# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comp	plete this form.	1 Filer ID (Ethics Comm 00084135		2 Total pages f	iled: 51
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Lacey M.			Date Received	
10 WIL					ELECTRONIC	ALL V EIL ED
					07/15/2025	ALLI FILLD
	NICKNAME	LAST		SUFFIX	07/15/2025	
		Hull				
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	PO Box 19231					
ADDRESS					Receipt #	Amount
Change of Address	Houston, TX 77224					
					Date Processed	
					Data lara and	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Elizabeth		1411		
NAME	IVII 5.	Liizabetii				
	AUG/ALANE					
	NICKNAME	LAST		SUFFIX		
	Buffie	Ingersoll				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	AP	T / SUITE #; CITY;	ST.	ATE; ZIP CODE
ADDRESS	9 Rollingwood Dr					
(Residence or Business)						
	Houston, TX 77080					
7 CAMPAIGN	AREA CODE PHO		TYTENCION			
TREASURER		ONE NUMBER E	EXTENSION			
PHONE	(713) 446-6426					
8 REPORT	+					
TYPE	January 15	30th day before	e election	Runoff	15th day after ca	ampaign treasurer
					appointment (off	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Att	ach C/OH-FR)
				reporting innit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	TH	HROUGH	06/30/202	.5	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
		│ □G	Seneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Dis	strict 138			,	
	·					
		GO T	TO PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 51

13 C / OH NAME	Hull, Lacey M. (The F	Honorable)	<b>14</b> Filer ID (E 00084135	thics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or officeh	older's knowledge or
Additional Pages				
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	<b>\$</b> 14,887.67
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 280.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 56,726.19
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 297,623.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Hor	norable Lacey M. Hull	
			Candidate or Officeholde	 er
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me. by the s	aid	. this the	day
		ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer a	administering oath

## **SUBTOTALS - C/OH**

## FORM COH **COVER SHEET PG 3**

					3 of 51
	ER NAM	(Ethic	cs Commission Filers)		
<b>20</b> SC	HEDUL	E SUBTOTALS SCHEDULE	00084135		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	14,648.59
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	239.08
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$	53,227.42
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	16,020.20
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIE	SCHEDULE A1				
	The Instruc	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/51	
2	FILER NAME Hull, Lacey N	1. (The Honorable)			3	Filer ID (Ethics Commission 00084135	on Filers)
4	Date 06/30/2025			7	Amount of Contribution (\$)	\$52.05	
_	Dringing Loon	Houston, TX 77055	<u> </u>	Employer (Con Instructions	<u></u>		
8	sales	pation / Job title (See Instructions)	9	Employer (See Instructions unemployed	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  06/30/2025 Curry, Pat  Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$520.51
	Principal occu	Woodway, TX 76712		Employer (See Instructions	·)		
	Principal occupation / Job title (See Instructions)  CEO Employer (See Instructions)  self						
	Date 06/30/2025	Full name of contributor	PAC (ID#:	)		Amount of Contribution (\$)	\$5,000.00
		Houston, TX 77009					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/30/2025	Moak Casey PAC	PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 06/30/2025	Full name of contributor out-of-state Springer, Lydia Contributor address; City; State; Zip Code  Muenster, TX 78252		)		Amount of Contribution (\$)	\$50.00
	Principal occu developer	pation / Job title (See Instructions)		Employer (See Instructions Ft Worth Diasis	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/51		
2	FILER NAME Hull, Lacey N	И. (The Honorable)		3	Filer ID (Ethics Commission 00084135	n Filers)	
4	Date 06/30/2025			7	Amount of Contribution (\$)	\$5,000.00	
_	Duinning Langu	Austin, TX 78701	O Francis var (Can Instruction				
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#:_ Vasquez, Heather Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.03	
	Principal occu	Seadrift, TX 77983 pation / Job title (See Instructions)	Employer (See Instructions	)			
	HR		Texas Industrial Group				
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Houston, TX 77027					
	Principal occu Business Ov	pation / Job title (See Instructions) vner	Employer (See Instructions David Weekley Homes	)			
	Date 06/30/2025	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 (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			

## NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/51 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hull, Lacey M. (The Honorable) 00084135 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/30/2025 Moak Casey LLC \$239.08 food, drink, and space 7 Contributor address; City; State; Zip Code rental Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

## SCHEDULE F1

**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

l	orean oara'r dyment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Ļ	Sch: 1/7 Rpt: 7/51	Hull, Lacey M. (The Honorable)	00084135
4	Date 06/04/2025	5 Payee name Brennan, Caitlin	
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1100 Red River	
8	PURPOSE OF EXPENDITURE	Austin, TX 78701  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense session gift
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 02/24/2025	Payee name Butler, Judy	
	Amount (\$) \$393.96	Payee address; City; State; Zip Code 13504 Mariscan St	
		Manchaca, TX 78652	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense mileage reimbursement
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 06/13/2025	Payee name Butler, Judy	
	Amount (\$) \$1,145.20	Payee address; City; State; Zip Code 13504 Mariscan St	
		Manchaca, TX 78652	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense mileage reimbursement
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

## SCHEDULE F1

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

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

ordan dara r aymoni	The Instruction Guide explains how to co	emplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 2/7 Rpt: 8/51	Hull, Lacey M. (The Honorable)		00084135	
4 Date	5 Payee name		•	
06/30/2025	Chase			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$3,352.71	270 Park Avenue			
	New York, NY 10017			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Credit Card Payment	l — ·	avel outside of Texas. Comp	olete Schedule T.
EXPENDITURE			ustin, TX, officeholder living	expense
		credit card	payment	
		<u> </u>		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sor	ught	Office he	Id
Date	Payee name			
03/16/2025	Chase			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$3,556.14	270 Park Avenue			
	New York, NY 10017			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Credit Card Payment	. <b>.</b>	avel outside of Texas. Compustin, TX, officeholder living	
		credit card		expense
Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ught	Office he	ld
expenditure to benefit C/O				
Date	Payee name			
05/21/2025	Chase			
Amount (\$)	Payee address; City; State; Zip C	nde		
\$6,777.05	270 Park Avenue	340		
40,111.00				
	New York, NY 10017			
DUDDOCE		(h) p : ::		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	avel outside of Texas. Comp	olete Schedule T.
EXPENDITURE	Credit Card Payment		ustin, TX, officeholder living	
		credit card	payment	
Complete ONLY if direct	Candidate/Officeholder name Office so	ıght	Office he	ld
expenditure to benefit C/O	Н			

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/7 Rpt: 9/51	Hull, Lacey M. (The Honorable) 00084135
4	Date	5 Payee name
	06/02/2025	Cy-Fair Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	10750 Barker Cypress Road
		Ste 104 #153
		Houston, TX 77443
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  associate membership fee
		associate membership fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/04/2025	Fankell, Emily
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	2300 Hancock Dr.
		Austin, TX 78756
	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  Session gift
		Scool gilt
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/06/2025	Harris County
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	1001 Preston St
		Houston, TX 77002
	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.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		deposit - precinct chair lunch
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
1		

#### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/7 Rpt: 10/51	Hull, Lacey M. (The Honorable)  00084135
4	Date	5 Payee name
	06/13/2025	Miller, Madelyn
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	PO Box 2910
		Austin, TX 78761
Ļ	DUDDOCE	1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		session gift
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$	Date	Payee name
	04/08/2025	Minuteman Press
	Amount (\$)	Payee address; City; State; Zip Code
	\$194.80	3711 Briarpark Dr
		Houston, TX 77043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		thank you letters
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	01/27/2025	Quinones and Associates, PLLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$25,000.00	2202 Ruth St
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		retainer - legal services
	0 1: 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	The strategy of the strategy o	

