) 00086202 4 Date Payee name 04/02/2025 Catalyst Advisors Group 6 Amount (\$) Payee address; City; State; Zip Code \$2,500.00 1108 Lavaca St 110-506 Austin, TX 78701 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. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Consulting Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/02/2025 Catalyst Advisors Group Amount (\$) Payee address; State; Zip Code City; \$2,500.00 1108 Lavaca St 110-506 Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Consulting Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/14/2025 Catalyst Advisors Group Amount (\$) Payee address: City: State; Zip Code \$1,597.80 1108 Lavaca St 110-506 Austin, TX 78701 **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 Design and Distribution of Digital Constituent Outreach Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

ense Travel in Districtions Travel Out of Districtions OTHER (enter a contract Labor OTHER (ente

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/34 Rpt: 33/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	06/04/2025	Catalyst Advisors Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	1108 Lavaca St 110-506
		Austin, TX 78701
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Consulting Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	01/10/2025	Ceraldi, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	506 Main Street
		Smithville, TX 78957
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/10/2025	Ceraldi, Sarah
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 506 Main Street
	Ψ1,000.00	500 Main Sheet
		Smithville, TX 78957
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г		

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:		3 Filer ID (Ethics Commission Filers)
	Sch: 11/34 Rpt: 34/67	Gerdes, Stanley Arthur (The Honorable)	00086202
4		5 Payee name	
	03/17/2025	Ceraldi, Sarah	
6	` ′	7 Payee address; City; State; Zip Code	
	\$1,000.00	506 Main Street	
	!	Conide ille TV 70057	
_		Smithville, TX 78957	
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		n, TX, officeholder living expense
	!	Campaign C	ontract Labor
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	——————————————————————————————————————		
	Date	Payee name	
	04/16/2025	Ceraldi, Sarah	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	506 Main Street	
	!		
		Smithville, TX 78957	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/ Wages/ Contract Eabor	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	!		ontract Labor
	!		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	1	
	Date	Payee name	
	05/22/2025	Ceraldi, Sarah	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	506 Main Street	
	l		
		Smithville, TX 78957	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/ Wages/ Contract Eabor	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	l		ontract Labor
	!		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/34 Rpt: 35/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	06/02/2025	Ceraldi, Sarah
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	506 Main Street
		Smithville, TX 78957
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
		Campaign Contidot Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/02/2025	Ceraldi, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	506 Main Street
		Smithville, TX 78957
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Contract Labor
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/28/2025	Clayton Spangler Photographic Design
	Amount (\$)	Payee address; City; State; Zip Code
	\$549.00	235 Point Lick Dr
		Charleston, TX 25306
	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 House Panoramic Photograph for Capitol Office
		nouse Panoramic Photograph for Capitol Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political 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: 13/34 Rpt: 36/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	04/02/2025	Dans, Adrienne
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	827 W. 12th St., Apt 504
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
		Sampaig. Format Last.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/01/2025	Dans, Adrienne
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	827 W. 12th St., Apt 504
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
		Sampanga Samusia Linas
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/28/2025	Davis, Ella
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	415 Young School House Road
		Smithville, TX 78957
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	-	Candidate/Officeholder/Political Committee Contribution for Bastrop Jr Livestock Show
		Contribution for basilop of Livestock Show
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	U

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

	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: 14/34 Rpt: 37/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	05/22/2025	Elgin Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	30 N Main St
		Elgin, TX 78621
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sponsorship of Chamber Event
		Sponsorship of Chamber Event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/Ol	
	Date	Payso nama
	05/21/2025	Payee name Friends of Main Street
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 114 S. Echols St.
	\$1,000.00	114 S. EGIOIS St.
		Coldwell TV 77026
		Caldwell, TX 77836
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Contributions/Donations Made Ry
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Charitable Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/10/2025	Gardella, Braedon
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Burleson St
		Smithville, TX 78957
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Campaign Contract Labor
		Campaign Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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: 15/34 Rpt: 38/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	02/04/2025	Gardella, Braedon
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$500.00	502 Burleson St
		Smithville, TX 78957
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	d G
F	Date	Payee name
l	03/11/2025	Gardella, Braedon
┝	Amount (\$)	Payee address; City; State; Zip Code
l	\$500.00	502 Burleson St
	,	
		Smithville, TX 78957
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
H	Data	Development
	Date 04/16/2025	Payee name Gardella, Braedon
┝		
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 502 Burleson St
	Ψ1,000.00	302 Bulle3011 St
		Smithville, TX 78957
L	PURPOSE	
l	OF	(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.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experiulture to beliefit C/OI	'

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 16/34 Rpt: 39/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	05/22/2025	Gardella, Braedon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	502 Burleson St
		Smithville, TX 78957
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/01/2025	Gardella, Braedon
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	502 Burleson St
		Smithville, TX 78957
	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
		Campaign Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date 01/02/2025	Payee name
		Gerdes, Stan
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,110.84	606 Gresham St
		Smithville, TX 78957
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Repayment for Expenses Listed on Prior Sch G
		Repayment for Expenses Listed on their don't
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	U

