

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) 00085953 | | 2 Total pages filed: 23 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Michael C. | MI | | |
| | NICKNAME Mike | LAST Olcott | SUFFIX | | |
| | | | OFFICE USE ONLY | | |
| | | | Date Received ELECTRONICALLY FILED 07/15/2025 | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 247 Aledo, TX 76008 | | ZIP CODE | | |
| | Date Hand-delivered or Date Postmarked | | | | |
| | Receipt # | | Amount | | |
| | Date Processed | | | | |
| Date Imaged | | | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | FIRST Edgar L. | MI | | |
| | NICKNAME Ed | LAST Huddleston | SUFFIX | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 122 Red Oak St. S Weatherford, TX 76087 | | | | |
| | | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | | |
| (817) 878-6391 | | | | | |
| 8 REPORT TYPE | <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 | Month | Day | Year | THROUGH | Month Day Year |
| 01/01/2025 06/30/2025 | | | | | |
| 10 ELECTION | ELECTION DATE Month Day Year 03/03/2026 | | ELECTION TYPE | | |
| | <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 60 | | | 12 OFFICE SOUGHT (if known) State Representative District 60 | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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| | | | |
|----------------|------------------------------------|-------------|----------------------------|
| 13 C / OH NAME | Olcott, Michael C. (The Honorable) | 14 Filer ID | (Ethics Commission Filers) |
| | | 00085953 | |

| | | |
|--|--|--------------------------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | 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. | |
| | COMMITTEE TYPE | COMMITTEE NAME |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS |
| | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | |
|-------------------------|---|---------------|
| 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) | \$ 70,361.36 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 13,688.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 231,671.09 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 530,000.00 |

17 AFFIDAVIT

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.

