

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086108	2 Total pages filed: 42								
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR The Honorable</td> <td style="width: 30%;">FIRST Nathaniel</td> <td style="width: 40%;">MI MI</td> </tr> </table>		MS / MRS / MR The Honorable	FIRST Nathaniel	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025					
	MS / MRS / MR The Honorable	FIRST Nathaniel	MI MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME Nate</td> <td style="width: 30%;">LAST Schatzline</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME Nate	LAST Schatzline	SUFFIX							
NICKNAME Nate	LAST Schatzline	SUFFIX									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 162564 Fort Worth, TX 76161		Date Hand-delivered or Date Postmarked								
			<table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table>	Receipt #	Amount						
	Receipt #	Amount									
			Date Processed								
		Date Imaged									
5 CAMPAIGN TREASURER NAME	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR Mrs.</td> <td style="width: 30%;">FIRST Adrienne Bradleigh</td> <td style="width: 40%;">MI MI</td> </tr> </table>			MS / MRS / MR Mrs.	FIRST Adrienne Bradleigh	MI MI					
	MS / MRS / MR Mrs.	FIRST Adrienne Bradleigh	MI MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Schatzline</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>			NICKNAME	LAST Schatzline	SUFFIX						
NICKNAME	LAST Schatzline	SUFFIX									
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 162564 Fort Worth, TX 76161										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (469) 337-9547										
8 REPORT TYPE	<table style="width: 100%;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)
<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)								
<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)								
9 PERIOD COVERED	<table style="width: 100%;"> <tr> <td style="width: 25%;">Month Day Year</td> <td style="width: 25%;"></td> <td style="width: 25%;">Month Day Year</td> <td style="width: 25%;"></td> </tr> <tr> <td>01/01/2025</td> <td>THROUGH</td> <td>06/30/2025</td> <td></td> </tr> </table>			Month Day Year		Month Day Year		01/01/2025	THROUGH	06/30/2025	
Month Day Year		Month Day Year									
01/01/2025	THROUGH	06/30/2025									
10 ELECTION	<table style="width: 100%;"> <tr> <td style="width: 40%;">ELECTION DATE Month Day Year 03/03/2026</td> <td style="width: 60%;">ELECTION TYPE</td> </tr> </table>			ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE						
	ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE									
<table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>			<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	<input type="checkbox"/> General	<input type="checkbox"/> Special				
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other									
<input type="checkbox"/> General	<input type="checkbox"/> Special										
11 OFFICE	OFFICE HELD (if any) State Representative District 93 Tarrant		12 OFFICE SOUGHT (if known) State Representative District 93								

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FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Schatzline, Nathaniel (The Honorable)		14 Filer ID 00086108 (Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	<div>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</div>		
	<div>COMMITTEE TYPE</div> <div><input type="checkbox"/> GENERAL</div> <div><input type="checkbox"/> SPECIFIC</div>	<div>COMMITTEE NAME</div>	
		<div>COMMITTEE ADDRESS</div>	
		<div>COMMITTEE CAMPAIGN TREASURER NAME</div>	
		<div>COMMITTEE CAMPAIGN TREASURER ADDRESS</div>	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 45,843.50
<div>-----</div> EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 19,754.45
<div>-----</div> CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 179,181.00
<div>-----</div> OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 40,000.00
17 AFFIDAVIT <div style="text-align: center; margin-top: 100px;">I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</div> <div style="text-align: center; margin-top: 50px;">_____ The Honorable Nathaniel Schatzline Signature of Candidate or Officeholder</div> <div style="margin-top: 50px;">AFFIX NOTARY STAMP / SEAL ABOVE</div> <div style="margin-top: 50px;">Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</div>			
<div style="display: flex; justify-content: space-between;"><div>_____ Signature of officer administering</div><div>_____ Printed name of officer administering</div><div>_____ Title of officer administering oath</div></div>			