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/7 Rpt: 11/51	Hull, Lacey M. (The Honorable) 00084135
4	Date	5 Payee name
	02/03/2025	TCCRI
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	PO Box 2669
		Austin, TX 78681
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  membership fee
		membership ice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	06/12/2025	Texas Ethics Commission
┡		
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	P.O. Box 12070
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		fees
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	06/19/2025	Texas House Republican Caucus
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 13305
	Ψ1,000.00	1 0 Box 10000
		Austin, TX 78711
H	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		membership fee
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	/ - al Comm	nittee I	Gift/Awards/Memorials Legal Services			ages	/Contract Labor		Travel Out of D OTHER (enter	istrict a category not listed above)
Ļ	T.1 C.1.1 =:	I = =		The Instruction G	aiue expiaiiis	HOW TO COL	iihie	te una ioiin.	_	E1 15	(Ethio Occupit to Ethio
1	Total pages Schedule F1:	1							3	Filer ID	(Ethics Commission Filers)
	Sch: 6/7 Rpt: 12/51	<u> </u>	Hull, Lacey I	И. (The Honora	ıble)					00084135	
4	Date	1	Payee name								
L	04/11/2025	L	JSPS								
6	Amount (\$)	<b>7</b> P	Payee addres	s; City;	State;	Zip Co	de				
	\$282.00	8	315 Goodso	n Road							
		<sub>N</sub>	Magnolia, T	< 77355							
8	PURPOSE			e Categories listed at t	he ton of this sch	edule)	(b)	Description			
	OF		Printing Exp		ne top of this sch	edule)	` '	_ `	outsi	de of Texas. Cor	mplete Schedule T.
	EXPENDITURE	.	· · · ·					Check if Austin,	, TX,	officeholder livin	ng expense
								postage for th	nan	k you notes	3
L											
9	Complete ONLY if direct		andidate/Offic	eholder name	C	Office sou	ght			Office h	neld
L	expenditure to benefit C/OI	H									
	Date	P	Payee name								
	03/20/2025	v	/illage Repu	blican Women							
	Amount (\$)	Р	Payee addres	s; City;	State;	Zip Co	de				
	\$150.00	P	PO Box 799	24							
		+	Houston, TX	77279							
	PURPOSE OF			e Categories listed at t		edule)	(b)	Description			
	EXPENDITURE			s/Donations Ma		,ittos		<b>=</b>		de of Texas. Cor officeholder livin	mplete Schedule T.
		'	Januluate/C	fficeholder/Poli	lucai Comm	ııııee		directory spoi			ід охрепас
								and ottory open			
$\vdash$	Complete ONLY if direct	L Ca	andidate/Offic	eholder name	(	Office sou	ght			Office h	neld
	expenditure to benefit C/OI					500(	٠. ر			200 11	
H	Date	P	Payee name								
	03/20/2025	l	,	blican Women							
						7in Ca	de				
	Amount (\$)	l	Payee addres		State;	; Zip Co	ue				
	\$150.00		PO Box 799	<u> </u>							
			_								
			Houston, TX	77279							
	PURPOSE OF			Categories listed at t		edule)	(b)	Description			
	EXPENDITURE			s/Donations Ma		vitto s		브			mplete Schedule T.
			Jandidate/C	fficeholder/Poli	liicai Comm	ıııtee		Celebration o		officeholder livin	
								Celebiation 0	,ı /\	menca eve	iit.
	Complete ONLY if direct	L Ca	andidate/Offic	eholder name		Office soug	thr			Office h	neld
	expenditure to benefit C/OI		a raidato/Offic	CHOIGGI HAIHE		zinec sou(	yııı.			Onice II	ioia

## SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 7/7 Rpt: 13/51	Hull, Lacey M. (The Honorable) 00084135
4	Date	5 Payee name
	02/24/2025	Walker, Krysta
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$800.00	25242 Dickens Dr.
		Magnolia, TX 77355
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign salary
		Campaign Salary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	06/04/2025	Walker, Krysta
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	25242 Dickens Dr.
		Magnolia, TX 77355
	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
		session gift
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/30/2025	Winred
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.56	1776 Wilson Blvd.
		Suite 530
		Arlington, VA 22219
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		fees
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,	
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)	
Sch: 1/38 Rpt: 14/51	Hull, Lacey M. (The	e Honorable)			00084135			
4 CREDIT CARD ISSUER		ncial institution ase	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged \$65.00	(b) Date of Charge 01/03/2025	(c) Date(s) 01/30/20	Credit Card Issuer 25	r Paid			
7 PAYEE	(a) Payee name  Village Republican	Women	(b) Payee PO Box		City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descrip	otion				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct candidate/Officeholder name Office expenditure to benefit C/OH					Office held			
PAYMENT	(a) Amount Charged \$63.96	(b) Date of Charge 01/06/2025	(c) Date(s) 01/30/20	Credit Card Issuer 25	Paid			
PAYEE	Mailchimp			address; ce de Leon Ave N GA 30308	City, IE	State,	Zip Code	
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descrip	otion				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
PAYMENT	(a) Amount Charged \$115.43	(b) Date of Charge 01/08/2025	(c) Date(s) 01/30/20	Credit Card Issuer 25	r Paid			
PAYEE	(a) Payee name  Door Dash		(b) Payee 2207 W F Chicago,		City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description meal with staff		n staff					
X Non-Political	(9)			<b>_</b>				
Complete ONLY if direct expenditure to benefit C/OH					Office held			

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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				THER (enter a category	not listed at	oove)
		ruction Guide explains how	to complete this form.	1		
1 Total pages Schedule F4:				3 Filer ID (Ethics	s Commiss	sion Filers)
Sch: 2/38 Rpt: 15/51	Hull, Lacey M. (The	Honorable)		00084135		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED			
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT	.  \$		
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$53.96	01/01/2025	01/30/2025			
	,					
7 PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code
			225 Varick St.			
	SquareSpace Inc					
			New York, NY 10014			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	web services			
X Political	Advertising Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TY	officeholder living expe	nso	
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Office held	1130	
expenditure to benefit C/OH	Garialadio, Ginocriolaci	That is a second of the second	o oougint	Omoo nola		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		. ,	01/30/2025	. r aid		
	\$54.82	01/02/2025				
PAYEE	(a) Dayon nama		(b) Davisa address:	City	Ctoto	Zin Codo
FAILL	(a) Payee name		(b) Payee address; 10019 S Interstate 35	City,	State,	Zip Code
	Hill Country Springs		10019 5 Interstate 35			
			Augtin TV 70747			
PURPOSE OF	(a) Category		Austin, TX 78747 (b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	water delivery			
Political	Food/Beverage Expe	nse	water delivery			
X Non-Political	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		<u> </u>			
<del>_</del>	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder	name Onice	e sought	Office field		
expenditure to benefit C/OH	(-) A	(h) D-tt Ob	(a) Data (a) Over the Count to aver	- D-i-l		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 01/30/2025	r Pald		
	\$31.56	01/02/2025	01/00/2020			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Magic Circle Repub	olican Women	6711 Belmont St.			
	iviagio onole Nepul	MOULT VVOITIGH				
			Houston, TX 77055			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
<u></u>	Fees	or and soriedule)	membership dues			
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Candidate/Officerolder/Folitica		ruction Guide explains how	-	TILK (enter a category i	ioi iisieu ai	Jove)
1 Total pages Schedule F4:		·	·	3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 3/38 Rpt: 16/51	Hull, Lacey M. (The	: Honorable)		00084135		•
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$77.00	(b) Date of Charge 01/27/2025	(c) Date(s) Credit Card Issuer 01/30/2025	Paid		
7 PAYEE	(a) Payee name  Extra Space Storag	e	(b) Payee address; 1014 Katy Fwy Houston, TX 77043	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description storage unit			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se	
9 Complete ONLY if direct	Candidate/Officeholder	e sought	Office held			
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$53.96	(b) Date of Charge 02/01/2025	(c) Date(s) Credit Card Issuer 03/16/2025	<sup>*</sup> Paid		
PAYEE	(a) Payee name  SquareSpace Inc		(b) Payee address; 225 Varick St. New York, NY 10014	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description web services			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$247.86	(b) Date of Charge 01/15/2025	(c) Date(s) Credit Card Issuer 01/30/2025	Paid		
PAYEE	(a) Payee name  Clearly Filtered Inc		(b) Payee address; 23121 Arroyo Vista  Rancho Santa Margarita,	City, CA 92688	State,	Zip Code
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description supplies for Austin apartment				
X Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			X Check if Austin, TX,	officeholder living expen	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
I						

