## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

#### FORM COR-C/OH

1	`	cs Commission Filers)	2 Total pages filed:			OFFICE U	SE ONLY
	00086083		33			Date Received	
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRONICA	LLY FILED
	OFFICEHOLDER NAME	The Honorable	Carl H.			07/29/2025	
		NICKNAME	LAST		SUFFIX	1	
			Tepper			Date Hand-delivered or	Data Bostmarkod
4	ORIGINAL	X January 15	Runoff	Other (s	pecify)	Date Hariu-delivered or i	Date Postiliarkeu
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after cam	paign treasurer	_		
			appointment (office	• • •		Date Processed	•
		8th day before election	Ш ' `				
5	ORIGINAL PERIOD COVERED	Month Day Yea	ar THROUGH	Month Day	Year	Date Imaged	
		10/27/2024	ТНКОООН	12/31/2024			
6	EXPLANATION OF C						
	As filed, the original recorrected report accu	ain political contributions on eport may appear to sugge rately represents the dates a waiver of any applicable bject of the amendment/cor	st that I accepted cont of my acceptance for late-filing penalty beca	ributions during the mo each contribution. use: (1) the amendme	oratorium period nt/correction wa	, which I have neve	r done. The complaint was filed
7	AFFIDAVIT		Lswe	ear, or affirm, under pe	enalty of periury	that this corrected	renort is true
				correct.	enalty of perjury	, triat triis corrected	report is true
			Che	ck the box next to any	and all applicab	ole statements:	
			X	Semiannual reports was made in good fa misrepresent the info	ith and without	an intent to mislead	
			X	Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go	the 14th busines ginally filed is ina any error or om	ss day after the date accurate or incompl	e I learned ete. I
				The	Honorable Ca	rl H. Tepper	
				Signatu	re of Candidate	or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE					
	Sworn to and subsc	ribed before me, by the sai	d		, this th	ne	day
	of	, 20, to cer	tify which, witness my	hand and seal of office	).		
	Signature of office	er administering oath	Printed name of o	fficer administering oat	·h T	Title of officer admin	istering oath
	Signature of Office	or administering batti	Finited name of o	meer auriminstering oat	.ii I	nic of officer auffill	oung balli

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

# 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) 00086083		2 Total pages filed: 33				
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY				
OFFICEHOLDER NAME	The Honorable Carl H.			Date Received  ELECTRONICALLY FILED				
	NICKNAME LAST		SUFFIX	07/29/2025				
	Tepper		301117					
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #;	CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked				
OFFICEHOLDER MAILING ADDRESS	PO Box 94534			Receipt# Amount				
Change of Address	Lubbock, TX 79493							
	Labbook, 17(10400			Date Processed				
				Date Imaged				
5 CAMPAIGN	MS / MRS / MR FIRST		MI					
TREASURER NAME	Mr. Jay C.							
	NICKNAME LAST		SUFFIX					
	House		301117					
	110030							
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEAS	E); APT / SUITE	#; CITY;	STATE; ZIP CODE				
TREASURER ADDRESS	4609 86th St.							
(Residence or Business)	Lubbock, TX 79424							
7 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION						
PHONE	(806) 470-6163							
8 REPORT TYPE	X January 15 30th day b	efore election Runoff		15th day after campaign treasurer				
				appointment (officeholder only)				
	July 15 Sth day be	fore election Exceeded reporting	d modified limit	Final Report (Attach C/OH-FR)				
9 PERIOD	Month Day Year		onth Day	Year				
COVERED	10/27/2024	THROUGH	12/31/2024	4				
10 ELECTION	ELECTION DATE		TION TYPE					
	Month Day Year	Primary	ınoff	Other				
	11/05/2024	χ General Sp	ecial					
11 OFFICE	OFFICE HELD (if any)		FICE SOUGHT					
	State Representative District 84 Lubb	ock Sta	te Representa	ative District 84				
	1	1						
	GO TO PAGE 2							

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

3 of 33

13 C / OH NAME	Tepper, Carl H. (The	Honorable)	14 Filer ID (00086083	(Ethics Comr	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou It officeholders are required to report this informati	t the candidate's or office	eholder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	X GENERAL	Texas Alliance for Life PAC			
		COMMITTEE ADDRESS			
	SPECIFIC	8000 Centre Park Drive Suite 380			
		Austin, TX 78754			
		COMMITTEE CAMPAIGN TREASURER NAME			
		Shaw, James			
	ESS				
		4505 Corazon Cv			
		Round Rock, TX 78681			
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER TH ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$	0.00
	NS)	\$	43,006.79		
EXPENDITURE TOTALS		\$	0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$	8,260.12
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$	87,524.12
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required t	companying :o be reported	report is d by me
		The Ho	norable Carl H. Teppe	er	
			of Candidate or Officehol		
		-			
AFFIX NO	TARY STAMP / SEAL AB	OVE			
		aid	, this the		_ day
01	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offi	cer administering	Printed name of officer administering	Title of office	r administerii	ng oath
•	J	v			-

### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

	4 of 33			
18 FILER NAM	ME Carl H. (The Honorable)	<b>19</b> Filer ID 00086083	(Ethics Commission Filers)	
20 SCHEDUL	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 43,006.79	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00	
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00	
4. X	SCHEDULE E: LOANS		\$ 0.00	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	<b>\$</b> 8,260.12	
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00	
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$ 0.00	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00	
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 0.00	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 5/33	
2	FILER NAME Tepper, Carl	H. (The Honorable)			3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 11/18/2024	<ul><li>5 Full name of contributor</li><li>A&amp;M PAC</li><li>6 Contributor address; City; Sta</li></ul>			7	Amount of Contribution (\$)	\$1,000.00
Ω	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	I <sub>0</sub>	Employer (See Instructions	-, 		
0	Fillicipal occu	pation / 300 title (3ee instructions)	9	Employer (See instructions	·)		
	Date 11/27/2024	Full name of contributor AT&T Texas PAC Contributor address; City; Sta				Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701	į		<u> </u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/05/2024	Full name of contributor Ahlberg, Trevor Contributor address; City; Sta			•	Amount of Contribution (\$)	\$2,500.00
		Irving, TX 75038					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Cottonwood Financial	5)		
	Date 11/21/2024	Full name of contributor Associated General Contra Contributor address; City; Sta Austin, TX 78768			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/30/2024	Full name of contributor BEEF PAC Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1					
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 6/33	
2	FILER NAME Tepper, Carl	H. (The Honorable)			3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 11/27/2024	<ul><li>5 Full name of contributor</li><li>Beer Alliance of Texas PA</li><li>6 Contributor address; City; St</li></ul>			7	Amount of Contribution (\$)	\$1,000.00
_	Deignigal	Austin, TX 78701	, I	O Frankrian (Cas Instruction	Ţ		
8	Principal occu	pation / Job title (See Instructions	)	9 Employer (See Instructions	5)		
	Date 12/09/2024	Full name of contributor Blackridge Contributor address; City; St			•	Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78701	, Γ		Ĺ		
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	S)		
	Date 12/09/2024	Full name of contributor Brannan, Ryan Contributor address; City; St			•	Amount of Contribution (\$)	\$520.51
		Austin, TX 78746					
	Principal occu Attorney	pation / Job title (See Instructions	)	Employer (See Instructions Brannan Associates	s)		
	Date 12/12/2024	Full name of contributor Charter Communications, Contributor address; City; St Austin, TX 78701		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 12/12/2024	Full name of contributor Charter Schools Now PAC Contributor address; City; St Austin, TX 78704		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 7/33	
2	FILER NAME Tepper, Carl	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 11/27/2024	5 Full name of contributor	C00035006 )	7	Amount of Contribution (\$)	\$1,000.00
		San Francisco, CA 94583				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Delisi Communications PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ HILLCO PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Dringinal occu	Austin, TX 78701  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	i illicipai occu	pation 7 sob title (see instructions)	Employer (See Instructions	,		
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#:_ HS LAW PAC Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_Heller, J David  Contributor address; City; State; Zip Code  Boca Raton, FL 33432			Amount of Contribution (\$)	\$750.00
	Principal occu President CE	pation / Job title (See Instructions) EO	Employer (See Instructions NRP Group	)		

	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complet	te this forr	n.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 8/33	
2	FILER NAME Tepper, Carl	H. (The Honorable)			3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/10/2024	<ul> <li>Full name of contributor  out-of-state Howard, Jay</li> <li>Contributor address; City; State; Zip Code</li> </ul>	PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
_	Daine in a la casa	Austin, TX 78701	la la	Farada e a (O a da da ata ata a			
8	Principal occu Partner	pation / Job title (See Instructions)	9	Employer (See Instructions HillCo Partners	5)		
	Date 11/25/2024	Full name of contributor out-of-state Hrncirik, Bobbye (Ms.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$26.03
	Principal occu	Lubbock, TX 79423 pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Vice Preside	nt		UMC Health System			
	Date 12/09/2024	Full name of contributor out-of-state Hull, Daniel  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$260.25
		Boerne, TX 78006					
	Principal occu Construction	pation / Job title (See Instructions) Executive		Employer (See Instructions NRP Group	5)		
	Date 12/09/2024	Full name of contributor out-of-state INDEPAC Contributor address; City; State; Zip Code Austin, TX 78750				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/27/2024	Full name of contributor out-of-state Kickapoo Traditional Tribe of Texas Contributor address; City; State; Zip Code Eagle Pass, TX 78852	PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 9/33	
2	FILER NAME Tenner Carl	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 12/11/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78760	1			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Lubbock County Republican Party Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,200.00
	Principal occu	Lubbock, TX 79414  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Lubbock Fire Fighters PAC Contributor address; City; State; Zip Code Lulbbock, TX 79464			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_Matz and Company, LLC  Contributor address; City; State; Zip Code  Austin, TX 78703			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_McCartt, J.  Contributor address; City; State; Zip Code  Austin, TX 78703			Amount of Contribution (\$)	\$500.00
	Principal occu Partner	pation / Job title (See Instructions)	Employer (See Instructions HillCo Partners	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 10/33	
2	FILER NAME Tepper, Car	l H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	n Filers)
4	Date 12/04/2024	5 Full name of contributor  out-of-state PAC (ID#:_ Moak Casey PAC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
0	Dringing! gage	Austin, TX 78701	0 Employer (Co.) Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 11/20/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas State PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Dallas, TX 75201  pation / Job title (See Instructions)	Employer (See Instructions	)		
	· ····o.pa ooda	patient cos tale (cos metadatorio)	pioye. (eee medacane	,		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_ Reagan National Advertising of Nevada Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringing Lagor	Salt Lake City, UT 84116	Franks von (Cook both vot in no			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Southern Glazer's PAC of Texas  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#:_ TXTA TRUCKPAC  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBU	JTION	IS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete t	this for	m.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 11/33	
2	FILER NAME Tepper, Carl	H. (The Honorable)			3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 10/27/2024	<ul> <li>Full name of contributor</li></ul>	PAC	)	7	Amount of Contribution (\$)	\$1,000.00
_	<u> </u>	Round Rock, TX 78681			<u></u>		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/27/2024	Full name of contributor  out-of-state PAC  Texas Agricultural Co-op Council PAC  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$1,000.00
	Delicalization	Round Rock, TX 78664		Faralassa (Ossalastasstissa	$\overline{\Gamma}$		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/27/2024	Full name of contributor out-of-state PAC Texas Dental Association PAC Contributor address; City; State; Zip Code	C (ID#:	)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78704					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/25/2024	Full name of contributor out-of-state PAC Texas Land Title Association PAC Contributor address; City; State; Zip Code Austin, TX 78703				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/27/2024	Full name of contributor out-of-state PAG Texas Lobby Partners LLP Contributor address; City; State; Zip Code Austin, TX 78701	C (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 12/33	
2	FILER NAME Tepper, Carl	H. (The Honorable)		3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date	5 Full name of contributor  out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	11/19/2024				(,)	\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date	Full name of contributor	)		Amount of Contribution (\$)	
	12/03/2024	Texas Podiatric Medical Association PAC			7 41104111 61 6011411544611 (4)	\$500.00
	Contributor address; City; State; Zip Code					
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor	)		Amount of Contribution (\$)	
	10/27/2024	Texas State Association of Fire Fighters Action C	Committee			\$750.00
	Contributor address; City; State; Zip Code					
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor  out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/09/2024	Texas Statewide Telephone Cooperative, Inc. PA				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/30/2024	Texas and Southwestern Cattle Raisers Associa				\$2,000.00
		Contributor address; City; State; Zip Code				
		Fort Worth, TX 76185				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CO		SCHEDULE A1			
	The Instruc	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 9/9 Rpt: 13/33	
2	FILER NAME Tepper, Carl	H. (The Honorable)			3	Filer ID (Ethics Commission 00086083	on Filers)
4	Date 11/08/2024	5 Full name of contributor out-of-state PAC (ID#:) 7			7	Amount of Contribution (\$)	\$1,000.00
_		Lubbock, TX 79493-6840	1-				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Date 12/02/2024					Amount of Contribution (\$)	\$500.00
		Austin, TX 78754					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 12/02/2024					Amount of Contribution (\$)	\$1,000.00
	Principal occu	Bentonville , AR 72716 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 12/10/2024	Full name of contributor WTGB PAC Contributor address; City; State Lubbock, TX 79407	out-of-state PAC (ID#: ;; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:)  Ziegler, Nathan  Contributor address; City; State; Zip Code  Lubbock, TX 79424				Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Ziegler Estate Law Gro			
	<u> </u>		L				

PLEI	DGED CONTRIBU	TIONS				SCHEDULE B
Т	he Instruction Guide exp	plains how to comple	ete this form.	1	Total pages Scho	
<b>2</b> FILER N Tepper,	AME Carl H. (The Honorable)			3		thics Commission Filers)
1	OF UNITEMIZED PLEDO	 GES		T	\$	0.0
<b>5</b> Date	<ul><li>6 Full name of pledgor</li><li>7 Pledgor Address;</li></ul>	out-of-state PAC (ID#:		8	Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Tiedgol / Idaless,	Only, State, Zip Gode				
<b>10</b> Principal	occupation / Job title (See Instru	uctions)	11 Employer (See Instru	L uction		tside of Texas. Complete Schedule

l	LOANS					SCHEDU	LE E
7	The Instructio	ages Schedule E: /1 Rpt: 15/33					
	FILER NAME Tepper, Carl H.	(The Honorable)			3 Filer ID 00086	(Ethics Commission	Filers)
4 _	TOTAL OF UN	IITEMIZED LOANS			1	\$	0.00
5 [	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
f	s lender a financial nstitution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
<b>12</b> F	Principal occupation	on / Job title (See Instruction	ns)	13 Employer (See Instruction	s)	•	
14 [	Description of Coll None	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)	
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
<b>20</b> F	Principal occupation	on		21 Employer (See Instruction	s)	1	

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/18 Rpt: 16/33	Tepper, Carl H. (The Honorable)	00086083
4	Date	5 Payee name	·
	12/06/2024	Lin Asian Bar + Dim Sum	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$188.52	1203 W 6th St	
		Austin, TX 78703	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Meeting to discuss campaign/officeholder issues
Ļ	0 1: 0:11:4"		000
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/10/2024	The Stephen F. Austin Royal Sonesta Hotel	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.00	701 Congress Avenue	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Transportation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.
	ZXI ZXIDITORZ	Expense	Check if Austin, TX, officeholder living expense
			Parking fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	9	Office field
H	<b>D</b> :	T _	
	Date	Payee name	
	10/31/2024	Aaron Kinsey for Texas SBOE District 15	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	PO Box 605	
		Midland, TX 79702	
	PURPOSE OF	1 , , , , , , , , , , , , , , , , , , ,	Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		l '	Campaign contribution
			. •
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/18 Rpt: 17/33	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	12/09/2024	Austin Parking Management Company
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.15	583 W 6th St
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Parking fee in Downtown Austin
		Taking fee in Downtown Addun
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Payee name
	11/08/2024	Austin-Bergstrom International Airport
┝		
	Amount (\$) \$22.95	
	\$22.95	3600 Presidential Blvd
L		Austin, TX 78719
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Star mea in transit to Eastson
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	11/12/2024	Austin-Bergstrom International Airport
L	Amount (\$)	Payee address; City; State; Zip Code
	\$92.00	3600 Presidential Blvd
	Φ92.00	3000 Presidential bivu
		A . (1) TV 70740
		Austin, TX 78719
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Airport parking fee
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/18 Rpt: 18/33 00086083 Tepper, Carl H. (The Honorable) 4 Date Payee name 12/10/2024 Austin-Bergstrom International Airport 6 Amount (\$) Payee address; City; State; Zip Code \$15.14 3600 Presidential Blvd Austin, TX 78719 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal in transit to Lubbock Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/09/2024 **CEFCO** Amount (\$) Payee address; City; State; Zip Code \$78.15 717 Hwy 183 Liberty Hill, TX 78642 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Gas for campaign travel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/20/2024 Caprock Cafe Amount (\$) Payee address: City; State; Zip Code \$102.95 3405 34th St Lubbock, TX 79410 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss campaign/officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services  The Instruction Guide	Salaries/\	Nages	s/Contract Labor		OTHER (enter a	category not listed abov	e)
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commission	n Filers)
	Sch: 4/18 Rpt: 19/33		ırl H. (The Honorab	ole)				00086083		
4	Date	5 Payee name	!							
	11/04/2024	Chicken Rı	ın							
6	Amount (\$)	<b>7</b> Payee addre	ess; City;	State; Zip Co	ode					
	\$24.62	1910 Quak	er Ave Ste 100							
		Lubbock, T	X 79407							
8	PURPOSE OF		see Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense					de of Texas. Com officeholder living		
						$\Box$			n/officeholder iss	sues
						g			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
9	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office sou	<u>I</u> ıght			Office he	eld	
	Date	Payee name	·							
	11/12/2024	Chicken Ru								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$172.07	1910 Ouak	er Ave Ste 100	, ,						
	<del>+ - : - : - :</del>									
		Lubbock, T	X 79407							
	PURPOSE OF		see Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense					de of Texas. Com officeholder living		
						ш			n/officeholder iss	20112
						wiceting to dis	500	iss campaigi	i/omocrioider isc	Juco
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	<u>l</u> ıght			Office he	eld	
	Date	Payee name								
	12/17/2024	Corbin, Do	nna							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$750.00	5737 62nd	Street							
		Lubbock, T	X 79424							
	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/W	ages/Contract Lab	or		ш		de of Texas. Com		
						_		officeholder living	expense	
						Campaign wa	aye	: <b>ɔ</b>		
	Complete ONLY !! -!!	Condidate 100	ioobolder =====	O#:	100 100 4			Off: 1	J.d	
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ignt			Office he	eiu	

#### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/18 Rpt: 20/33	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	11/14/2024	Eureka
6	Amount (\$) \$64.09	7 Payee address; City; State; Zip Code 200 E 6th St
_		Austin, TX 78701
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Meeting to discuss campaign/officeholder issues
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/29/2024	Glassman, Mollie
	Amount (\$) \$100.00	Payee address; City; State; Zip Code  1144 Brittany Place  Lewisville, TX 75077
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Buttons for Red Raider Caucus event
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/04/2024	Hill Country Springs
	Amount (\$) \$30.82	Payee address; City; State; Zip Code 10019 S I-35 Frontage Rd
		Austin, TX 78747
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Water for office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Tatal manua C. L. L. T.	
1 Total pages Schedule F1: Sch: 6/18 Rpt: 21/33	2 FILER NAME Tepper, Carl H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086083
4 Date	5 Payee name
12/03/2024	Hill Country Springs
6 Amount (\$) \$30.82	7 Payee address; City; State; Zip Code 10019 S I-35 Frontage Rd  Austin, TX 78747
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Water for office
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/19/2024	Hobby Lobby
Amount (\$)	Payee address; City; State; Zip Code
\$10.81	6814 Slide Rd
PUPPOG	Lubbock, TX 79424
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Certificate framing
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/21/2024	Hobby Lobby
Amount (\$)	Payee address; City; State; Zip Code
\$54.07	6814 Slide Rd
	Lubbock, TX 79424
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Certificate framing
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed a	above)
1	Total pages Schedule F1:	2 FILER NAMI	 E				3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 7/18 Rpt: 22/33	Tepper, Ca	ırl H. (The Honorabl	e)				00086083		
4	Date	5 Payee name	!							
	12/18/2024	Hobby Lob	by							
6	Amount (\$) \$49.74	7 Payee addre 6814 Slide	Rd	State; Zip C	ode					
		Lubbock, T	X 79424							
8	PURPOSE	(a) Category (S	see Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE	Gift/Awards	s/Memorials Expens	se		므	, TX,	officeholder living	plete Schedule T. J expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office he	eld	
	Date	Payee name	)							
	11/18/2024	Holiday Mo	tor Coach LLC							
	Amount (\$) \$517.50	Payee addre 1095 E Ion		State; Zip C	ode					
		Idaho Falls	, ID 83401		_					
	PURPOSE OF EXPENDITURE	(a) Category (s Travel Out	iee Categories listed at the to of District	p of this schedule)	(b)	<b>=</b>	or (	officeholder living	to testify before	ore the
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office he	eld	
	Date	Payee name	!							
	11/13/2024	Informed T	exans Foundation							
	Amount (\$) \$15.82	Payee addre		State; Zip C	ode					
		Houston, T	X 77269							
	PURPOSE OF EXPENDITURE		iee Categories listed at the to head/Rental Expen		(b)		, TX,	de of Texas. Com officeholder living		
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office he	eld	

#### SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 8/18 Rpt: 23/33	2 FILER NAME Tepper, Carl H. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00086083
4	Date	5 Payee name
	12/13/2024	Informed Texans Foundation
6	Amount (\$) \$15.82	7 Payee address; City; State; Zip Code PO Box 690024
		Houston, TX 77269
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  News subscription
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/07/2024	Isaac, Aiden (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	301 Village Oak Drive
		Dripping Springs, TX 78620
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign wages
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/08/2024	Italian Garden
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.90	1215 Avenue J #102
		Lubbock, TX 79401
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meeting to discuss campaign/officeholder issues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp		Expens Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a ca	ct tegory not listed above)
1	Total pages Schodule F1:	2 ELLED NAME	<u> </u>	namo novi to tt	hic	(113 101111.	3	Eilor ID /	Ethics Commission Eilors
1	Total pages Schedule F1: Sch: 9/18 Rpt: 24/33		= rl H. (The Honorable)				ئ ا	Filer ID ( 00086083	Ethics Commission Filers)
4	Date	5 Payee name					-		
	12/31/2024	Joslin, Aria	nna						
6	Amount (\$)	<b>7</b> Payee addre	ess; City;	State; Zip Co	ode				
	\$250.00	1720 Wells	Branch Pkwy #4305						
		Austin, TX							
8	PURPOSE OF		ee Categories listed at the top of t	his schedule)	(b)	Description			
	EXPENDITURE	Salaries/W	ages/Contract Labor			=		de of Texas. Comple officeholder living ex	
						Campaign wa			
							_		
9	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office sou	ught			Office held	I
H	Date	Payee name							
	10/31/2024	Lamar Adv							
_	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$1,350.00	PO Box 96	•	p 0	•				
	+=,000.00		<del>-</del>						
		Baton Rouç	ge, LA 70896						
	PURPOSE OF		ee Categories listed at the top of t	his schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense					de of Texas. Comple officeholder living ex	
						Billboard adv			#-·
								-	
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ught			Office held	l
	Date	Payee name							
	11/12/2024	Little Wood	row's						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$65.48	6313 66th	St						
		Lubbock, T	X 79424		1				
	PURPOSE OF		ee Categories listed at the top of t	his schedule)	(b)	Description	or:+	do of Toyon O	to Sobodulo T
	EXPENDITURE	Food/Beve	rage Expense			ш		de of Texas. Comple officeholder living ex	
						_			officeholder issues
						-			
	Complete ONLY if direct		iceholder name	Office sou	ught			Office held	I
	expenditure to benefit C/O	1							

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 10/18 Rpt: 25/33	2 FILER NAME Tepper, Carl H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086083
4	Date	5 Payee name
	11/21/2024	Lubbock Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$323.80	1500 Broadway Street Suite 1303
		Lubbock, TX 79401
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event tickets
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit 6/01	•
	Date	Payee name
	12/09/2024	Moonshine Patio Bar & Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$138.04	303 Red River St
	4200.0	
		A
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meeting to discuss campaign/officeholder issues
		Miceting to discuss earlipaign/onicensider issues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	10/28/2024	Murphy Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.24	8202 University Ave
		Lubbock, TX 79423
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Gas for campaign travel
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
l		

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/18 Rpt: 26/33	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	12/20/2024	P.F. Chang's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$102.89	2906 West Loop 289
		Lubbock, TX 79407
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if the unique stated at Taylor Camplete Schedule T
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meeting to discuss campaign/officeholder issues
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialitire to beriefft C/Of	
	Date	Payee name
	12/18/2024	Perstruo Texas Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	PO Box 5282
		Lubbock, TX 79408
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Radio advertisement
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit Great	'
	Date	Payee name
L	11/08/2024	Project Destiny Amarillo PAC
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 2607 Wolflin Avenue PMB972
	\$250.00	2007 Wollilli Aveilde Pivib972
		Amarillo, TX 79109
L	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Contribution
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 12/18 Rpt: 27/33	Tepper, Carl H. (The Honorable) 00086083		
4	Date	5 Payee name		
	12/05/2024	Project Destiny Amarillo PAC		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$250.00	2607 Wolflin Avenue PMB972		
		Amarillo, TX 79109		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense		
		Candidate/Officeholder/Political Committee		
		2 Silvaron		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·		
$\vdash$	Data			
	Date	Payee name		
	12/17/2024	Salvation Army Lubbock		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$500.00	1111 16th St		
		Lubbock, TX 79401		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
	ZA ZHOHORZ	Candidate/Officeholder/Political Committee		
		Donation		
	Compulate ONLY if direct	Condidate/Office helds no year		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	11/04/2024	Squarespace		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$20.00	8 Clarkson St		
		New York, NY 10014		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense		
		Website hosting		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
_				

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/18 Rpt: 28/33	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	11/14/2024	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.77	8 Clarkson St
		New York, NY 10014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website hosting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/17/2024	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.77	8 Clarkson St
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website hosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	11/12/2024	Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.27	2414 Mac Davis Ln
		Lubbock, TX 79401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
_	Sch: 14/18 Rpt: 29/33	Tepper, Carl H. (The Honorable)  00086083		
4	Date	5 Payee name		
	11/12/2024	Stathatos, Parker		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$400.00	6601 Rialto Blvd		
		Apt. 3108		
		Austin, TX 78735		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Campaign wages		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	12/09/2024	Sushi Junai		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$138.07	1612 Lavaca St		
	Ψ100.07	1012 Edvaca St		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Food/Beverage Expense		
		Check if Austin, TX, officeholder living expense  Meeting to discuss campaign/officeholder issues		
		Meeting to discuss campaign/onicenduct issues		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
	Date	Payee name		
	11/12/2024	Taco Bell		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$37.73	402 Avenue Q		
		·		
		Lubbock, TX 79401		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense		
		Meeting to discuss campaign/officeholder issues		
_	0 1: 0:::::::::::::::::::::::::::::::::			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	onponantire to beliefft 6/01	•		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
-	Total pages Cabadula 54:		
1	Total pages Schedule F1: Sch: 15/18 Rpt: 30/33	2 FILER NAME Tepper, Carl H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086083	
4	Date	5 Payee name	
	12/02/2024		
	12/02/2024	Target	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$9.73	5300 S MoPac Expy	
		Austin, TX 78749	
Ļ	DUDD005		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Office supplies	
		Office supplies	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/03/2024	Target	
	Amount (\$)	Payee address; City; State; Zip Code	
	` ,		
	\$102.40	5300 S MoPac Expy	
		Austin, TX 78749	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Christmas ornaments and decorations for Capitol	
		Office	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	<b>y</b>	
L			
	Date	Payee name	
L	12/10/2024	Texas Capitol Gift Shop	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$17.32	1400 N. Congress Avenue	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Gift for constituent	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 16/18 Rpt: 31/33	Tepper, Carl H. (The Honorable)		00086083
4	Date	5 Payee name		
	12/20/2024	The Farmhouse Restaurant		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$241.72	7718 Milwaukee Ave		
	1			
		Lubbock, TX 79424		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	1			Meeting to discuss campaign/officeholder issues
	!			modaling to discuss campaign/emodification issues
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held
3	expenditure to benefit C/O		jiit	Office field
_	Data			
	Date	Payee name		
	12/20/2024	The Funky Door Bistro & Wine Room		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$158.75	6801 Milwaukee Ave		
	!			
	1	Lubbock, TX 79424		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	EA LIBITE.			Check if Austin, TX, officeholder living expense
	!			Meeting to discuss campaign/officeholder issues
_	Camplete ONLV if direct	Candidate/Officeholder name Office soug	· la t	Office held
	Complete ONLY if direct expenditure to benefit C/OH	<b>9</b>	mı	Office neid
	•			
	Date	Payee name		
	11/08/2024	USPS		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$182.00	5014 Gary Ave		
	!			
	1	Lubbock, TX 79413-9998		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Postage		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
	1			Postage expense to ship district artwork to Captio Office
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/18 Rpt: 32/33	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	11/12/2024	USPS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.20	5014 Gary Ave
		Lubbock, TX 79413-9998
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Postage Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Postage to mail paperwork to Capitol Office
		1 ostage to mail paperwork to outplot office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	11/12/2024	Uber
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$8.96	1725 3rd St
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Transportation to Red Raider Caucus event
		Transportation to Red Raider Caucus event
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	11/13/2024	Walmart
L	Amount (\$)	Payee address; City; State; Zip Code
	\$68.42	4215 S Loop 289
	Ψ00.42	4213 3 L00p 203
		Lubbock, TX 79423
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Flowers for constituent
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	1 

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/18 Rpt: 33/33	Tepper, Carl H. (The Honorable) 00086083
4	Date	5 Payee name
	12/09/2024	Walmart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.62	4215 S Loop 289
		Lubbock, TX 79423
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Office Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٦	expenditure to benefit C/OI	
H	Date	Payee name
	11/18/2024	Woodhouse Spa
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	11010 Slide Rd Suite 400
	Ψ100.00	11010 Glide Nd Guite 400
		Lubbock, TX 79424
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Gift certificate for constituent
		Gift Certificate for Constituent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	