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: 17/34 Rpt: 40/67	2 FILER NAME Gerdes, Stanley Arthur (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086202
4	Date 02/06/2025	5 Payee name HEB	
6	Amount (\$) \$244.42	7 Payee address; City; State; Zip Code 2652 Lake Austin Blvd. Austin, TX 78703	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense Capitol Office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date 03/05/2025	Payee name HEB	
	Amount (\$) \$286.79	Payee address; City; State; Zip Code 2652 Lake Austin Blvd. Austin, TX 78703	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Capitol Office
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date 03/15/2025	Payee name HEB	
	Amount (\$) \$401.43	Payee address; City; State; Zip Code 2652 Lake Austin Blvd.	
		Austin, TX 78703	
	PURPOSE OF EXPENDITURE	Onice Overnedd/Nental Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense Capitol Office
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T.1 C.1.1 =:		
1	Total pages Schedule F1:		
	Sch: 18/34 Rpt: 41/67	Gerdes, Stanley Arthur (The Honorable) 00086202	
4	Date	5 Payee name	
L	03/26/2025	HEB	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$154.50	2652 Lake Austin Blvd.	
		Austin, TX 78703	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for Capitol Office	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	PH	
	Date	Payee name	
	04/16/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$283.92	2652 Lake Austin Blvd.	
		Austin, TX 78703	
\vdash	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	
		Supplies for Capitol Office	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH	
	Date	Payee name	
	04/30/2025	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$260.43	2652 Lake Austin Blvd.	
			
		Austin, TX 78703	
_	DUDDOCT	To the state of th	
	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	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for Capitol Office	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 19/34 Rpt: 42/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	05/16/2025	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$228.96	2652 Lake Austin Blvd.
		Austin, TX 78703
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 Supplies for Capitol Office
		Supplies for Suprior Office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Dougo nama
		Payee name
	01/03/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$57.64	10019 S I-35 Frontage R
		Austin, TX 78747
	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 Water for Capitol Office
		water for Capitor Office
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 02/03/2025	Payee name Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.65	10019 S I-35 Frontage R
		Austin, TX 78747
	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 Water for Capitol Office
		water for Capitor Office
_	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 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: 20/34 Rpt: 43/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	03/05/2025	Hill Country Springs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.65	10019 S I-35 Frontage R
		Austin, TX 78747
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 Water for Capitol Office
		water for Suprior Since
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	04/01/2025	Hill Country Springs
H	Amount (\$)	Payee address; City; State; Zip Code
	\$64.65	10019 S I-35 Frontage R
	Ψ04.03	10013 3 F-33 Frontage K
		A
		Austin, TX 78747
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Water for Capitol Office
		Transfer Capital Cities
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/01/2025	Hill Country Springs
H	Amount (\$)	Payee address; City; State; Zip Code
	\$144.64	10019 S I-35 Frontage R
	Ψ144.04	10010 0 1 00 1 1011tage 10
		Austin, TX 78747
	DUDDOCE	I m
	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	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Water for Capitol Office
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
1		
ı		

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 21/34 Rpt: 44/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	06/02/2025	Hill Country Springs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.65	10019 S I-35 Frontage R
		Austin, TX 78747
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
		Water for Capitol Office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<u> </u>
	Date	Payee name
	03/14/2025	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$556.21	779 Highway 71 W
		Bastrop, TX 78602
	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
		Decoration for Capitol Office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit C/O	'
	Date	Payee name
	04/05/2025	Josephine House
	Amount (\$)	Payee address; City; State; Zip Code
	\$303.57	1601 Waterston Ave
		Austin TV 70703
	DUDECCE	Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meal with Staff to Discuss Officeholder Issues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 3.5 12 12 13.5 15.5 15.5 15.5 15.5 15.5 15.5 15.5	

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: 22/34 Rpt: 45/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	01/18/2025	Lee County Law Enforcement Support Organization (LCLESO)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	PO Box 1262
		Giddings, TX 78942
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Tickets for COH to Attend Event
		Fickers for COTT to Attend Event
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	01/18/2025	Lee County Law Enforcement Support Organization (LCLESO)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,750.00	PO Box 1262
		Giddings, TX 78942
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Chantable Contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	06/18/2025	Legislative Solutions
	Amount (\$)	Payee address; City; State; Zip Code
	\$380.00	PO Box 5643
L		Austin, TX 78763
	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
		Advertising for Campaign Event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	•	

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 Com

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	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: 23/34 Rpt: 46/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	05/11/2025	Lucky Robot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$226.85	1303 S Congress Ave
L		Austin, TX 78704
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 with Staff to Discuss Officeholder Issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	06/07/2025	Makoto Fin
	Amount (\$)	Payee address; City; State; Zip Code
	\$401.40	200 Massachusetts Ave NW Suite 150
		Washington, DC 20001
	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
		Meal While Traveling for COH Related Meetings
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/10/2025	Neptune, Morgan
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	170 Kingfisher Ln
		Kyle, TX 78640
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor
		Campaign Contract Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 comple	te this form.
1	Total pages Schedule F1: Sch: 24/34 Rpt: 47/67	FILER NAME Gerdes, Stanley Arthur (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086202
4	Date 02/04/2025	5 Payee name Neptune, Morgan	'
6	Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 170 Kingfisher Ln	
8	PURPOSE OF EXPENDITURE	Kyle, TX 78640 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 03/03/2025 Amount (\$) \$2,000.00	Payee name Neptune, Morgan Payee address; City; State; Zip Code 170 Kingfisher Ln	
	PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 04/02/2025	Payee name Neptune, Morgan	
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 170 Kingfisher Ln Kyle, TX 78640	
	PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/34 Rpt: 48/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	05/05/2025	Neptune, Morgan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	170 Kingfisher Ln
		Kyle, TX 78640
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Contract Labor
		Campaigh Contract Eabor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/01/2025	Neptune, Morgan
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	170 Kingfisher Ln
		Kyle, TX 78640
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/01/2025	Neptune, Morgan
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	170 Kingfisher Ln
		Kyle, TX 78640
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Campaign Contract Labor
		Campaigh Contract Labor
_	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 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 con	nple	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 26/34 Rpt: 49/67	Gerdes, Stanley Arthur (The Honorable)		00086202
4	Date	5 Payee name		
	02/07/2025	Republican Women of Milam County		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$310.00	P. O. Box 535		
		Rockdale, TX 76567		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	OF	Event Expense	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	·		Check if Austin, TX, officeholder living expense
				GOP Women Event Sponsorship
L				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ght	Office held
┕				
	Date	Payee name		
	06/02/2025	Rockdale Girls Softball League (RGSL)		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$1,000.00	622 Co Rd 305		
		Rockdale, TX 76567		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense Charitable Contribution
				Chanada Contibution
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/O		,	
-	Date	Payee name		
	01/24/2025	Rockdale Rotary Club		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$500.00	PO Box 294	ic.	
	φοσο.σσ	1 0 Box 254		
		Rockdale, TX 76567		
	DUDDOG		<i>.</i>	<u></u>
	PURPOSE OF	2 ((a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense
				Sponsorship for Club Event
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/34 Rpt: 50/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	02/10/2025	Smithville Jamboree
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	317 Main St
		Smithville , TX 78957
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Chanasis contribution to contribution in Figure
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	01/16/2025	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$479.40	2702 Love Field Drive
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Expense for Flight Change (Original Flight Booking
		Previously Reported)
	Commiste ONLY if divest	
	Complete ONLY if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/25/2025	Squarespace, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$389.70	225 Varick St., 12th Floor
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign Technology Expense
	Commiste ONLY if direct	Condidate/Office helder no year.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	<u> </u>	

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 Exp Legal Services The Instruction Guide	ense Prir Sal	-	se s/Contract Labor	Travel	in District Out of Dis R (enter a	trict category not listed above)
1	Total pages Schedule F1:						3 Filer I		(Ethics Commission Filers)
	Sch: 28/34 Rpt: 51/67	Gerdes, St	anley Arthur (The H	onorable)			0008	6202	
4	Date	5 Payee name							
	03/07/2025	Squarespa							
6	Amount (\$)	7 Payee addre	•	State; Zi	p Code				
	\$294.22	225 Varick	St., 12th Floor						
		New York,	NY 10014						
8	PURPOSE	(a) Category (S	See Categories listed at the to	p of this schedule	e) (b)	Description			
	OF EXPENDITURE	Advertising	Expense			Check if travel Check if Austin			olete Schedule T.
						Campaign W			спрепос
								3	
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office	e sought		C	office he	eld
H	Date	Payee name	<u> </u>						
	03/13/2025	Squarespa							
	Amount (\$)	Payee addre		State; Zi	p Code				
	\$127.92	225 Varick	St., 12th Floor						
		New York,	NY 10014						
	PURPOSE	(a) Category (S	See Categories listed at the to	p of this schedule	(b)	Description			
	OF EXPENDITURE	Office Ove	rhead/Rental Expen	ise		Check if travel Check if Austin			plete Schedule T.
						Campaign Er			слропас
						1 9		5	
	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office	e sought		C	ffice he	eld
H	Date	Payee name	<u> </u>						
	01/10/2025	Target							
	Amount (\$)	Payee addre	ess; City;	State; Zi	p Code				
	\$318.90	5621 N IH	35						
		Austin, TX	78723						
	PURPOSE	(a) Category (s	See Categories listed at the to	p of this schedule	(b)	Description			
	OF EXPENDITURE	Office Ove	rhead/Rental Expen	ise		ш			plete Schedule T.
						Check if Austin			expense
	Complete ONLY if direct	L Candidate/Off	iceholder name	Office	e sought		C	office he	eld
	expenditure to benefit C/O	H			J				