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeriolide//Folitica	· ·	ruction Guide explains how	-	TIER (enter a category	not listeu ai	oove)
1 Total pages Schedule F4:		·	·	3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 4/38 Rpt: 17/51	Hull, Lacey M. (The	Honorable)		00084135		,
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$90.00	(b) Date of Charge 01/16/2025	(c) Date(s) Credit Card Issuer 01/30/2025	Paid		
7 PAYEE	(a) Payee name Small People CDC		(b) Payee address; 2427 Hacintas Way Houston, TX 77073	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Opinion 547 expense	of this schedule)	(b) Description childcare			
X Non-Political		of Texas. Complete Schedule T.		officeholder living expe	nse	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH			_			
PAYMENT	(a) Amount Charged \$31.56	(b) Date of Charge 02/11/2025	(c) Date(s) Credit Card Issuer 03/16/2025	<sup>-</sup> Paid		
PAYEE (a) Payee name  Magic Circle Republican Women		(b) Payee address; 6711 Belmont St. Houston, TX 77055	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description luncheon			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$22.08	(b) Date of Charge 06/07/2025	(c) Date(s) Credit Card Issuer 01/30/2025	· Paid		
PAYEE	(a) Payee name  Door Dash		(b) Payee address; 2207 W Roscoe Chicago, IL 60618	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  Political	EXPENDITURE (See Categories listed at the top of this schedule)  Travel Out of District		(b) Description meal in Austin			
X Non-Political	(c) Check if travel outside	X Check if Austin, TX,		nse		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.											
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)							
Sch: 5/38 Rpt: 18/51	Hull, Lacey M. (The	Honorable)		00084135								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$								
6 PAYMENT	(a) Amount Charged \$313.87	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuel 01/30/2025	r Paid								
7 PAYEE	(a) Payee name  Costco Wholesale		(b) Payee address; 1150 Bunker Hill Rd	City, Sta	te, Zip Code							
	( ) 0 :		Houston, TX 77055									
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	· ·	(b) Description office supplies									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense								
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged \$45.00	(b) Date of Charge 02/12/2025	(c) Date(s) Credit Card Issue 03/16/2025	r Paid								
PAYEE	(a) Payee name		(b) Payee address;	City, Sta	te, Zip Code							
	Village Republican	Women	PO Box 79924									
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top	of this schedule)	Houston, TX 77279 (b) Description luncheon									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense								
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held								
PAYMENT	(a) Amount Charged \$102.06	(b) Date of Charge 02/17/2025	(c) Date(s) Credit Card Issuel 02/17/2025	r Paid								
PAYEE	Clearly Filtered Inc		(b) Payee address; 23121 Arroyo Vista Rancho Santa Margarita,	City, Sta	te, Zip Code							
PURPOSE OF EXPENDITURE    Political	EXPENDITURE (See Categories listed at the top of this schedule)  Travel Out of District		(b) Description supplies for Austin apartm	nent								
X Non-Political	(*) <b>—</b>	of Texas. Complete Schedule T.		officeholder living expense								
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held								

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Insti	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Etl	hics Commiss	sion Filers)
	Sch: 6/38 Rpt: 19/51	Hull, Lacey M. (The	Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	. OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$43.41	(b) Date of Charge 03/19/2025	(c) Date(s 05/21/20	) Credit Card Issue )25	er Paid		
7	PAYEE	(a) Payee name Whole Foods		(b) Payee 525 N La Austin, T	amar	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Descri	ption			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		X Check if Austin, TX	K, officeholder living e	xpense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$117.42	(b) Date of Charge 03/25/2025	(c) Date(s 05/21/20	) Credit Card Issue )25	er Paid		
	PAYEE	Tacodeli		(b) Payee 301 Con Austin, T	gress Ave	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descri		oers		
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	(, officeholder living e	xpense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$360.00	(b) Date of Charge 01/12/2025	(c) Date(s) 01/30/20	) Credit Card Issue )25	er Paid		
	PAYEE	(a) Payee name Small People CDC			address; cintas Way , TX 77073	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  Political  Non-Political	(a) Category (See Categories listed at the top Opinion 547 Expense	, 	(b) Descri childcare	- -	/ officebolder living	venonco.	
X       NOn-Political       (c)       Check if travel outside of Texas. Complete Schedule T.         Complete ONLY if direct       Candidate/Officeholder name       Office s				2 SUIIUht	Cneck if Austin, TX	Office held	xpense	
е	xpenditure to benefit C/OH	Candidate/Officeriolaei	That To Office	Jougni		Office field		
l								

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.											
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)					
	Sch: 7/38 Rpt: 20/51	Hull, Lacey M. (The	e Honorable)		00084135							
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$							
6	PAYMENT	(a) Amount Charged \$62.81	(b) Date of Charge 01/22/2025	(c) Date(s) Credit Card Issuer 01/30/2025	Paid							
7	PAYEE	(a) Payee name  Magic Circle Repub	olican Women	(b) Payee address; 6711 Belmont St. Houston, TX 77055	City,	State,	Zip Code					
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description luncheon								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expe	ense						
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
е	expenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged \$395.00	(b) Date of Charge 01/29/2025	(c) Date(s) Credit Card Issuer 01/30/2025	<sup>-</sup> Paid							
	PAYEE	(a) Payee name  Houston Region Business		(b) Payee address; 4500 Bissonett St	City,	State,	Zip Code					
L				Houston, TX 77401								
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description membership dues								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense						
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
	PAYMENT	(a) Amount Charged \$63.96	(b) Date of Charge 02/06/2025	(c) Date(s) Credit Card Issuer 03/16/2025	Paid							
	PAYEE	(a) Payee name Mailchimp		(b) Payee address; 677 Ponce de Leon Ave N Atlanta, GA 30308	City, IE	State,	Zip Code					
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description newsletter service									
L	Non-Political	(c) Check if travel outside	<u> </u>	officeholder living expe	ense							
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
1												

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.											
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Etl	nics Commiss	sion Filers)						
Sch: 8/38 Rpt: 21/51	Hull, Lacey M. (The	e Honorable)		00084135								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMI EXPENDITURES CHARGED TO A CR CARD	\$								
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid								
	\$177.65	06/13/2025	01/30/2025									
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code						
	Whole Foods		525 N Lamar									
			Austin, TX 78703									
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description									
Political	Food/Beverage Expe		office supplies and si	nacks								
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living e	xpense							
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid								
	\$40.00	01/17/2025	01/17/2025									
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code						
	Village Republican	Women	PO Box 79924									
			Houston, TX 77279									
PURPOSE OF	(a) Category		(b) Description									
EXPENDITURE	(See Categories listed at the top	of this schedule)	luncheon									
X Political	1 003											
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living ex	xpense							
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid								
	\$315.00	01/23/2025	01/30/2025									
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code						
	Small People CDC		2427 Hacintas Way									
	Smail People CDC											
			Houston, TX 77073									
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description childcare									
<u> </u>	Opinion 547 expense											
I <u>=</u>	Political											
X Non-Political	\(\frac{1}{2}\)   \(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>									
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held								
expenditure to benefit C/OH												

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete this	form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	ion Filers)
	Sch: 9/38 Rpt: 22/51	Hull, Lacey M. (The	e Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDIT	UNITEMIZED URES TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 01/24/2025	(c) Date(s) Cr 01/30/2025	edit Card Issuer	Paid		
7	PAYEE	(a) Payee name  Spring Branch Educ	cation	(b) Payee add	ell Rd.	City,	State,	Zip Code
L		( ) 2 :		Houston, TX				
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description				
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name			e sought		Office held		
	PAYMENT	(a) Amount Charged \$24.82	(b) Date of Charge 02/03/2025	(c) Date(s) Cr 03/16/2025	edit Card Issuer	· Paid		
	PAYEE	(a) Payee name		(b) Payee add	lress;	City,	State,	Zip Code
		Hill Country Springs	Hill Country Springs		erstate 35			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Exper	•	Austin, TX 7 (b) Description water delive	n			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
-	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$290.71	(b) Date of Charge 02/10/2025	(c) Date(s) Cr 03/16/2025	edit Card Issuer	Paid		
	PAYEE	(a) Payee name Mia's Table Caterin	Mia's Table Catering		dress; er Rd ( 77055	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Event Expense		of this schedule)	(b) Description precinct cha				
L	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule			Check if Austin, TX,	officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	name Office	e sought		Office held			