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

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18 FILER NAME Schatzline, Nathaniel (The Honorable)		19 Filer ID (Ethics Commission Filers) 00086108
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 45,843.50
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 40,635.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 19,754.45
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 1,625.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/13 Rpt: 4/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abusaad, Nazeh <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 76082	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akowski, Melinda <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76126	Amount of Contribution (\$) \$104.43
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arenz, John <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$104.43
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Montgomery <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Ashford Inc.
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brice, James <hr/> Contributor address; City; State; Zip Code Fayetteville, NC 28306	Amount of Contribution (\$) \$104.43
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) CLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/13 Rpt: 5/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Asher <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$208.54
8 Principal occupation / Job title (See Instructions) Legislative Aide		9 Employer (See Instructions) Texas House of Representatives
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce, Robert <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Narrator Broadcast Production		Employer (See Instructions) Self-Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Jeffrey <hr/> Contributor address; City; State; Zip Code Streetman, TX 75859	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalaki, Shahed <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Patrick <hr/> Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$520.88
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/13 Rpt: 6/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Timothy <hr/> 6 Contributor address; City; State; Zip Code Southlake, TX 76092	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Cantey Hanger LLP
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escobedo, Rosalie <hr/> Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) House of Representatives
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Grant <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) Social Scientist		Employer (See Instructions) TCU
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Ralph <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$364.71
Principal occupation / Job title (See Instructions) SVP Finance		Employer (See Instructions) Welcome Group
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbes, Matt <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$26.35
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/13 Rpt: 7/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, John <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76011	7 Amount of Contribution (\$) \$26.35
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Ferrovial US
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Rex <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gravely , Marc <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Paula <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, John <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) Sr. Associate		Employer (See Instructions) Santander

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/13 Rpt: 8/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hootman, Joe <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$26.35
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoverman, TJ <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$26.35
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lockheed Martin
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isom, Carolyn <hr/> Contributor address; City; State; Zip Code Haslet, TX 76052	Amount of Contribution (\$) \$10.73
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) USPS
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Mirella <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79118	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) Sales Associate		Employer (See Instructions) Street VW
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez , Ruben <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/13 Rpt: 9/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Alexander <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76111	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Randy <hr/> Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$26.35
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leist, Erik <hr/> Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levitt, Charles <hr/> Contributor address; City; State; Zip Code Haltom City, TX 76137	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Julie <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/13 Rpt: 10/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medeiros, Joshua <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$5.52
8 Principal occupation / Job title (See Instructions) Data Analyst		9 Employer (See Instructions) Self Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metroplex Republican Women <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Joshua <hr/> Contributor address; City; State; Zip Code Willow Park, TX 76087	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Representative Nate Schatzline
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Cooper <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$10.73
Principal occupation / Job title (See Instructions) Intern		Employer (See Instructions) City of Fort Worth
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nastaran, Safdarian <hr/> Contributor address; City; State; Zip Code Dallas, TX 76230	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/13 Rpt: 11/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Posey, Jake <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) The Posey Law Firm
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rauch, Erick <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$10.73
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Ruth <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Political Director		Employer (See Instructions) Tarrant County
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Fran <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) True Texas Project
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Scott <hr/> Contributor address; City; State; Zip Code Haltom City, TX 76117	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Team R

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/13 Rpt: 12/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Mario <hr/> 6 Contributor address; City; State; Zip Code Cedar Hill, TX 75104	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russo, Christopher <hr/> Contributor address; City; State; Zip Code El Lago, TX 77586	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Strong Borders Foundation
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schatzline, Karen <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$1,041.44
Principal occupation / Job title (See Instructions) Speaker, Author, Health Coach		Employer (See Instructions) Two Crazy Dreamers LLC
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schatzline, Nate <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$5.54
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Mercy Culture Church
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scherer, Daniel <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Flight Dispatcher		Employer (See Instructions) SW Airlines

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/13 Rpt: 13/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Robert <hr/> 6 Contributor address; City; State; Zip Code Heath, TX 75032	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Gail Ann <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$104.43
Principal occupation / Job title (See Instructions) Realtor/Owner		Employer (See Instructions) Presence Real Estate
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanton, James <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant County Patriots PAC <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Mark <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76111	Amount of Contribution (\$) \$104.43
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/13 Rpt: 14/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelbaum, Melinda <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76114	7 Amount of Contribution (\$) \$520.88
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority <hr/> Contributor address; City; State; Zip Code Victoria , TX 77901	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Gun Rights PAC <hr/> Contributor address; City; State; Zip Code Weatherford , TX 76086	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thurston, Fred <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$26.35
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/13 Rpt: 15/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner , Sean <hr/> 6 Contributor address; City; State; Zip Code Roanoke, TX 76262	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Buffer Insurance
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vazquez, Cindy <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$10.73
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace , Bonnie <hr/> Contributor address; City; State; Zip Code Llano, TX 78643	Amount of Contribution (\$) \$104.43
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) None
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekley, Richard <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Senior Chairman		Employer (See Instructions) Texans for Lawsuit Reform
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Public Blueprint

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/13 Rpt: 16/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willems, Chad <hr/> 6 Contributor address; City; State; Zip Code Scottsdale, AZ 85260	7 Amount of Contribution (\$) \$104.43
8 Principal occupation / Job title (See Instructions) Chief of Staff		9 Employer (See Instructions) MCSO

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 17/42
2 FILER NAME Schatzline, Nathaniel (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086108
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 06/26/2025	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Schatzline, Nate	9 Loan Amount (\$) \$40,635.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code Fort Worth, TX 76244	10 Interest Rate 0
		11 Maturity Date 06/26/2030
12 Principal occupation / Job title (See Instructions) Pastor		13 Employer (See Instructions) Mercy Culture Church
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/24 Rpt: 18/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 02/20/2025	5 Payee name 7-ELEVEN	
6 Amount (\$) \$16.24	7 Payee address; City; State; Zip Code 613 Congress Avenue Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name 7-ELEVEN		
Amount (\$) \$24.62	Payee address; City; State; Zip Code 613 Congress Avenue Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name 7-ELEVEN		
Amount (\$) \$13.99	Payee address; City; State; Zip Code 613 Congress Avenue Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/24 Rpt: 19/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/08/2025	5 Payee name AGA Service Company	
6 Amount (\$) \$58.82	7 Payee address; City; State; Zip Code 9950 Maryland Drive Henrico, VA 23233	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense on Official Business
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2025	Payee name Allianz	
Amount (\$) \$64.10	Payee address; City; State; Zip Code PO Box 72031 Richmond, VA 23255	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense for Official Business
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2025	Payee name Amazon	
Amount (\$) \$49.78	Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/24 Rpt: 20/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 03/03/2025	5 Payee name Amazon	
6 Amount (\$) \$150.47	7 Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2025	Payee name American Airlines	
Amount (\$) \$893.96	Payee address; City; State; Zip Code 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Official Business Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2025	Payee name American Heritage and History Foundation	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 10388 Conway, AZ 72034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ten Commandments Monument for Tarrant County
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/24 Rpt: 21/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/02/2025	5 Payee name Anchora Properties LLC.	
6 Amount (\$) \$3,337.50	7 Payee address; City; State; Zip Code 309 E. Broad Street Mansfield , TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Housing in Austin
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2025	Payee name Anchora Properties LLC.	
Amount (\$) \$1,712.50	Payee address; City; State; Zip Code 309 E. Broad Street Mansfield , TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Living Expenses	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Austin Housing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/03/2025	Payee name Anchora Properties LLC.	
Amount (\$) \$1,712.50	Payee address; City; State; Zip Code 309 E. Broad Street Mansfield , TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Living Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin Housing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/24 Rpt: 22/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 04/01/2025	5 Payee name Anchora Properties LLC.	
6 Amount (\$) \$1,712.50	7 Payee address; City; State; Zip Code 309 E. Broad Street Mansfield , TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Living Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin Housing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2025	Payee name Anchora Properties LLC.	
Amount (\$) \$1,747.50	Payee address; City; State; Zip Code 309 E. Broad Street Mansfield , TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Living Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin Housing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2025	Payee name Best Buy	
Amount (\$) \$140.70	Payee address; City; State; Zip Code 9600 S Interstate 35 Austin, TX 78748	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/24 Rpt: 23/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/21/2025	5 Payee name Cambria Hotel	
6 Amount (\$) \$1,130.00	7 Payee address; City; State; Zip Code 69 Q St SW, Washington DC, DC 20024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of state travel on official business
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/11/2025	Payee name Capitol Gift Shop	
Amount (\$) \$352.90	Payee address; City; State; Zip Code 1400 Congress Ave. Suite E1.006 Austin , TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift/Awards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2025	Payee name Chick Fil A	
Amount (\$) \$250.98	Payee address; City; State; Zip Code 12501 N MO Pac Expy Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent Capitol Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/24 Rpt: 24/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 03/04/2025	5 Payee name Chipotle	
6 Amount (\$) \$228.14	7 Payee address; City; State; Zip Code 801 Congress Ave. Ste 100 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Chipotle		
Amount (\$) \$14.45	Payee address; City; State; Zip Code 801 Congress Ave. Ste 100 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name Donor Box		
Amount (\$) \$17.00	Payee address; City; State; Zip Code The Hearst Building, 53rd St. Suite 900 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Platform Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/24 Rpt: 25/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/25/2025	5 Payee name Donor Box	
6 Amount (\$) \$17.00	7 Payee address; City; State; Zip Code The Hearst Building, 53rd St. Suite 900 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Platform Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/10/2025	Payee name FedEx	
Amount (\$) \$86.33	Payee address; City; State; Zip Code 6600 N. Freeway Unit 132 Fort Worth, TX 76137	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2025	Payee name Fort Worth Republican Women	
Amount (\$) \$31.00	Payee address; City; State; Zip Code P.O. Box 101613 Fort Worth, TX 76185	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fort Worth Republican Women's Luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/24 Rpt: 26/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/25/2025	5 Payee name Fort Worth Republican Women	
6 Amount (\$) \$36.00	7 Payee address; City; State; Zip Code P.O. Box 101613 Fort Worth, TX 76185	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fort Worth Republican Women's Luncheon
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2025	Payee name Great American Cookie	
Amount (\$) \$73.69	Payee address; City; State; Zip Code 2901 S Capital of Texas Hwy, Unit P08A Austin, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent Welcome Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2025	Payee name HEB	
Amount (\$) \$78.22	Payee address; City; State; Zip Code 1000 E 41st Street Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/24 Rpt: 27/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 04/15/2025	5 Payee name HEB	
6 Amount (\$) \$90.49	7 Payee address; City; State; Zip Code 1000 E 41st Street Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2025	Payee name HEB	
Amount (\$) \$114.90	Payee address; City; State; Zip Code 1000 E 41st Street Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2025	Payee name Hobby Lobby	
Amount (\$) \$162.32	Payee address; City; State; Zip Code 6600 S Mopac Austin, TX 78754	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/24 Rpt: 28/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/13/2025	5 Payee name Home Depot	
6 Amount (\$) \$528.26	7 Payee address; City; State; Zip Code 7100 N Freeway Fort Worth, TX 76137	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Ken Paxton for Senate	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 110 N Akard Street, PMB# 40 Dallas , TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Ken Paxton for Senate
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2025	Payee name Lanier Parking	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 447 W 3rd street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/24 Rpt: 29/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/13/2025	5 Payee name Lowe's	
6 Amount (\$) \$8.62	7 Payee address; City; State; Zip Code 920 N. Burleson Blvd. Burleson, TX 76028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/25/2025	Payee name Metroplex Republican Women	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 147 E. Hurst Blvd Hurst, TX 76053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Metroplex Republican Women's Luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2025	Payee name Moore, Joshua	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 431 Meadow Place Dr. Apt. 5210 Willow Park, TX 76087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/24 Rpt: 30/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 02/21/2025	5 Payee name PMC Paid Parking	
6 Amount (\$) \$24.46	7 Payee address; City; State; Zip Code 216 Congress Ave Austin, TX 78754	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/21/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$24.46	Payee name PMC Paid Parking	Office held
Purpose of Expenditure	Payee address; City; State; Zip Code 216 Congress Ave Austin, TX 78754	
Purpose of Expenditure	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/21/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$5.49	Payee name PMC Paid Parking	Office held
Purpose of Expenditure	Payee address; City; State; Zip Code 216 Congress Ave Austin, TX 78754	
Purpose of Expenditure	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/21/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$5.49	Payee name PMC Paid Parking	Office held
Purpose of Expenditure	Payee address; City; State; Zip Code 216 Congress Ave Austin, TX 78754	
Purpose of Expenditure	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/24 Rpt: 31/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 04/14/2025	5 Payee name QT	
6 Amount (\$) \$17.32	7 Payee address; City; State; Zip Code 901 S Bell Blvd Cedar Park, TX 78613	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Staff Supply Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Supply Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/18/2025	Payee name Starbucks	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 501 W 15th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/18/2025	Payee name Stripe	
Amount (\$) \$29.47	Payee address; City; State; Zip Code 185 Berry St. #550 San Francisco, TX 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Service Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/24 Rpt: 32/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 03/03/2025	5 Payee name Stripe	
6 Amount (\$) \$49.12	7 Payee address; City; State; Zip Code 185 Berry St. #550 San Francisco, TX 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Platform
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2025	Payee name Texas House Republican Caucus	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1100 Congress Ave. Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Caucus Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2025	Payee name The Flying Locksmith	
Amount (\$) \$211.09	Payee address; City; State; Zip Code 4364 Western Center Blvd Fort Worth , TX 76137	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Office Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/24 Rpt: 33/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 02/19/2025	5 Payee name Turcios, Carlos	
6 Amount (\$) \$37.00	7 Payee address; City; State; Zip Code 1100 Congress Avenue Austin , TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2025	Payee name Walmart Supercenter	
Amount (\$) \$553.80	Payee address; City; State; Zip Code 710 E Ben White Blvd Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2025	Payee name Walmart Supercenter	
Amount (\$) \$35.14	Payee address; City; State; Zip Code 710 E Ben White Blvd Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/24 Rpt: 34/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 03/04/2025	5 Payee name Zoom	
6 Amount (\$) \$16.98	7 Payee address; City; State; Zip Code 55 N Almaden Blvd, 6th Floor San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Zoom Account
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/04/2025	Candidate/Officeholder name	Office sought
Payee name Zoom	Office held	
Amount (\$) \$16.98	Payee address; City; State; Zip Code 55 N Almaden Blvd, 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zoom account
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/05/2025	Candidate/Officeholder name	Office sought
Payee name Zoom	Office held	
Amount (\$) \$16.98	Payee address; City; State; Zip Code 55 N Almaden Blvd, 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zoom Account
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/24 Rpt: 35/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 06/04/2025	5 Payee name Zoom	
6 Amount (\$) \$18.05	7 Payee address; City; State; Zip Code 55 N Almaden Blvd, 6th Floor San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zoom Account
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2025	Payee name domino's	
Amount (\$) \$140.64	Payee address; City; State; Zip Code 1900 guadalupe st. Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2025	Payee name domino's	
Amount (\$) \$362.41	Payee address; City; State; Zip Code 1900 guadalupe st. Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/24 Rpt: 36/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 02/24/2025	5 Payee name mailchimp	
6 Amount (\$) \$90.61	7 Payee address; City; State; Zip Code 405 N Angier Ave. Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$90.61	Payee name mailchimp Payee address; City; State; Zip Code 405 N Angier Ave. Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/22/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$90.61	Payee name mailchimp Payee address; City; State; Zip Code 405 N Angier Ave. Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/24 Rpt: 37/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 05/22/2025	5 Payee name mailchimp	
6 Amount (\$) \$90.61	7 Payee address; City; State; Zip Code 405 N Angier Ave. Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name mailchimp	
Amount (\$) \$90.61	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2025	Payee name uber	
Amount (\$) \$32.64	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of District Travel on Official Business
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/24 Rpt: 38/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/21/2025	5 Payee name uber	
6 Amount (\$) \$33.95	7 Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of District Travel on official business
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$28.53	Payee name uber	
	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$18.95	Payee name uber	
	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$18.95	Payee name uber	
	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/24 Rpt: 39/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/21/2025	5 Payee name uber	
6 Amount (\$) \$19.91	7 Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2025	Payee name uber	
Amount (\$) \$5.38	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2025	Payee name uber	
Amount (\$) \$37.08	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/24 Rpt: 40/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/22/2025	5 Payee name uber	
6 Amount (\$) \$38.27	7 Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2025	Payee name uber	
Amount (\$) \$55.71	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Out of district travel on official business
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2025	Payee name walgreens	
Amount (\$) \$93.87	Payee address; City; State; Zip Code 4501 Guadalupe St. Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/24 Rpt: 41/42	2 FILER NAME Schatzline, Nathaniel (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086108
4 Date 01/14/2025	5 Payee name walgreens	
6 Amount (\$) \$29.00	7 Payee address; City; State; Zip Code 4501 Guadalupe St. Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2025	Payee name wholefoods	
Amount (\$) \$61.04	Payee address; City; State; Zip Code 525 N Lamar Blvd Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2025	Payee name wholefoods	
Amount (\$) \$29.20	Payee address; City; State; Zip Code 525 N Lamar Blvd Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 42/42

2 FILER NAME

Schatzline, Nathaniel (The Honorable)

3 Filer ID (Ethics Commission Filers)
00086108

4 Date

06/10/2025

5 Name of person from whom amount is received

Anchora Properties LLC

8 Amount (\$)

\$1,625.00

6 Address of person from whom amount is received; City; State; Zip Code

Mansfield , TX 76063

7 Purpose for which amount is received

Returned Deposit

☐ Check if political contribution returned to filer