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/34 Rpt: 52/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	03/12/2025	Texas Conservative Coalition
6	Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code P.O. Box 2659
		Austin, TX 78768
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 Officeholder Membership Dues
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/26/2025	Texas Fire Walkers
	Amount (\$) \$1,600.00	Payee address; City; State; Zip Code 3004 S SH 304
		Rosanky, TX 78953
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Charitable Contribution
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/18/2025	Texas House Republican Caucus
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 13305
		Austin, TX 78711
	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 Officeholder Membership Dues
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to con	nplete	this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 30/34 Rpt: 53/67	Gerdes, Stanley Arthur (The Honorable)		00086202
4	Date	5 Payee name		
	06/08/2025	The Liberty Tavern		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	le	
	\$509.70	3195 Wilson Blvd.		
		Arlington, VA 22201		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
			L	Check if Austin, TX, officeholder living expense Meal with Veterans to Discuss Officeholder Issues
			14	with veterans to biseass emechation issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sout	ıht	Office held
ľ	expenditure to benefit C/O		,	
H	Date	Payee name		
	01/24/2025	Timmreck, Hannah		
_	Amount (\$)	Payee address; City; State; Zip Cod	<u>ام</u>	
	\$1,000.00	623 Diamond Leaf Lane	ic	
	Ψ1,000.00	023 Diamona Lear Lane		
		Houston TV 77070		
		Houston, TX 77079		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	Description
l	OF		` ´ _	Check if travel outside of Texas, Complete Schedule T
	OF EXPENDITURE	Salaries/Wages/Contract Labor	֟֝֝֟֝֞֝֟֝֟֝֟֝֟֝֟֝֟֝֟֝֟֝֟֝֟ ֓֞֓֞֞֞	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				_
				Check if Austin, TX, officeholder living expense
	EXPENDITURE Complete ONLY if direct	Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug		Check if Austin, TX, officeholder living expense
	EXPENDITURE	Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug		Campaign Contract Labor
_	EXPENDITURE Complete ONLY if direct	Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug		Campaign Contract Labor
_	Complete ONLY if direct expenditure to benefit C/O	Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug		Campaign Contract Labor
_	Complete ONLY if direct expenditure to benefit C/Ol	Salaries/Wages/Contract Labor Candidate/Officeholder name Office souge Payee name	L C yht	Campaign Contract Labor
_	Complete ONLY if direct expenditure to benefit C/OhDate 04/12/2025	Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug Payee name Timmreck, Hannah	L C yht	Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/OFDate 04/12/2025 Amount (\$)	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Coo	L C yht	Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/OFDate 04/12/2025 Amount (\$)	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Coo	L C yht	Campaign Contract Labor
_	Complete ONLY if direct expenditure to benefit C/OFDate 04/12/2025 Amount (\$)	Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079	C C	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held
	Complete ONLY if direct expenditure to benefit C/OFDate 04/12/2025 Amount (\$) \$1,000.00 PURPOSE OF	Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079	C C	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held Description Check if travel outside of Texas. Complete Schedule T.
	Complete ONLY if direct expenditure to benefit C/Ol Date 04/12/2025 Amount (\$) \$1,000.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079 (a) Category (See Categories listed at the top of this schedule)	C C C C C C C C C C C C C C C C C C C	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OFDate 04/12/2025 Amount (\$) \$1,000.00 PURPOSE OF	Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079 (a) Category (See Categories listed at the top of this schedule)	C C C C C C C C C C C C C C C C C C C	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held Description Check if travel outside of Texas. Complete Schedule T.
	Complete ONLY if direct expenditure to benefit C/OFDate 04/12/2025 Amount (\$) \$1,000.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Control Contro	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/OFDate 04/12/2025 Amount (\$) \$1,000.00 PURPOSE OF	Candidate/Officeholder name Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug	Control Contro	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Ole Date 04/12/2025 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug	Control Contro	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/Ole Date 04/12/2025 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Candidate/Officeholder name Payee name Timmreck, Hannah Payee address; City; State; Zip Cod 623 Diamond Leaf Lane Houston, TX 77079 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug	Control Contro	Check if Austin, TX, officeholder living expense Campaign Contract Labor Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor

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 Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District 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: 31/34 Rpt: 54/67 Gerdes, Stanley Arthur (The Honorable) 00086202 4 Date Payee name 06/20/2025 **USPS** 6 Amount (\$) Payee address; City; State; Zip Code \$266.00 400 Main St. Smithville, TX 78957 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. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign PO Box Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/30/2025 Uchiko Amount (\$) Payee address; City; State; Zip Code \$288.70 4200 N. Lamar, Suite 140 Austin, TX 78756 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal with Staff to Discuss Officeholder Issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/08/2025 Watson, Ben Amount (\$) Payee address: City: State; Zip Code \$2,000.00 PO Box 2910 Austin, TX 78767 **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 Campaign Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense 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 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: 32/34 Rpt: 55/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
l	02/04/2025	Watson, Ben
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	PO Box 2910
l		
l		Austin, TX 78767
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Campaign Contract Labor
Ļ		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕	'	
l	Date	Payee name
L	03/11/2025	Watson, Ben
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$2,000.00	PO Box 2910
l		
l		Austin, TX 78767
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Campaign Contract Labor
		Sampaight Sontiact Labor
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/OI	
H	Date	Payee name
l	04/16/2025	Watson, Ben
┝	Amount (\$)	Payee address; City; State; Zip Code
l	\$2,000.00	PO Box 2910
	, ,	
l		Austin, TX 78767
┝	PURPOSE	
l	OF	(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.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Campaign Contract Labor
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientale 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 Comm

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 33/34 Rpt: 56/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	05/05/2025	Watson, Ben
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	PO Box 2910
		Austin, TX 78767
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Campaign Contract Labor
		Campaigh Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
-	Date	Dougo nama
	06/01/2025	Payee name Watson, Ron
		Watson, Ben
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	PO Box 2910
		Austin, TX 78767
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor
		Campaigh Contract Labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Device same
	Date 06/01/2025	Payee name Watson, Ben
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	PO Box 2910
		Austin, TX 78767
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor
		Campaign Contract Labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor 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: 34/34 Rpt: 57/67	Gerdes, Stanley Arthur (The Honorable) 00086202
4	Date	5 Payee name
	01/30/2025	Watson, Ben
6	Amount (\$) \$45.01	7 Payee address; City; State; Zip Code PO Box 2910 Austin, TX 78767
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement; Not Reimbursed by State; Travel for COH Related Business, 64.3 mi @ \$.70/mi
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/23/2025	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,287.95	1776 Wilson Blvd Suite 530
	·	
		Arlington, VA 22209
	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
		Processing Fees for Online Campaign Contributions: Jun 23-30
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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: 1/9 Rpt: 58/67 Gerdes, Stanley Arthur (The Honorable) 00086202 Date Payee name 01/17/2025 Airbnb Payee address; Amount (\$) City; State; Zip Code \$515.56 888 Brannan St Reimbursement from political contributions Х intended San Francisco, CA 94103 **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 Travel Out of District **EXPENDITURE** Lodging for Officeholder Trip to Attend Inauguration (Non-Refundable, Cancelled trip) Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2025 Boudro's Amount (\$) Payee address; City; State; Zip Code \$151.66 421 East Commerce St Reimbursement from political contributions Χ San Antonio, TX 78205 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 Food/Beverage Expense **EXPENDITURE** Meal to Discuss Officeholder Issues Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 04/12/2025 Costco Wholesale Payee address; City; State; Zip Code Amount (\$) \$77.24 10401 Research Blvd Reimbursement from Χ political contributions intended Austin, TX 78759 **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 Office Overhead/Rental Expense **EXPENDITURE** Supplies for Capitol Office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	g/Banking Fees g/Expense Food/Beverage Expense ate/Officeholder/Political Committee d 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 lains how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 2/9 Rpt: 59/67		Gerdes, Stanley Arthur (The Honorable	?)			00086202		
4	Date 03/18/2025	5	Payee name Elizabeth Street Cafe						
6	Amount (\$) \$74.56	7	Payee address; City; State; 1501 S 1st St	Zip Co	ode				
	X political contributions intended		Austin, TX 78704						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	(b) Description	CI	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense aff to Discuss Officeholder Issues		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		
	Date		Payee name						
	04/03/2025		Elizabeth Street Cafe						
	Amount (\$)			Zip Co	ode				
	\$89.35		1501 S 1st St						
	Reimbursement from political contributions intended		Austin, TX 78704						
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	Description	= -	neck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense		
	EXPENDITURE		Food/Beverage Expense		Meal with Capitol	_	aff to Discuss Officeholder Issues		
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		
	Date 04/15/2025		Payee name Elizabeth Street Cafe						
	Amount (\$) \$64.48		Payee address; City; State; 1501 S 1st St	Zip Co	ode				
	Reimbursement from political contributions intended		Austin, TX 78704						
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	Description	_	neck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense		
	EXPENDITURE		Food/Beverage Expense		Meal with Capitol	_	aff to Discuss Officeholder Issues		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Fees Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ov Polling Ex Printing E Salaries/	Expense Wages/Contract Labor	Solicitation/Puntinasing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 3/9 Rpt: 60/67		Gerdes, Stanley Arthur (The Honorable	·)		00086202
4	Date	5	Payee name			
	04/22/2025		Elizabeth Street Cafe			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode	
	\$57.88		1501 S 1st St			
	Reimbursement from political contributions intended		Austin, TX 78704			
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF	l` <i>`</i>	Food/Beverage Expense	,	l`´	Check if Austin, TX, officeholder living expense
	EXPENDITURE		. 000/2010:age =.xpo00		Meal with Capito	Staff to Discuss Officeholder Issues
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought	Office held
	Date		Payee name			
	05/07/2025		Elizabeth Street Cafe			
	Amount (\$)	T	Payee address; City; State;	Zip Co	ode	
	\$94.42		1501 S 1st St			
	Reimbursement from political contributions intended		Austin, TX 78704			
	PURPOSE		Category (See Categories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF		Food/Beverage Expense	,		Check if Austin, TX, officeholder living expense
	EXPENDITURE		ů .		Meal with Capito	Staff to Discuss Officeholder Issues
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought	Office held
	Date		Payee name			
	05/20/2025		Elizabeth Street Cafe			
	Amount (\$)		Payee address; City; State;	Zip Co	ode	
	\$99.99		1501 S 1st St			
	Reimbursement from political contributions intended		Austin, TX 78704			
	PURPOSE		Category (See Categories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Food/Beverage Expense		[Check if Austin, TX, officeholder living expense
					Meal with Capito	l Staff to Discuss Officeholder Issues
	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polli y - Gift/Awards/Memorials Expense Prin al Committee Legal Services Sala	ce Overhead/Rental Expense ing Expense ting Expense tries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	·	The Instruction Guide explains how	to complete this form.	
1	Total pages Schedule G: Sch: 4/9 Rpt: 61/67	2 FILER NAME Gerdes, Stanley Arthur (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086202
4	Date			
4	05/28/2025	5 Payee name Elizabeth Street Cafe		
6	Amount (\$)	7 Payee address; City; State; Zip	Code	
	\$99.60	1501 S 1st St		
	Reimbursement from			
	X political contributions intended	Austin, TX 78704		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
			Meal with Capitol	Staff to Discuss Officeholder Issues
9		Candidate/Officeholder name	Office sought	Office held
	expenditure to benefit C/OH			
	Date	Payee name		
	01/31/2025	Gerdes, Stan		
	Amount (\$)	Payee address; City; State; Zig	Code	
	\$605.15	606 Gresham St		
	Reimbursement from			
	y political contributions intended	Smithville, TX 78957		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense
				rsement; Travel for COH Related Duties; er mi; Not Reimbursed by State
	Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
	expenditure to benefit			
	C/OH			
	Date	Payee name		
	02/28/2025	Gerdes, Stan		
\vdash	Amount (\$)	Payee address; City; State; Zig	Code	
	\$1,043.77	606 Gresham St		
	X Reimbursement from political contributions intended	Smithville, TX 78957		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense
				sement; Travel for COH Related Duties; per mi; Not Reimbursed by State
	expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
L	C/OH			

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 5/9 Rpt: 62/67		Gerdes, Stanley Arthur (The Honorable))			00086202
4	Date	5	Payee name				
	03/31/2025		Gerdes, Stan				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode		
	\$954.80		606 Gresham St				
	Reimbursement from political contributions intended		Smithville, TX 78957				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Travel Out of District			CI	neck if Austin, TX, officeholder living expense
	EXPENDITURE						ment; Travel for COH Related Duties; mi; Not Reimbursed by State
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	05/31/2025		Gerdes, Stan				
	Amount (\$)		Payee address; City; State;	Zip Co	ode		
	\$393.40		606 Gresham St				
	X Reimbursement from political contributions intended		Smithville, TX 78957				
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description [CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Travel Out of District			Cl	heck if Austin, TX, officeholder living expense
							ment; Travel for COH Related Duties; ni; Not Reimbursed by State
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	05/31/2025		Gerdes, Stan				
	Amount (\$)	Г	Payee address; City; State;	Zip Co	ode		
	\$561.40		606 Gresham St				
	Reimbursement from political contributions intended		Smithville, TX 78957				
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Travel Out of District			CI	heck if Austin, TX, officeholder living expense
							ment; Travel for COH Related Duties; ni; Not Reimbursed by State
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held

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 Legal Services The Instruction Guide explains	Printing E Salaries/\	Polling Expense Travel in District Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed a ow to complete this form.					
1	Total pages Schedule G:	2 FILER NAME					,	Commission Filers)		
	Sch: 6/9 Rpt: 63/67	Gerdes, St			00086202					
4	Date	5 Payee name								
	03/10/2025	Hobby Lobby								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$15.14	779 Highw	779 Highway 71 W							
	X Reimbursement from political contributions intended	Bastrop, T	X 78602							
8	PURPOSE	(a) Category (See Categories listed at the top of this so	chedule)	(b) Description	=		xas. Complete Schedule T.		
	OF EXPENDITURE	Office Ove	Office Overhead/Rental Expense							
			Decorations for Capitol Office							
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office h	neld		
	Date	Payee name	е							
	03/24/2025	Hobby Lob	Hobby Lobby							
	Amount (\$)	Payee addr	e address; City; State; Zip Code							
	\$91.50	779 Highway 71 W								
	Reimbursement from political contributions intended									
	PURPOSE OF	1	See Categories listed at the top of this so	hedule)	Description	=		xas. Complete Schedule T.		
EXPENDITURE		Office Ove	rhead/Rental Expense		Decorations for (_	eck if Austin, TX, officeho	older living expense		
					Decorations for C	capi	itoi Onice			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					neld			
	Date	Payee name	e							
	03/28/2025	Hobby Lob	oby							
	Amount (\$)	Payee addr	•	e; Zip Co	ode					
	\$99.05	779 Highway 71 W								
	Reimbursement from political contributions intended	Bastrop, T	X 78602							
	PURPOSE OF	Category (See Categories listed at the top of this so	chedule)	Description	_		xas. Complete Schedule T.		
	EXPENDITURE	Office Overhead/Rental Expense Decorations for Capitol Office Check if Austin, TX, officeholder living expense Decorations for Capitol Office					older living expense			
					Decorations for (capi	ioi Office			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office h	neld		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