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.											
1 Total pages Schedule F4	2 FILER NAME			3 Filer ID (Ethio	cs Commis	sion Filers)						
Sch: 10/38 Rpt: 23/51	Hull, Lacey M. (The	e Honorable)		00084135								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$								
6 PAYMENT	(a) Amount Charged \$9.23	(b) Date of Charge 02/21/2025	(c) Date(s) Credit Card Issuel 03/16/2025	r Paid								
7 PAYEE	(a) Payee name FedEX		(b) Payee address; 800 Gessner Rd	City,	State,	Zip Code						
0 PURPOSE OF	(a) Catagoni		Houston, TX 77024									
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Printing Expense	of this schedule)	(b) Description flyers for precinct chair lur	nch								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense							
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held								
expenditure to benefit C/OF	I											
PAYMENT	(a) Amount Charged \$68.95	(b) Date of Charge 02/27/2025	(c) Date(s) Credit Card Issuel 03/16/2025	r Paid								
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code						
	Extra Space Storage		1014 Katy Fwy									
			Houston, TX 77043 (b) Description									
PURPOSE OF EXPENDITURE    X   Political	(See Categories listed at the top	a) Category See Categories listed at the top of this schedule) Office Overhead/Rental Expense										
	<b>—</b>											
Non-Political	1 · · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.	<u> </u>	officeholder living exp	ense							
Complete ONLY if direct expenditure to benefit C/OF			e sought	Office held								
PAYMENT	(a) Amount Charged \$116.81	(b) Date of Charge 04/03/2025	(c) Date(s) Credit Card Issue 05/21/2025	r Paid								
PAYEE	(a) Payee name  Cathy's Cleaners			(b) Payee address; City, 1110 E Cesar Chavez  Austin, TX 78702		Zip Code						
PURPOSE OF EXPENDITURE  Political	EXPENDITURE (See Categories listed at the top of this schedule)  Travel Out of District		(b) Description dry cleaning									
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	officeholder living exp	ense							
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder	e sought	Office held									

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	thi	s form.	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethi	cs Commiss	sion Filers)								
	Sch: 11/38 Rpt: 24/51	Hull, Lacey M. (The	e Honorable)				00084135										
4	CREDIT CARD	Name of final	ncial institution			F UNITEMIZED											
	ISSUER	see p	revious			TURES D TO A CREDIT	<b> \$</b>										
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid										
		\$188.00	03/15/2025	03/16/20	25	)											
7	PAYEE	(a) Payee name	•	(b) Payee	ad	dress;	City,	State,	Zip Code								
		USPS		10505 TO	D۷	VN AND COUN	ITRY WAY										
				Houston,	Т	X 77024											
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cahadula)	(b) Descrip	otic	on											
	X Political	Accounting/Banking	or this scriedule)	PO box													
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<b>_</b>			officeholder living exp	ense									
9	Complete ONLY if direct	name Office	e sought		_	Office held											
e:	xpenditure to benefit C/OH																
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid										
		\$372.85	04/01/2025	05/21/20	125	)											
	PAYEE (a) Payee name		(b) Payee	ad	dress;	City,	State,	Zip Code									
		EZ Cater		401 Wate	er	St											
				Boston, N	MΑ	02109											
	PURPOSE OF	(a) Category		(b) Descrip													
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		food for committee members													
	Political	. cou, zoro. ago z.,po															
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense									
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	` , ` ,		redit Card Issuer	· Paid										
		\$79.84	04/03/2025	05/21/20	25	•											
Г	PAYEE	(a) Payee name	I .	(b) Payee	ad	dress;	City,	State,	Zip Code								
				525 N La	ım	ar											
		Whole Foods															
				Austin, T													
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descrip													
	EXPENDITURE	Office Overhead/Ren	•	office sup	op	lies and snacks	5										
	Political																
	X Non-Political	of Texas. Complete Schedule T.	<b>_</b>														
	Complete ONLY if direct Candidate/Officeholder name Offic						Office held										
L e	xpenditure to benefit C/OH																

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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	-	ces Sala ruction Guide explains how		HER (enter a category	not listed ab	ove)		
1 Total pages Schedule F4:		, , , , , , , , , , , , , , , , , , ,		3 Filer ID (Ethics	Commiss	ion Eilere)		
		Llonoroblo)		00084135	Commiss	10111 11613)		
Sch: 12/38 Rpt: 25/51	Hull, Lacey M. (The		T	00004135				
4 CREDIT CARD ISSUER	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	l <sub>&amp;</sub>				
ISSOLIC	see pi	evious	CHARGED TO A CREDIT	ľ				
			CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$592.64	04/03/2025	05/21/2025					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
			55 Washington St	<i>,</i>		·		
	Etsy, Inc.		Suite 512					
			Brooklyn, NY 11201					
8 PURPOSE OF	(b) Description							
EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	gifts for committee member	are				
	Gift/Awards/Memorial	s Expense	gitts for committee members					
Political								
X Non-Political (c) Check if travel outside of Texas. Complete Schedule T			Check if Austin, TX,	officeholder living exper	ıse			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$360.00	04/06/2025						
	4000.00	0 1/00/2020						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
			2427 Hacintas Way			·		
	Small People CDC							
			Houston, TX 77073					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	childcare					
Political	opinion 547 expense							
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX.	officeholder living exper	nse			
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	Check if Austin, TX, officeholder living expense  Ce sought  Office held					
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	. ,		03/16/2025					
	\$405.00	02/10/2025						
PAYEE	(a) Dayoo nama		(b) Payon address:	City	Ctoto	Zin Codo		
FAILL	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Small People CDC		2427 Hacintas Way					
			TV 77070					
	( ) 0 :		Houston, TX 77073					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	Opinion 547 expense	<i></i> /	childcare					
Political								
X Non-Political	(c) Check if travel outside	Check if Austin, TX,	officeholder living exper	ise				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
	Sch: 13/38 Rpt: 26/51	Hull, Lacey M. (The	e Honorable)			00084135					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged \$53.96	(b) Date of Charge 03/01/2025	(c) Date(s) 03/16/202	Credit Card Issuer 25	r Paid					
7	PAYEE	(a) Payee name  SquareSpace Inc		(b) Payee a	k St.	City,	State,	Zip Code			
L		( ) 5 .			k, NY 10014						
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descrip web servi							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct expenditure to benefit C/OH	xpenditure to benefit C/OH				Office held					
	PAYMENT	(a) Amount Charged \$315.00	(b) Date of Charge 03/24/2025	(c) Date(s) Credit Card Issuer 05/21/2025		Paid					
	PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code			
		Small People CDC			cintas Way						
L		() 0 :			TX 77073						
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Opinion 547 expene	of this schedule)	(b) Descrip childcare	ition						
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin, TX.	officeholder living exp	ense				
H	Complete ONLY if direct	Candidate/Officeholder		e sought		Office held					
	expenditure to benefit C/OH			· ·							
	PAYMENT	(a) Amount Charged \$56.56	(b) Date of Charge 04/01/2025	(c) Date(s) 05/21/202	Credit Card Issuer 25	Paid					
	PAYEE (a) Payee name SquareSpace Inc		(b) Payee a 225 Varic New York		City,	State,	Zip Code				
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Advertising Expense		of this schedule)	(b) Descrip web servi							
1	Non-Political	of Texas. Complete Schedule T.	dule T. Check if Austin, TX, officeholder living expense								
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Insti	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pa	ages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 1	4/38 Rpt: 27/51	Hull, Lacey M. (The	Honorable)			00084135		
4 CREDI	T CARD R		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6 PAYMI	ENT	(a) Amount Charged \$63.96	(b) Date of Charge 04/06/2025	(c) Date(s) 05/21/20	Credit Card Issuel 25	r Paid		
7 PAYEE		(a) Payee name  Mailchimp			address; ce de Leon Ave N GA 30308	City, NE	State,	Zip Code
EXPEN	OSE OF NDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descrip	otion			
=	olitical on-Political	<del>-</del>			_			
		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
-	ete <u>ONLY</u> if direct ure to benefit C/OH	Candidate/Oniceriolder	name Onice	Sought		Office field		
PAYMI	ENT	(a) Amount Charged \$183.48	(b) Date of Charge 04/07/2025	(c) Date(s) 05/21/20	Credit Card Issuer 25	r Paid		
PAYEE	PAYEE (a) Payee name  Costco Wholesale				nker Hill Rd	City,	State,	Zip Code
EXPEN	OSE OF NDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip				
X N	on-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
-	ete <u>ONLY</u> if direct ure to benefit C/OH	Candidate/Officeholder	name Office	sought		Office held		
PAYMI		(a) Amount Charged \$179.90	(b) Date of Charge 03/04/2025	(c) Date(s) 03/16/20	Credit Card Issuel 25	r Paid		
PAYEE		(a) Payee name  Tacodeli		(b) Payee 301 Cong Austin, T	gress Ave	City,	State,	Zip Code
EXPEN	OSE OF NDITURE olitical	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description food for c	otion committee memb	ers		
X Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					Check if Austin, TX,	officeholder living exp	ense	
-	ete <u>ONLY</u> if direct ure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	Candidate/Officeriolder/Folitica	3	ruction Guide explains how	-	THER (enter a category not its	ileu ab	ove)		
1	Total pages Schedule F4:	·	3 Filer ID (Ethics Cor	nmiss	ion Filers)				
	Sch: 15/38 Rpt: 28/51	Hull, Lacey M. (The	: Honorable)		00084135		•		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6	PAYMENT	(a) Amount Charged \$63.96	(b) Date of Charge 03/06/2025	(c) Date(s) Credit Card Issuer 03/16/2025	Paid				
7	PAYEE	(a) Payee name Mailchimp		(b) Payee address; 677 Ponce de Leon Ave N Atlanta, GA 30308	· · · · · · · · · · · · · · · · · · ·	ate,	Zip Code		
8	B PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Check if travel outside of Texas. Complete Schedule			(b) Description newsletter service					
	Non-Political		<u>'</u>		officeholder living expense				
9	•	Candidate/Officeholder	name Office	e sought	Office held				
e	expenditure to benefit C/OH		L (1) = 1 ( 1)	1() = . () =					
	PAYMENT	(a) Amount Charged \$507.42	(b) Date of Charge 03/25/2025	(c) Date(s) Credit Card Issuer 05/21/2025	<sup>*</sup> Paid				
	PAYEE (a) Payee name			(b) Payee address;	City, Sta	ite,	Zip Code		
		Cava		701 S Capital of Texas Hv	vy				
L				West Lake Hills, TX 78746	<u> </u>				
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description food for committee members	ers				
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	PAYMENT	(a) Amount Charged \$429.00	(b) Date of Charge 03/27/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid				
Г	PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ite,	Zip Code		
		Clayton Spangler P	hotographic	235 Point Lick Drive					
$\vdash$		(-) O-t		Charleston, WV 25306					
	PURPOSE OF (a) Category  EXPENDITURE (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense		(b) Description House panoramic photo						
1	X Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin TX	officeholder living expense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	Office held				