The Honorable Michael C. Olcott

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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| | | |
|--|---|---|
| 18 FILER NAME Olcott, Michael C. (The Honorable) | | 19 Filer ID (Ethics Commission Filers) 00085953 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 70,361.36 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 13,688.00 |
| 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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/12 Rpt: 4/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abusaad, Nazeh 6 Contributor address; City; State; Zip Code Richardson, TX 75082-2674 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) MAS Law |
| Date 06/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jude Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$1,041.98 |
| Principal occupation / Job title (See Instructions) Trial Lawyer | | Employer (See Instructions) Self |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alderman, Marianne Contributor address; City; State; Zip Code Aledo, TX 76008 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Kurt Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$12,500.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Arnold & Itkin LLP |
| Date 06/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartoli, Larry Contributor address; City; State; Zip Code Weatherford, TX 76087-8966 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassinger, Jimmy 6 Contributor address; City; State; Zip Code Highland Village, TX 75077 | 7 Amount of Contribution (\$) \$208.65 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Montgomery Contributor address; City; State; Zip Code Dallas, TX 75254 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) CEO/Chairman | | Employer (See Instructions) Ashford |
| Date 06/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bidne, Brian Contributor address; City; State; Zip Code Millsap, TX 76066 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) Brian L. Bidne |
| Date 06/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce, Robert Contributor address; City; State; Zip Code Boerne, TX 78006 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Boerne Stage Airfield |
| Date 06/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Jeffrey Contributor address; City; State; Zip Code Streetman, TX 75859-7234 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carus, Peter <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76086 | 7 Amount of Contribution (\$) \$1,041.98 |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) Head In The Cloud IT |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalaki, Shahed <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006-2507 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Chalaki Law Firm |
| Date 06/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheshire, Cary <hr/> Contributor address; City; State; Zip Code Beenbrook, TX 76116 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Self-Employed | | Employer (See Instructions) Cheshire Industries |
| Date 06/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clement, Todd <hr/> Contributor address; City; State; Zip Code Plano, TX 75093 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Clement Speer |
| Date 06/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeMaggio, Vincent <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085 | Amount of Contribution (\$) \$104.48 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/12 Rpt: 7/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVine, Gaylyn <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77581 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) DeVine Promotions |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Clark <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elston, Carole <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087 | Amount of Contribution (\$) \$1,041.98 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 06/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falconer, Elizabeth <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008-3692 | Amount of Contribution (\$) \$208.65 |
| Principal occupation / Job title (See Instructions) Designer | | Employer (See Instructions) Position By Design |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Nathaniel <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Co-founder | | Employer (See Instructions) New Founding |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Ralph <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77042 | 7 Amount of Contribution (\$) \$260.73 |
| 8 Principal occupation / Job title (See Instructions) SVP-Finance | | 9 Employer (See Instructions) Welcome Group, LLC |
| Date 06/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forgey, James <hr/> Contributor address; City; State; Zip Code Springtown, TX 76082 | Amount of Contribution (\$) \$104.48 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 06/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Rex <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-5333 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) Founder & Board Member | | Employer (See Instructions) CleanScapes |
| Date 06/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gravely, Marc <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033-2899 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Gravely Attorneys & Counselors |
| Date 06/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunter, Kelton <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086-2326 | Amount of Contribution (\$) \$104.48 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazlett, Holly <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76088 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Recruiter | | 9 Employer (See Instructions) Perfect Technician Academy |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itkin, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$12,500.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Arnold & Itkin LLP |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karger, Mauri <hr/> Contributor address; City; State; Zip Code Graford, TX 76449 | Amount of Contribution (\$) \$3,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 06/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Donnie <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) Reata Realty Group |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Brent <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495 | Amount of Contribution (\$) \$52.40 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/23/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) Law | | 9 Employer (See Instructions) Loewy Law Firm |
| Date 06/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Julie & Fred <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) RE | | Employer (See Instructions) Self |
| Date 06/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCraw, John <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) CEO/principal owenet | | Employer (See Instructions) Mccraw Law Group |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modjarrad, Sean <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-4847 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) MAS Law |
| Date 06/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monaco, Lynn <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085 | Amount of Contribution (\$) \$104.48 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Joseph <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229 | 7 Amount of Contribution (\$) \$520.51 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Mullen Mullen |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullen, Shane <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205 | Amount of Contribution (\$) \$3,000.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Mullen Mullen Law Firm |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niederer, David & Maryam <hr/> Contributor address; City; State; Zip Code Shandy Shores, TX 76208 | Amount of Contribution (\$) \$521.15 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Fossil Pointe Sporting Grounds |
| Date 06/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, Patti <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008 | Amount of Contribution (\$) \$104.48 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pauly, Wayne <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/27/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Michael <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76086 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 06/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quesenbury, Kathryn <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) Tarrant County College |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinert, Betty <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| 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 Keller, TX 76244 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) President, non profit | | Employer (See Instructions) True Texas Project |
| Date 06/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, William <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Certified Public Accountant | | Employer (See Instructions) William T. Robinson, CPA, PC |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Mario Alberto <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) Retired | | 9 Employer (See Instructions) Retired |
| 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 (\$) \$52.40 |
| Principal occupation / Job title (See Instructions) President, Non-Profit | | Employer (See Instructions) Strong Borders Foundation |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlech, Barry <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008-6914 | Amount of Contribution (\$) \$3,004.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sensky, Destin <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76116 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Small Business Owner | | Employer (See Instructions) Self |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Robert <hr/> Contributor address; City; State; Zip Code Heath, TX 75032 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) CEO/President | | Employer (See Instructions) MRI Centers of Texas |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/12 Rpt: 14/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim <hr/> 6 Contributor address; City; State; Zip Code Granbury, TX 76048 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Homemaker | | 9 Employer (See Instructions) Homemaker |
| Date 06/24/2025 | 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) Attorney | | Employer (See Instructions) Stanton LLP |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vann, John <hr/> Contributor address; City; State; Zip Code Annetta, TX 76008 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Financial Advisor |
| Date 06/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinyard, Charla <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036 | Amount of Contribution (\$) \$521.15 |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) Self |
| Date 06/28/2025 | 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 (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/23 |
| 2 FILER NAME Olcott, Michael C. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wamhoff, Patrick 6 Contributor address; City; State; Zip Code Frisco, TX 75034 | 7 Amount of Contribution (\$) \$138.38 |
| 8 Principal occupation / Job title (See Instructions) International Account Executive | | 9 Employer (See Instructions) Asurion |
| Date 06/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarbrough, Jace Contributor address; City; State; Zip Code Sanger, TX 76266-4910 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) SL Law Firm |