e/Officeholder/Politica Payment	/ - Il Committee	Legal Services The Instruction Guide explains	Salaries/Wages/Contract Labor s how to complete this form.	OTHER (enter a category not listed above)				
es Schedule G:				3 Filer ID (Ethics Commission Filers)				
Rpt: 64/67	Gerdes, Sta	anley Arthur (The Honorab	ile)	00086202				
	5 Payee name	!						
25	Hopdoddy	Burger Bar						
)	7 Payee addre	ess; City; State	e; Zip Code					
\$50.50	4615 N Lamar Blvd Suite 307							
rsement from								
contributions d	Austin, TX	78751						
OSE	(a) Category (s	Gee Categories listed at the top of this so	chedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE		rage Expense		Check if Austin, TX, officeholder living expense				
IIURE		Meal with Capitol Staff to Discuss Officeholde						
ONLY if direct	Candidate/Office	holder name	Office sought	Office held				
e to benefit								
	Payee name	;						
25	Hyatt Rege	ncy San Antonio						
)	Payee addre	ess; City; State	e; Zip Code					
\$52.38	123 Losoya	.3 Losoya St						
Reimbursement from								
contributions d	San Antoni	o, TX 78205						
OSE	Category (S	See Categories listed at the top of this so	chedule) Description	Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE		of District	L	Check if Austin, TX, officeholder living expense				
			Parking for Office	eholder Related Meeting				
	Candidate/Office	holder name	Office sought	Office held				
e to benefit								
	D							
25	Payee name							
25	Joe's Italiar	n Kitchen & Seafood	a. Zin Cada					
)	Joe's Italiar Payee addre	n Kitchen & Seafood ess; City; State	e; Zip Code					
	Joe's Italiar Payee addre	n Kitchen & Seafood	e; Zip Code					
)	Joe's Italiar Payee addre	n Kitchen & Seafood ess; City; State d Ave Pkwy #214	e; Zip Code					
\$83.24 present from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 , TX 78660		↑ Check if travel outside of Texas. Complete Schedule T.				
\$83.24 sursement from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville Category (s	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 7, TX 78660 See Categories listed at the top of this so		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
\$83.24 present from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville Category (s	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 , TX 78660	chedule) Description	₫				
\$83.24 sursement from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville Category (s	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 7, TX 78660 See Categories listed at the top of this so	chedule) Description	Check if Austin, TX, officeholder living expense				
\$83.24 sursement from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville Category (s	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 , TX 78660 See Categories listed at the top of this so rage Expense	chedule) Description	Check if Austin, TX, officeholder living expense				
\$83.24 srsement from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville Category (s Food/Beve	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 , TX 78660 See Categories listed at the top of this so rage Expense	Description Meal to Discuss (Check if Austin, TX, officeholder living expense Officeholder Issues				
\$83.24 present from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville Category (s Food/Beve	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 , TX 78660 See Categories listed at the top of this so rage Expense	Description Meal to Discuss (Check if Austin, TX, officeholder living expense Officeholder Issues				
\$83.24 present from contributions d	Joe's Italian Payee addre 1615 Grand Pflugerville Category (s Food/Beve	n Kitchen & Seafood ess; City; State d Ave Pkwy #214 , TX 78660 See Categories listed at the top of this so rage Expense	Description Meal to Discuss (Check if Austin, TX, officeholder living expense Officeholder Issues				
	s Schedule G: Rpt: 64/67 25 \$50.50 resement from contributions department from contributions	s Schedule G: Rpt: 64/67 Spayee name Hopdoddy 7 Payee addre 4615 N Lar Austin, TX DSE TITURE Candidate/Office Payee name Hyatt Rege Payee addre 123 Losoya \$52.38 San Antoni Category (s Food/Bevel Category (s Food/Bevel Candidate/Office Category (s Category (s Category (s) Categor	The Instruction Guide explains as Schedule G: Rpt: 64/67 Serdes, Stanley Arthur (The Honorab Gerdes, Stanley Arthur (The Honorab Gerdes) 7 Payee address; City; State Food/Beverage Expense (a) Category (See Categories listed at the top of this see Food/Beverage Expense (b) Payee name Hyatt Regency San Antonio Payee address; City; State Stanley Arthur (The Honorab Gerdes) Payee Category (See Categories listed at the top of this see Travel Out of District (c) Category (See Categories listed at the top of this see Travel Out of District (c) Concept Gerdes, Stanley Arthur (The Honorab Gerdes) Stanley Arthur (The Honorab Gerdes) Actegory (See Categories listed at the top of this see Travel Out of District (c) Concept Gerdes, Stanley Arthur (The Honorab Gerdes) (d) Stanley Arthur (The Honorab Gerdes) Actegory (See Categories listed at the top of this see Travel Out of District (d) Concept Gerdes, Stanley Arthur (The Honorab Gerdes) (e) C	The Instruction Guide explains how to complete this form. S Schedule G: Qerdes, Stanley Arthur (The Honorable) 5 Payee name Hopdoddy Burger Bar 7 Payee address; City; State; Zip Code 4615 N Lamar Blvd Suite 307 Austin, TX 78751 DSE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense TIURE Candidate/Officeholder name Payee name Hyatt Regency San Antonio Payee address; City; State; Zip Code Office sought Payee name Hyatt Regency San Antonio Payee address; City; State; Zip Code \$52.38 123 Losoya St Travel Out of District Parking for Office DNLY if direct Candidate/Officeholder name Candidate/Officeholder name Category (See Categories listed at the top of this schedule) Description Parking for Office Control of this schedule Description Parking for Office Control of this schedule Description Categories Interest Candidate/Officeholder name Control of this schedule Description Categories Interest Candidate/Officeholder name Office sought				

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ov Polling E Printing E Salaries/	Expense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2 EII ED NAME					Filer ID (Ethics Commission Filers	٠)	
	Sch: 8/9 Rpt: 65/67	2 FILER NAME Gerdes, Stanley Arthur (The Honorable)				l -	O0086202	יי	
4	Date	5 Payee	name						
	04/30/2025		Robot						
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$108.26	1303 S Congress Ave							
	Reimbursement from political contributions intended	Austin	, TX 78704						
8	PURPOSE	(a) Catego	(See Categories listed at the top of this	schedule)	(b) Description	Che	eck if travel outside of Texas. Complete Schedul	le T.	
	OF EXPENDITURE	Food/Beverage Expense				Che	eck if Austin, TX, officeholder living expense		
	LAFENDITURE				Meal with Capitol	al with Capitol Staff to Discuss Officeholder Issues			
9	Complete ONLY if direct	Candidate/	Officeholder name		Office sought		Office held		
	expenditure to benefit C/OH	Januluale/	ольспоист паше		Onice Sought		Office Held		
	Date	Payee	name						
	05/25/2025	Maiko Sushi Lounge							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$70.26 207 San Jacinto Blvd Ste 202								
	X Reimbursement from political contributions intended	Austin	Austin, TX 78701						
PURPOSE		Catego	(See Categories listed at the top of this	schedule)	Description	=	eck if travel outside of Texas. Complete Schedul	le T.	
OF EXPENDITURE		Food/	Food/Beverage Expense		Check if Austin, TX, officeholder living expense Meal to Discuss Officeholder Issues				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/	Officeholder name		Office sought		Office held		
	Date	Payee	name						
	04/24/2025	•	Sushi & Asian Bistro			_			
-	Amount (\$)	Payee	address; City; Sta	te; Zip C	ode				
	\$82.30	2222 Rio Grande St							
	Reimbursement from political contributions intended	Austin	, TX 78705						
	PURPOSE	Catego	Ory (See Categories listed at the top of this	schedule)	Description	=	eck if travel outside of Texas. Complete Schedul	le T.	
	OF EXPENDITURE	Food/Beverage Expense			Check if Austin, TX, officeholder living expense				
	·				Meal with Capitol	l Sta	taff to Discuss Officeholder Issues		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/	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: 9/9 Rpt: 66/67 Gerdes, Stanley Arthur (The Honorable) 00086202 Date Payee name 05/27/2025 Taco Shack Payee address; Amount (\$) City; State; Zip Code \$29.16 4002 N Lamar Reimbursement from political contributions Х intended Austin, TX 78757 **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 Food/Beverage Expense **EXPENDITURE** Meal with Capitol Staff to Discuss Officeholder Issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/21/2025 The Branding Shop Amount (\$) Payee address; City; State; Zip Code \$48.00 1010 Main Street Reimbursement from political contributions Χ Bastrop, TX 78602 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** Production of Campaign Shirts Complete ONLY if direct Candidate/Officeholder name Office sought Office held

Forms provided by Texas Ethics Commission

expenditure to benefit

C/OH

www.ethics.state.tx.us

Version V4.1.0.f10d0fd8

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 67/67 2 FILER NAME Filer ID (Ethics Commission Filers) Gerdes, Stanley Arthur (The Honorable) 00086202 5 Name of person from whom amount is received 8 Amount (\$) 01/17/2025 Southwest Airlines \$1,927.32 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75235 Purpose for which amount is received Check if political contribution returned to filer Refund for Cancelled Flights (Original and Change Expense)