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4: 2 FILER NAME  Seb. 16/20 Patr 20/E1   Livil Leggy M. (The Hangrable)						nics Commiss	sion Filers)		
	Sch: 16/38 Rpt: 29/51	Hull, Lacey M. (The	e Honorable)			00084135				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$				
6	PAYMENT	(a) Amount Charged \$117.42	(b) Date of Charge 04/01/2025	(c) Date(s) 05/21/20	) Credit Card Issu 125	er Paid				
7	PAYEE	(a) Payee name  Tacodeli		(b) Payee 301 Con	gress Ave	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Expe	•	(b) Descri		bers				
	X Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	rpense			
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$86.81	(b) Date of Charge 03/03/2025	(c) Date(s) 03/16/20	) Credit Card Issu 125	er Paid				
	PAYEE (a) Payee name  Hill Country Springs			(b) Payee 10019 S Austin, T	Interstate 35	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description (b) water de	ption					
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX	K, officeholder living ex	rpense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$33.57	(b) Date of Charge 03/03/2025	(c) Date(s) 03/16/20	) Credit Card Issu 125	er Paid				
	PAYEE	(a) Payee name Whole Foods		(b) Payee 525 N La Austin, T	ımar	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense			(b) Descrip	ee supplies						
$\vdash$	X Non-Political (c) Check if travel outside of Texas. Complete Schedule T  Complete ONLY if direct Candidate/Officeholder name Off				Check if Austin, TX	C, officeholder living ex Office held	kpense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeffolder	name UIIIC	e sought		Office field				

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 17/38 Rpt: 30/51	Hull, Lacey M. (The	e Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$105.51	(b) Date of Charge 03/11/2025	(c) Date(s) C 03/16/2025	Credit Card Issuer 5	r Paid		
7	PAYEE	(a) Payee name  Tacodeli		(b) Payee ac	ess Ave	City,	State,	Zip Code
Ļ		( ) 0 :		Austin, TX				
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description food for co	on mmittee memb	ers		
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
Ľ	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$290.30	(b) Date of Charge 03/12/2025	(c) Date(s) C 03/16/2025	Credit Card Issuer 5	r Paid		
F	PAYEE (a) Payee name			(b) Payee ac	ddress;	City,	State,	Zip Code
		Central Market		4001 N La	mar Blvd			
L				Austin, TX				
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description charcuteries	on e for pub ed me	mbers		
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
H	Complete ONLY if direct	Candidate/Officeholder		e sought		Office held		
	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$157.50	(b) Date of Charge 03/13/2025	(c) Date(s) C 03/16/2025	Credit Card Issuer 5	r Paid		
	PAYEE	(a) Payee name Small People CDC		(b) Payee ac 2427 Hacir Houston, T	ntas Way	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Opinion 547 expense			(b) Description childcare	on		_	_
L	X Non-Political	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	to complete	thi	s form.			
1	Total pages Schedule F4:	al pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethio	s Commiss	sion Filers)
	Sch: 18/38 Rpt: 31/51	Hull, Lacey M. (The	Honorable)				00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	NDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$117.42	(b) Date of Charge 03/18/2025	(c) Date(s 05/21/20		redit Card Issuer	Paid		
7	PAYEE	(a) Payee name  Tacodeli		(b) Payee 301 Con Austin, T	gre	ess Ave	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descri	ptio		ers		
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
<b>9</b> e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
	PAYMENT	(a) Amount Charged \$68.95	(b) Date of Charge 03/26/2025	(c) Date(s 05/21/20		redit Card Issuer 5	Paid		
	PAYEE (a) Payee name  Extra Space Storage		e	(b) Payee 1014 Kai Houston	ty	Fwy	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ptio	on			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
	PAYMENT	(a) Amount Charged \$66.82	(b) Date of Charge 04/01/2025	(c) Date(s 05/21/20		redit Card Issuer 5	Paid		
	PAYEE	(a) Payee name  Hill Country Springs	6	(b) Payee 10019 S Austin, T	In	terstate 35	City,	State,	Zip Code
	PURPOSE OF (a) Category (See Categories listed at the top of this schedule) (See Categories listed at the top of this schedule) water delivery  Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX			ery	office helder !! in				
	(S)				L	Cneck if Austin, TX, o	Office held	ense	
е	xpenditure to benefit C/OH	Candidate/Officeriolaei	Thank Office	e sought			Jinee Helu		
l									

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

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)

struction Guide explains how to complete this form

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commis	sion Filers)			
	Sch: 19/38 Rpt: 32/51	Hull, Lacey M. (The	e Honorable)		00084135					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$600.00	06/03/2025							
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
		Harris County Repu	ublican Party	8588 Katy Freeway Suite 445 Houston, TX 77024						
8	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE  X Political	(See Categories listed at the top Contributions/Donatio Candidate/Officeholde		Lincoln Reagan Dinner						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse				
9				e sought	Office held					
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$156.65	04/27/2025	05/21/2025						
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
		Whole Foods		525 N Lamar						
				Austin, TX 78703						
	PURPOSE OF	(a) Category	(d): 1 11 X	(b) Description						
	EXPENDITURE	(See Categories listed at the top  Travel Out of District	of this schedule)	supplies for Austin apartment						
	Political	Traver out or Bistrict								
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. X Check if Austin, TX, officeholder living expense						
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
e:	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$116.61	05/01/2025	05/21/2025						
$\vdash$	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
		(a) i a) se mame		10019 S Interstate 35	J.,	Grano,	p			
		Hill Country Springs	6							
				Austin, TX 78747						
	PURPOSE OF (a) Category			(b) Description						
	<b>EXPENDITURE</b> (See Categories listed at the top of this schedule)			water delivery						
	Political Food/Beverage Expense									
	X Non-Political	(c) Check if travel outside	ule T. Check if Austin, TX, officeholder living expense							
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
e	xpenditure to benefit C/OH									
	· · · · · · · · · · · · · · · · · · ·									

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
	Sch: 20/38 Rpt: 33/51	Hull, Lacey M. (The	e Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$360.00	(b) Date of Charge 05/05/2025	(c) Date(s) C 05/21/202	Credit Card Issuei 5	r Paid		
7	PAYEE	(a) Payee name Small People CDC		(b) Payee ac 2427 Hacir	ntas Way	City,	State,	Zip Code
Ļ		( ) 0 :		Houston, T				
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top opinion 547 expense	of this schedule)	(b) Description childcare	on			
	X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
Ŀ	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$134.65	(b) Date of Charge 05/20/2025	(c) Date(s) C 05/21/2025	Credit Card Issuei 5	r Paid		
H	PAYEE (a) Payee name			(b) Payee ac	ddress;	City,	State,	Zip Code
		TenTen		501 W. 6th				
				Austin, TX	78701			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe	*	(b) Description meal in Au				
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	I ×	7 Check if Austin TY	officeholder living exp	ense	
H	Complete ONLY if direct	Candidate/Officeholder	·	e sought	Check if Adstiri, 17,	Office held	ense	
6	expenditure to benefit C/OH			o coug		000 1.0.0		
	PAYMENT	(a) Amount Charged \$60.82	(b) Date of Charge 06/02/2025	(c) Date(s) C	Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name  Hill Country Springs		(b) Payee ac 10019 S In Austin, TX	terstate 35	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense			(b) Description water deliv				
L	X Non-Political	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeriolder/Folitica	ű	ruction Guide explains how	•	THEN (effici a category not its	ileu ai	ove)			
1	Total pages Schedule F4:	3 Filer ID (Ethics Con	nmiss	sion Filers)						
	Sch: 21/38 Rpt: 34/51	Hull, Lacey M. (The	e Honorable)		00084135		•			
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$63.96	06/06/2025							
7	PAYEE	(a) Payee name  Mailchimp		(b) Payee address; 677 Ponce de Leon Ave N	City, Sta NE	ite,	Zip Code			
Ļ		( ) 0 :		Atlanta, GA 30308						
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description newsletter service						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense					
9				e sought	Office held					
е	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$50.00	06/09/2025							
	PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ıte,	Zip Code			
		Small People CDC		2427 Hacintas Way						
L				Houston, TX 77073						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top opinion 547 expense	of this schedule)	(b) Description childcare						
	Political									
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense					
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
	PAYMENT	(a) Amount Charged \$49.77	(b) Date of Charge 04/01/2025	(c) Date(s) Credit Card Issue 05/21/2025	r Paid					
	PAYEE	(a) Payee name	•	(b) Payee address;	City, Sta	ıte,	Zip Code			
l		Amazon.com		1200 12th Avenue South						
		Amazon.com		Suite 1200						
┡		( ) 0 :		Seattle, WA 98144						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description supplies for Austin apartm	nent					
	Political	Travel Out of District		Supplies for Austin apartir	ient					
L	X Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			X Check if Austin, TX,	officeholder living expense					
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)			
	Sch: 22/38 Rpt: 35/51	Hull, Lacey M. (The	e Honorable)			00084135					
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged \$36.68	(b) Date of Charge 04/21/2025	(c) Date(s) C 05/21/2025	redit Card Issuer	Paid					
7	PAYEE	(a) Payee name Amazon.com		Suite 1200 Seattle, WA	Avenue South A 98144	City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description office supp							
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct expenditure to benefit C/OH	name Office	e sought		Office held						
F	PAYMENT	(b) Date of Charge	(c) Data(s) C	redit Card Issuer	· Daid						
	TAIMENT	(a) Amount Charged \$36.25	05/28/2025	(c) Date(3) C	redit Card 133der	T Click					
	PAYEE (a) Payee name  Amazon.com			(b) Payee ad 1200 12th A Suite 1200 Seattle, WA	Avenue South	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Exper	·	(b) Description	on						
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$36.78	(b) Date of Charge 06/05/2025	(c) Date(s) C	redit Card Issuer	Paid					
	PAYEE	Amazon.com			dress; Avenue South A 98144	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			on lies						
L						officeholder living exp	ense				
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete this	form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 23/38 Rpt: 36/51	Hull, Lacey M. (The	e Honorable)			00084135			
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDIT	UNITEMIZED URES TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	edit Card Issuer	Paid			
		\$62.03	06/05/2025						
7	PAYEE	(a) Payee name		(b) Payee add	lress;	City,	State,	Zip Code	
		Amazon.com		1200 12th Avenue South Suite 1200 Seattle, WA 98144					
8	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE  Political	(See Categories listed at the top Office Overhead/Ren		office suppli	es				
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	· 🗆	Check if Austin, TX,	officeholder living expe	ense		
9	Complete ONLY if direct	Candidate/Officeholder	r name Office	e sought		Office held			
е	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge		edit Card Issuer	Paid			
		\$111.75	04/08/2025	05/21/2025					
Г	PAYEE	(a) Payee name	•	(b) Payee add	lress;	City,	State,	Zip Code	
		Tacodeli		301 Congre	ss Ave				
				Austin, TX 7	8701				
	PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description					
	EXPENDITURE  Political	Food/Beverage Expe		food for committee members					
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	e T. Check if Austin, TX, officeholder living expense					
	Complete ONLY if direct	Candidate/Officeholder	r name Office	e sought		Office held			
е	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$120.80	(b) Date of Charge 04/15/2025	(c) Date(s) Cr 05/21/2025	edit Card Issuer	Paid			
	PAYEE	(a) Payee name		(b) Payee add	lress;	City,	State,	Zip Code	
		Tagadali		301 Congre	ss Ave				
		Tacodeli							
L				Austin, TX 7					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	Political Food/Beverage Expense			food for committee members					
	X Non-Political (c) Check if travel outside of Texas. Complete Schedule			dule T. Check if Austin, TX, officeholder living expense					
	Complete ONLY if direct	Candidate/Officeholder	r name Office	e sought		Office held			
е	expenditure to benefit C/OH								

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Etl	nics Commiss	sion Filers)	
Sch: 24/38 Rpt: 37/51	Hull, Lacey M. (The	e Honorable)		00084135			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$33.21	04/21/2025	05/21/2025				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Tacodeli		301 Congress Ave				
			Austin, TX 78701				
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this sahadula)	(b) Description				
EXPENDITURE  Political	Food/Beverage Exper		meal in Austin				
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Au	stin, TX, officeholder living ex	officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$56.56	05/01/2025	05/21/2025				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Cauara Chana Ina		225 Varick St.				
	SquareSpace Inc		N. V. I. N. (1004				
DUDDOCE OF	(a) Category		New York, NY 1001 (b) Description	4			
PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	web services				
X Political	Advertising Expense		Web Services				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Au	stin, TX, officeholder living e	xpense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$118.16	05/29/2025					
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code	
			525 N Lamar				
	Whole Foods						
			Austin, TX 78703				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	supplies for Austin a	partment			
Political	Traver Out of District						
X Non-Political	(c) Check if travel outside	Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.	(, , , , , , , , , , , , , , , , , , ,	,	,
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 25/38 Rpt: 38/51	Hull, Lacey M. (The	e Honorable)		00084135		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A C	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer Paid		
	\$59.00	05/30/2025				
7 PAYEE	(a) Payee name TenTen		(b) Payee address; 501 W. 6th St	City,	State,	Zip Code
			Austin, TX 78701			
8 PURPOSE OF	(a) Category	-f.de:ld.d-\	(b) Description			
EXPENDITURE  Political	(See Categories listed at the top Food/Beverage Expe		meal in Austin			
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if A	Austin, TX, officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car 01/30/2025	d Issuer Paid		
	\$77.84	01/13/2025	01/30/2025			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Amazon.com		1200 12th Avenue Suite 1200			
	(a) Cataman		Seattle, WA 98144			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description office supplies			
Political	Office Overhead/Rent	tal Expense	onice supplies			
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Austin, TX, officeholder living ex	pense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$12.72	(b) Date of Charge 04/07/2025	(c) Date(s) Credit Car 05/21/2025	d Issuer Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Cava		515 Congress			
	Cava					
	(a) Oatawari		Austin, TX 78701			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description meal in Austin			
Political	Food/Beverage Expe		meai iii Austiii			
X Non-Political	(c) Check if travel outside	Austin, TX, officeholder living ex	pense			
Complete ONLY if direct	Candidate/Officeholder	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OH						

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 26/38 Rpt: 39/51	Hull, Lacey M. (The	e Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
		\$138.86	04/11/2025	05/21/202	5			
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Costco Wholesale		1150 Bunk	ker Hill Rd			
L				Houston, 7				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
	Political	Office Overhead/Rent		committee	office supplies			
	X Non-Political	() <b>[</b>			<b></b>			
Ļ		Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Australia Check if Austral			Check if Austin, TX,	officeholder living exp	ense	
	expenditure to benefit C/OH	Candidate/Officeriolder	name Onice	- sought		Office field		
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	r Paid		
		\$16.76	04/13/2025	05/21/202				
H	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Cava		515 Congr		<i>3.</i>	,	·
				Austin, TX	78701			
	PURPOSE OF	(a) Category		(b) Descripti				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		meal in Au	ıstin			
	Political	- Ood/Bovorago Expo						
L	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	)	Check if Austin, TX,	officeholder living exp	ense	
l	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH		1	T				
	PAYMENT	(a) Amount Charged \$123.76	(b) Date of Charge 04/22/2025	(c) Date(s) ( 05/21/202	Credit Card Issuei 5	r Paid		
$\vdash$	PAYEE	(a) Payee name	<u> </u>	(b) Payee a	ddress;	City,	State,	Zip Code
l				301 Congr		•		·
		Tacodeli						
				Austin, TX	78701			
	PURPOSE OF	(a) Category	of this cohodule)	(b) Descripti				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		food for co	mmittee memb	ers		
	Political	1 oou/beverage Expense						
	X Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austi			Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	ion Filers)
Sch: 27/38 Rpt: 40/51	Hull, Lacey M. (The	e Honorable)		00084135		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$111.99	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer 01/30/2025	· Paid		
7 PAYEE  8 PURPOSE OF	(a) Payee name  Amazon.com  (a) Category		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144 (b) Description	City,	State,	Zip Code
EXPENDITURE  Political	(See Categories listed at the top Travel Out of District	of this schedule)	supplies for Austin apartm	ent		
X Non-Political	(1)	of Texas. Complete Schedule T.		officeholder living exper	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held		
PAYMENT	(a) Amount Charged \$68.95	(b) Date of Charge 04/27/2025	(c) Date(s) Credit Card Issuer 05/21/2025	· Paid		
PAYEE	(a) Payee name  Extra Space Storag	Extra Space Storage		City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description storage unit			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$63.96	(b) Date of Charge 05/06/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid		
PAYEE	(a) Payee name  Mailchimp		(b) Payee address; 677 Ponce de Leon Ave N Atlanta, GA 30308	City, IE	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Advertising Expense	See Categories listed at the top of this schedule)				
Non-Political  Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	officeholder living exper Office held	nse			

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 28/38 Rpt: 41/51	Hull, Lacey M. (The	e Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$254.37	(b) Date of Charge 05/07/2025	(c) Date(s) 05/07/20	Credit Card Issuei 25	Paid		
7	PAYEE	(a) Payee name  Quattro Gatti		(b) Payee 908 Conq Austin, T	gress Ave	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip meal with	otion			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$68.95	(b) Date of Charge 05/27/2025	(c) Date(s)	Credit Card Issuer	Paid		
	PAYEE	(a) Payee name  Extra Space Storag	je	(b) Payee 1014 Kat	y Fwy	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$114.21	(b) Date of Charge 05/20/2025	(c) Date(s) 05/21/20	Credit Card Issuer 25	Paid		
	PAYEE	(a) Payee name Tacodeli		(b) Payee 301 Cond Austin, T	gress Ave	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Exper	nse	(b) Description food for the food food for the food for the food food food food food food food foo	committee memb			
L	X Non-Political	· · · —	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commis	sion Filers)
	Sch: 29/38 Rpt: 42/51	Hull, Lacey M. (The	e Honorable)		00084135		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	<sup>·</sup> Paid		
		\$140.22	05/31/2025				
7	PAYEE	(a) Payee name TenTen		(b) Payee address; 501 W. 6th St	City,	State,	Zip Code
L				Austin, TX 78701			
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Expe	· ·	(b) Description meal in Austin			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
е	expenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged \$123.56	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer 01/30/2025	<sup>*</sup> Paid		
	PAYEE	(a) Payee name Amazon.com		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description supplies for Austin apartm	ent		
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$31.12	(b) Date of Charge 02/04/2025	(c) Date(s) Credit Card Issuer 03/16/2025	Paid		
	PAYEE	(a) Payee name Amazon.com		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Travel Out of District	,	(b) Description supplies for Austin apartm			
$\vdash$	X Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense					
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
ı							

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 30/38 Rpt: 43/51	Hull, Lacey M. (The	Honorable)		00084135		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$55.81	(b) Date of Charge 04/27/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid		
7 PAYEE	(a) Payee name  Amazon.com		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description office supplies			
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$18.94	(b) Date of Charge 05/01/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid		
PAYEE	(a) Payee name Amazon.com			City,	State,	Zip Code
PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description office supplies			
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$80.41	(b) Date of Charge 04/09/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid		
PAYEE	(a) Payee name Whole Foods		(b) Payee address; 525 N Lamar Austin, TX 78703	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Travel Out of District	See Categories listed at the top of this schedule)		ent		
X Non-Political					ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 31/38 Rpt: 44/51	Hull, Lacey M. (The	e Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$45.00	(b) Date of Charge 04/20/2025	(c) Date(s) 0 05/21/2029	Credit Card Issuei 5	r Paid		
7	PAYEE	(a) Payee name Small People CDC	<u> </u>	(b) Payee ac	ntas Way	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top opinion 547 expense	of this schedule)	Houston, T (b) Descripti childcare				
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$51.47	(b) Date of Charge 04/27/2025	(c) Date(s) 0 04/27/2029	Credit Card Issuer 5	r Paid		
	PAYEE	(a) Payee name Whole Foods		(b) Payee ac 525 N Lam Austin, TX	nar	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Descripti office supp	on			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	_	Office held		
	PAYMENT	(a) Amount Charged \$31.56	(b) Date of Charge 05/08/2025	(c) Date(s) 0 05/21/202	Credit Card Issuei 5	r Paid		
	PAYEE	(a) Payee name  Magic Circle Repub	Magic Circle Republican Women		ddress; iont St. FX 77055	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Descripti luncheon	on			
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Au			Check if Austin, TX,	officeholder living exp	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	esought		Office held		

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 32/38 Rpt: 45/51	Hull, Lacey M. (The	e Honorable)			00084135		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$111.44	(b) Date of Charge 05/13/2025	(c) Date(s) C 05/21/2025	Credit Card Issuer 5	Paid		
7	PAYEE	(a) Payee name  Tacodeli		(b) Payee ac	ess Ave	City,	State,	Zip Code
L				Austin, TX				
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description food for co	on mmittee memb	ers		
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
Ľ	expenditure to benefit C/OH		I	1				
	PAYMENT	(a) Amount Charged \$43.29	(b) Date of Charge 05/29/2025	(c) Date(s) C	Credit Card Issuer	Paid		
	PAYEE	(a) Payee name  Amazon.com		(b) Payee ac 1200 12th Suite 1200 Seattle, W	Avenue South	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description picture fram	on			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	_	Office held		
	PAYMENT	(a) Amount Charged \$64.94	(b) Date of Charge 02/28/2025	(c) Date(s) C 03/16/2025	Credit Card Issuer 5	Paid		
	PAYEE	(a) Payee name Amazon.com		(b) Payee ac 1200 12th Suite 1200 Seattle, W	Avenue South	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE		a) Category See Categories listed at the top of this schedule) Office Overhead/Rental Expense		on supplies			
L	X Non-Political	(c) Check if travel outside	C) Check if travel outside of Texas. Complete Schedule T. Check if I			officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comm	ission Filers)		
Sch: 33/38 Rpt: 46/51	Hull, Lacey M. (The	e Honorable)		00084135			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$61.49	04/25/2025	05/21/2025				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code		
	Cathy's Cleaners		1110 E Cesar Chavez				
			Austin, TX 78702				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
Political	Travel Out of District	or the contours,	dry cleaning				
X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$28.47	04/08/2025	05/21/2025				
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code		
	Cava		515 Congress				
			Austin, TX 78701				
PURPOSE OF	(a) Category	of this calcadula)	(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper		meal in Austin				
Political	· · · · · · · · · · · · · · · · · · ·						
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$31.56	04/17/2025	05/21/2025				
PAYEE	(a) Payee name	l	(b) Payee address;	City, State	, Zip Code		
			6711 Belmont St.				
	Magic Circle Repub	olican Women					
			Houston, TX 77055				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	luncheon				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	edule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 34/38 Rpt: 47/51	Hull, Lacey M. (The	e Honorable)		00084135		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$48.00	(b) Date of Charge 04/18/2025	(c) Date(s) Credit Card Issue 05/21/2025	r Paid		
7 PAYEE	(a) Payee name  Village Republican	Women	(b) Payee address; PO Box 79924	City,	State,	Zip Code
	( ) 0 :		Houston, TX 77279			
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description dry cleaning			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH		-				
PAYMENT	(a) Amount Charged \$111.44	(b) Date of Charge 05/06/2025	(c) Date(s) Credit Card Issue 05/21/2025	r Paid		
PAYEE	(a) Payee name (b) Payee address;			City,	State,	Zip Code
	Tacodeli		301 Congress Ave			
			Austin, TX 78701			
PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description food for committee memb	oers		
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	, officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held		
expenditure to benefit C/OH			· ·			
PAYMENT	(a) Amount Charged \$63.65	(b) Date of Charge 05/29/2025	(c) Date(s) Credit Card Issue	r Paid		
PAYEE	(a) Payee name Door Dash	1	(b) Payee address; 2207 W Roscoe Chicago, IL 60618	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  Political		(a) Category See Categories listed at the top of this schedule) Food/Beverage Expense				
X Non-Political	(c) Check if travel outside		, officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.	(		,
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics of	Commiss	sion Filers)
Sch: 35/38 Rpt: 48/51	Hull, Lacey M. (The	e Honorable)		00084135		
4 CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$56.56	06/01/2025				
7 PAYEE	(a) Payee name  SquareSpace Inc		(b) Payee address; 225 Varick St.	City,	State,	Zip Code
			New York, NY 10014			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description			
	Advertising Expense	of this schedule)	web services			
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$12.72	06/02/2025				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Cava		515 Congress			
			Austin, TX 78701			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		meal in Austin			
Political	Food/Beverage Expe	nse				
X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expens	se	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$74.00	06/18/2025				
PAYEE	(a) Payee name	<u>I</u>	(b) Payee address;	City,	State,	Zip Code
			10750 Barker Cypress Ro			•
	Cy-Fair Republican	Women	Ste 104 #153			
			Houston, TX 77443			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	•	Founders Day Event			
X Political	Contributions/Donation Candidate/Officeholde					
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held		
expenditure to benefit C/OH						

# SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 36/38 Rpt: 49/51	Hull, Lacey M. (The	e Honorable)		00084135				
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$68.95	06/27/2025						
7 PAYEE	(a) Payee name  Extra Space Storage		(b) Payee address; 1014 Katy Fwy	City,	State,	Zip Code		
			Houston, TX 77043 (b) Description					
8 PURPOSE OF EXPENDITURE	1 ' ' ' '	(a) Category (See Categories listed at the top of this schedule)						
l	Office Overhead/Ren		storage unit					
X Political								
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		officeholder living exp	ense			
9 Complete ONLY if direct		name Offic	e sought	Office held				
expenditure to benefit C/OI		Lass co	1()=:()=:!:=:!:					
PAYMENT	(a) Amount Charged \$99.58	(b) Date of Charge 03/11/2025	(c) Date(s) Credit Card Issue 03/11/2025	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Amazon.com		1200 12th Avenue South Suite 1200 Seattle, WA 98144					
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description supplies for Austin apartm	nent				
X Non-Political	(c) Check if travel outside of Texas. Complete Schedule T.		X Check if Austin, TX, officeholder living expense					
Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name Office			Office held				
expenditure to benefit C/OI								
PAYMENT	(a) Amount Charged \$17.45	(b) Date of Charge 04/14/2025	(c) Date(s) Credit Card Issue 05/21/2025	r Paid				
PAYEE	(a) Payee name Amazon.com	1	(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description snacks for office					
X Non-Political	(c) Check if travel outside	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		name Offic	e sought	Office held				

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

		The Insti	ruction Guide explains how	to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 37/38 Rpt: 50/51	Hull, Lacey M. (The	Honorable)	00084135				
4	CREDIT CARD ISSUER	EXPENDITURES		CHARGED TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$12.99	(b) Date of Charge 04/17/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid			
7	PAYEE	(a) Payee name  Cathy's Cleaners		(b) Payee address; 1110 E Cesar Chavez Austin, TX 78702	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description dry cleaning		(b) Description				
	X Non-Political (c) Check if travel outside of Texas. Complete Schedule T. X Check if Austin, Toke the Complete Schedule T.		X Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
е	xpenditure to benefit C/OH	(a) A a	(h) D - t t Oh	(-) D-t-(-) O	D. Id			
	PAYMENT	(a) Amount Charged \$43.95	(b) Date of Charge 06/02/2025	(c) Date(s) Credit Card Issuer	Paid			
	PAYEE	(a) Payee name  Cathy's Cleaners		(b) Payee address; 1110 E Cesar Chavez	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		Austin, TX 78702 (b) Description dry cleaning				
	X Non-Political	(c) Check if travel outside of Texas. Complete Schedule T.		X Check if Austin, TX,	, TX, officeholder living expense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$103.84	(b) Date of Charge 03/13/2025	(c) Date(s) Credit Card Issuer 03/16/2025	Paid			
	PAYEE	(a) Payee name Amazon.com		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political Non-Political	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District		(b) Description supplies for Austin apartm		ense		
	Complete ONLY if direct	(c) Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense  Candidate/Officeholder name Office sought Office held						
е	xpenditure to benefit C/OH				3co nota			

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 38/38 Rpt: 51/51	Hull, Lacey M. (The	Honorable)		00084135			
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$27.70	(b) Date of Charge 05/06/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid			
7 PAYEE	(a) Payee name  Amazon.com		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description office supplies				
X Non-Political	(c) Check if travel outside	Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office so				Office held			
PAYMENT	(a) Amount Charged \$25.77	(b) Date of Charge 05/07/2025	(c) Date(s) Credit Card Issuer 05/21/2025	· Paid			
PAYEE	(a) Payee name  Amazon.com  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  Political			(b) Description office supplies				
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$31.12	(b) Date of Charge 05/19/2025	(c) Date(s) Credit Card Issuer 05/21/2025	Paid			
PAYEE	(a) Payee name Amazon.com		(b) Payee address; 1200 12th Avenue South Suite 1200 Seattle, WA 98144	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description office supplies				
X Non-Political  Complete ONLY if direct expenditure to benefit C/OH	plete ONLY if direct						