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: 1/8 Rpt: 16/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/30/2025 | 5 Payee name Anedot Inc | |
| 6 Amount (\$) \$802.17 | 7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 1770 New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Fundraising Processing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2025 | Payee name Galle, Marcy | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 500 Squaw Creek Rd 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 Compensation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/12/2025 | Payee name Griesinger, Austin | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 202 Beudelaire Dr Weatherford, 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 Compensation |
| 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: 2/8 Rpt: 17/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 02/27/2025 | 5 Payee name Griffin Communications | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code 176 Venice Cv Austin, TX 78737-4749 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign Management Services |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/27/2025 | Payee name Griffin Communications | |
| Amount (\$) \$8,003.05 | Payee address; City; State; Zip Code 176 Venice Cv Austin, TX 78737-4749 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing 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 Letter |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/21/2025 | Payee name Griffin Communications | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 176 Venice Cv Austin, TX 78737-4749 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign Management Services |
| 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: 3/8 Rpt: 18/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 02/20/2025 | 5 Payee name Harland Clarke Corp | |
| 6 Amount (\$) \$33.37 | 7 Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256 | |
| 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 Check Order |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/18/2025 | Payee name Hill Country Springs, Inc | |
| Amount (\$) \$73.65 | Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220 | |
| 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 Water Delivery |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/17/2025 | Payee name Hill Country Springs, Inc | |
| Amount (\$) \$8.66 | Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220 | |
| 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 Water Delivery |
| 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: 4/8 Rpt: 19/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 03/21/2025 | 5 Payee name Hill Country Springs, Inc | |
| 6 Amount (\$) \$31.99 | 7 Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220 | |
| 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 Water Delivery |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/08/2025 | Payee name Hill Country Springs, Inc | |
| Amount (\$) \$31.65 | Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220 | |
| 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 Water Delivery |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/23/2025 | Payee name Hill Country Springs, Inc | |
| Amount (\$) \$72.64 | Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220 | |
| 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 Water Delivery |
| 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: 5/8 Rpt: 20/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/16/2025 | 5 Payee name Hill Country Springs, Inc | |
| 6 Amount (\$) \$28.65 | 7 Payee address; City; State; Zip Code PO Box 2220 Manhaca, TX 78652-2220 | |
| 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 Water Delivery |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/12/2025 | Payee name Horton, Zane | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 305 Charlie Way Weatherford, 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 Compensation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/06/2025 | Payee name MailChimp | |
| Amount (\$) \$143.91 | Payee address; City; State; Zip Code c/o The Rocket Science Group, LLC 405 N Angier Ave NE Atlanta, GA 30312 | |
| 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 Campaign Email |
| 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: 6/8 Rpt: 21/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 02/06/2025 | 5 Payee name MailChimp | |
| 6 Amount (\$) \$143.91 | 7 Payee address; City; State; Zip Code c/o The Rocket Science Group, LLC 405 N Angier Ave NE Atlanta, GA 30312 | |
| 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 Campaign Email |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/06/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$143.91 | Payee name MailChimp | |
| 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 Campaign Email | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/06/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$143.91 | Payee name MailChimp | |
| 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 Campaign Email | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/06/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$143.91 | Payee name MailChimp | |
| 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 Campaign Email | |
| 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: 7/8 Rpt: 22/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 06/06/2025 | 5 Payee name MailChimp | |
| 6 Amount (\$) \$143.91 | 7 Payee address; City; State; Zip Code c/o The Rocket Science Group, LLC 405 N Angier Ave NE Atlanta, GA 30312 | |
| 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 Campaign Email |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/06/2025 | Payee name MailChimp | |
| Amount (\$) \$143.91 | Payee address; City; State; Zip Code c/o The Rocket Science Group, LLC 405 N Angier Ave NE Atlanta, GA 30312 | |
| 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 Campaign Email |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2025 | Payee name Smith, Wyatt | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 11211 Hunters Oak Helotes, TX 78023 | |
| 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 Compensation |
| 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: 8/8 Rpt: 23/23 | 2 FILER NAME Olcott, Michael C. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085953 |
| 4 Date 02/05/2025 | 5 Payee name Texas House Republican Caucus | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code PO Box 13305 Austin, TX 78711 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) CAUCUS DUES | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Republican Caucus Dues |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/30/2025 | Payee name WinRed Technical Services LLC | |
| Amount (\$) \$138.71 | Payee address; City; State; Zip Code 1776 Wildon Blvd, Suite 530 Arlington, VA 22219 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Fundraising Processing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |