

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)

2 Total pages filed:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

7 CAMPAIGN
TREASURER
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

9 REPORT TYPE

☐

January 15

☐

30th day before election

☐

Runoff

☐

15th day after campaign
treasurer appointment
(Officeholder Only)

☒

July 15

☐

8th day before election

☐

Exceeded Modified
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

1 / 1 / 2022

THROUGH

6 / 30 / 2022

11 ELECTION

ELECTION DATE

ELECTION TYPE

Month

Day

Year

Primary

Runoff

Other
Description

11 / 8 / 2022

General

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

SMD 5 - Bryan City Council

Mayor

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Brent Hairston</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>27,125⁰⁰</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ <u>4,025</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>12,502⁷⁶</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>31,428⁹²</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>30,000⁰⁰</u>

18 SIGNATURE 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.

[Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Brent Hairston this the 11th day of July, 2022, to certify which, witness my hand and seal of office.
[Signature] Mary L. Stratta City Secretary
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
 (month) (year)

Signature of Candidate/Officeholder (Declarant)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Brent Hairston</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/9/2022</i>	5 Full name of contributor <i>Walter Hinkle</i> out-of-state PAC (ID#: 6 Contributor address; <i>4104 Wimbledon Circle College Station TX 77845</i> City; State; Zip Code	7 Amount of contribution (\$) <i>\$1,100.00</i> <i>xx</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/9/2022</i>	Full name of contributor <i>Joy Hairston</i> out-of-state PAC (ID#: Contributor address; <i>3009 Hummingbird Circle Bryan TX. 77807</i> City; State; Zip Code	Amount of contribution (\$) <i>\$1,000.00</i> <i>xx</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/9/2022</i>	Full name of contributor <i>Cameron Comire</i> out-of-state PAC (ID#: Contributor address; <i>3413 Alsace Ct. Bryan TX. 77807</i> City; State; Zip Code	Amount of contribution (\$) <i>\$100.00</i> <i>xx</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/14/2022</i>	Full name of contributor <i>Donald Swindol</i> out-of-state PAC (ID#: Contributor address; <i>4110 N. Texas Ave Bryan, TX. 77803</i> City; State; Zip Code	Amount of contribution (\$) <i>\$200.00</i> <i>xx</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Brent Hairston</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/14/2022</i>	5 Full name of contributor out-of-state PAC (ID#: <i>Town & Country Realty</i>	7 Amount of contribution (\$) <i>\$ 500⁰⁰/_{xx}</i>
6 Contributor address; City; State; Zip Code <i>7005 Rockbrane Rd College Station TX 77845</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/15/2022</i>	Full name of contributor out-of-state PAC (ID#: <i>AB Plumbing</i>	Amount of contribution (\$) <i>\$1,000⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>277 Marmo Rd. Bryan, TX. 77808</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/15/2022</i>	Full name of contributor out-of-state PAC (ID#: <i>Roger (dec'd) + Jennie Sheridan</i>	Amount of contribution (\$) <i>\$200⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>508 Moran St. Bryan, TX. 77801</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/16/2022</i>	Full name of contributor out-of-state PAC (ID#: <i>Charles Gilliland</i>	Amount of contribution (\$) <i>\$100⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>4600 Borge Ct. College Station TX 77845</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 2/15/2022	5 Full name of contributor Johnny Beal out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 4016 Green Valley Dr. Bryan TX. 77803	7 Amount of contribution (\$) \$700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/16/2022	Full name of contributor Nancy & Ben Hardeman out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1820 Graystone Dr. Bryan TX. 77807	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/18/2022	Full name of contributor Adrian McDougal out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 7127 E. OLR Bryan TX. 77808	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/24/2022	Full name of contributor Mike Beal out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 506 Crescent Dr. Bryan TX. 77801	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)
3/2/2022	Brandon Eisenmann P.O. Box 9803 College Station, TX 77842	\$250 ⁰⁰ / _{xx}
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
3/2/2022	Laird Betterman 18687 Anasazi Bluff Drive College Station TX 77845	\$2,000 ⁰⁰ / _{xx}
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
3/10/2022	Don Betz P.O. Box 3493 Bryan, TX 77805	\$250 ⁰⁰ / _{xx}
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
3/23/2022	Louis Newman 1300 E. 24th St. Bryan, TX 77802	\$500 ⁰⁰ / _{xx}
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#: _____) <div style="text-align: center;">Michael Messer</div> <hr/> 6 Contributor address; City; State; Zip Code <div style="text-align: center;">11415 Walnut Meadow Dr. Austin TX 77066</div>	7 Amount of contribution (\$) <div style="text-align: center;">\$50.00 xx</div>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) <div style="text-align: center;">John Paul Teel</div> <hr/> Contributor address; City; State; Zip Code <div style="text-align: center;">1700 Graystone Dr. Bryan, TX 77807</div>	Amount of contribution (\$) <div style="text-align: center;">\$50.00 xx</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) <div style="text-align: center;">Cloy Mayo</div> <hr/> Contributor address; City; State; Zip Code <div style="text-align: center;">754 Oyster Creek Buda TX 78610</div>	Amount of contribution (\$) <div style="text-align: center;">\$250.00 xx</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) <div style="text-align: center;">Don Hoyt</div> <hr/> Contributor address; City; State; Zip Code <div style="text-align: center;">2619 Lochinvar Lane, Bryan, TX 77808</div>	Amount of contribution (\$) <div style="text-align: center;">\$100.00 xx</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2022	5 Full name of contributor Doug Ernest Peterson out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 3417 Cottage Ct. Tyler, TX 75701	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/29/2022	Full name of contributor Keri D. Bee - Story out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 3327 High Bluff Dr. Dallas, TX 75234-7827	Amount of contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/31/2022	Full name of contributor April Hedrick out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 3201 University Dr. E. Ste 365 Bryan, TX 77802	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/31/2022	Full name of contributor Ramiro Galindo out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 3000 Galindo Way, Bryan, TX 77802	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/2022	5 Full name of contributor out-of-state PAC (ID#: John Devine 6 Contributor address; City; State; Zip Code 18118 Macintosh Drive, Houston, TX 77084	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/14/2022	Full name of contributor out-of-state PAC (ID#: Brian Gutierrez Contributor address; City; State; Zip Code 318 N Bryan Ave, Bryan, TX 77803	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/2022	Full name of contributor out-of-state PAC (ID#: Cory Smith Contributor address; City; State; Zip Code 5879 Stone Creek Rd. Bryan, TX 77808	Amount of contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/22/2022	Full name of contributor out-of-state PAC (ID#: Ben Butler Contributor address; City; State; Zip Code 4897 Dill Show Trl. Bryan, TX 77808	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2022	5 Full name of contributor Albert Reeder out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) \$2500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/12/2022	Full name of contributor Mark Steffen out-of-state PAC (ID#: Contributor address; City; State; Zip Code 5148 Cottonwood Ln. Salt Lake City UT 84117	Amount of contribution (\$) \$2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/23/2022	Full name of contributor Gary Smith out-of-state PAC (ID#: Contributor address; City; State; Zip Code 203 College View Bryan, TX. 77801	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/24/2022	Full name of contributor David Bonilla out-of-state PAC (ID#: Contributor address; City; State; Zip Code P.O. Box 10300 Gilgater, TX. 77842	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 6/8/2022	5 Full name of contributor Bernie Lynch out-of-state PAC (ID#: 6 Contributor address; 3008 Hickory Ridge Circle Bryan TX 77807 City; State; Zip Code	7 Amount of contribution (\$) \$1,000 ⁰⁰ / _{xx}
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 6/9/2022	Full name of contributor Debbie Lewis out-of-state PAC (ID#: Contributor address; 4016 Antlers Estates Dr Bryan TX 77808 City; State; Zip Code	Amount of contribution (\$) \$300 ⁰⁰ / _{xx}
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/15/2022	Full name of contributor Hunter R. Slaton out-of-state PAC (ID#: Contributor address; 1032 Rose Circle College Station TX 77840 City; State; Zip Code	Amount of contribution (\$) \$1,000 ⁰⁰ / _{xx}
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/17/2022	Full name of contributor Ronald Martin out-of-state PAC (ID#: Contributor address; 2012 Lexi Lane Bryan TX 77807 City; State; Zip Code	Amount of contribution (\$) \$100 ⁰⁰ / _{xx}
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 6/27/2020	5 Full name of contributor Sen Wang out-of-state PAC (ID#: _____) 6 Contributor address; 7803 Traker St. Sugarland Tx. 77479 City; State; Zip Code	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Brent Harrison	3 Filer ID (Ethics Commission Filers)
4 Date 3/10	5 Payee name Anedot, Inc.	
6 Amount (\$) 103.90	7 Payee address; City; State; Zip Code 1340 Poyar St. New Orleans La. 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Credit Card fee
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 5/7/2022	Payee name Card Service Center - Mastercard	
Amount (\$) 579.72	Payee address; City; State; Zip Code P.O. Box 569120 Dallas TX. 75356	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit card pmt.	Description Various
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 5/27/2022	Payee name Card Service Center - Mastercard	
Amount (\$) \$88.79	Payee address; City; State; Zip Code P.O. box 569120 Dallas TX. 75356	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card pmt.	Description Various
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	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)
7	Brent Hairer	
4 Date	5 Payee name	
3/23/2022	Anedot, Inc.	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
201	1340 Poydras St.	New Orleans La. 70112
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	
	(b) Description	
	Fees Credit Card Fee	
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
3/23/2022	Anedot, Inc.	
Amount (\$)	Payee address;	City; State; Zip Code
201	1340 Poydras St.	New Orleans, La. 70112
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	
	Description	
	Fees Credit Card Fee	
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
3/23/2022	Anedot, Inc.	
Amount (\$)	Payee address;	City; State; Zip Code
3/23/2022 1007	1340 Poydras St.	New Orleans, La. 70112
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	
	Description	
	Fees Credit Card Fee	
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <div style="text-align: center;">7</div>	2 FILER NAME <div style="text-align: center;">Brent Hairston</div>	3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center;">3/26/2022</div>	5 Payee name <div style="text-align: center;">Aredot Inc.</div>	
6 Amount (\$) <div style="text-align: center;">4³⁰</div>	7 Payee address; City; State; Zip Code <div style="text-align: center;">26 1340 Poydras St. New Orleans, La. 70112</div>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Fees</div>	
	(b) Description <div style="text-align: center;">Credit Card Fee</div>	
(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date <div style="text-align: center;">3/28/2022</div>	Payee name <div style="text-align: center;">Aredot Inc.</div>	
Amount (\$) <div style="text-align: center;">20³⁰</div>	Payee address; City; State; Zip Code <div style="text-align: center;">1340 Poydras St. New Orleans, La. 70112</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Fees</div>	
	Description <div style="text-align: center;">Credit Card Fees</div>	
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date <div style="text-align: center;">4/2/2022</div>	Payee name <div style="text-align: center;">Aredot Inc.</div>	
Amount (\$) <div style="text-align: center;">1³⁰</div>	Payee address; City; State; Zip Code <div style="text-align: center;">1340 Poydras St. New Orleans, La. 70112</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Fees</div>	
	Description <div style="text-align: center;">Credit Card Fees</div>	
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <div style="text-align: center;">7</div>	2 FILER NAME <div style="text-align: center;">Brent Hairton</div>	3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center;">6/17/2022</div>	5 Payee name <div style="text-align: center;">Avedot, Inc.</div>	
6 Amount (\$) <div style="text-align: center;">430</div>	7 Payee address; City; State; Zip Code <div style="text-align: center;">1340 Poydras St. New Orleans, La. 70112</div>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Fees</div>	(b) Description <div style="text-align: center;">Credit Card Fee</div>
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date <div style="text-align: center;">3/3/2022</div>	Payee name <div style="text-align: center;">Axiom Strategies</div>	
Amount (\$) <div style="text-align: center;">\$1800.00</div>	Payee address; City; State; Zip Code <div style="text-align: center;">800 W. 47th St. Ste 200 Kansas City, MO 64112</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Consulting Expense</div>	Description <div style="text-align: center;">Consulting</div>
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date <div style="text-align: center;">3/3/2022</div>	Payee name <div style="text-align: center;">Marta Nizole Photography</div>	
Amount (\$) <div style="text-align: center;">\$1,623.75</div>	Payee address; City; State; Zip Code <div style="text-align: center;">1303 Francis Drive College Station Tx. 77840</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Advertising Expense</div>	Description <div style="text-align: center;">Photography</div>
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 7		2 FILER NAME Brett Hairston		3 Filer ID (Ethics Commission Filers)	
4 Date 3/28/2022		5 Payee name Nolan Keegan			
6 Amount (\$) \$1305 ⁰⁰		7 Payee address; 2300 Cottage Ln. Apt. 8406 College Station, TX. 77845		City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Video production		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/13/2022		Payee name Axiom Strategies			
Amount (\$) \$1,143 ⁴³		Payee address; 800 W. 47th St. Ste 200 Kansas City, MO 64112		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense Consulting Expense		Description Palm Card production		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/13/2022		Payee name Axiom Strategies			
Amount (\$) \$1,500 ⁰⁰		Payee address; 800 W. 47th St. Ste 200 Kansas City, MO 64112		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Consulting		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>7</u>		2 FILER NAME <u>Brent Harrison</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>4/19/2022</u>		5 Payee name <u>Axiom Strategies</u>			
6 Amount (\$) <u>1,118.00</u>		7 Payee address; City; State; Zip Code <u>800 W. 47th St. Ste 200</u> <u>Kansas City, MO 64112</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Consulting Expense</u>		(b) Description <u>Consulting</u>		
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date <u>5/24/2022</u>		Payee name <u>Edgerton Strategies</u>			
Amount (\$) <u>\$400.00</u>		Payee address; City; State; Zip Code <u>1540 Keller Parkway #108-402</u> <u>Keller, TX. 76248</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Consulting Expense</u>		Description <u>Consulting - Social Media</u>		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date <u>5/25/2022</u>		Payee name <u>Axiom Strategies</u>			
Amount (\$) <u>486.01</u>		Payee address; City; State; Zip Code <u>800 W. 47th St. Ste 200</u> <u>Kansas City, MO 64112</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Facebook Ads</u>		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	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)																																						
7	Brent Hairston																																							
4 Date	5 Payee name																																							
6/11/2022	BVAA H&L (Brown Valley Area American Museum)																																							
6 Amount (\$)	7 Payee address;	City; State; Zip Code																																						
\$400.00	500 E. 1st St Brown TX. 77803																																							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)																																							
	(b) Description																																							
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense																																							
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">Candidate / Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held																																			
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Date	Payee name																																							
Amount (\$)	Payee address; City; State; Zip Code																																							
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Candidate / Officeholder name	Office sought	Office held																																						

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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 F4: <u>4</u>	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ <u>402¹⁵</u>			
5 Date <u>4/3/2022</u>	6 Payee name <u>Facebook</u>					
7 Amount (\$) <u>400⁰⁰</u>	8 Payee address;	City;	State; <u>CA</u> Zip Code			
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political					
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description <u>Ad-Video</u>			
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%;"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				
Date <u>6/7/2022</u>	Payee name <u>Wave - Zcoped Production</u>					
Amount (\$) <u>1,395⁰⁰</u>	Payee address;	City;	State; <u>TX</u> Zip Code			
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>		Description <u>Campaign Push-cards</u>			
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%;"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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 F4: <u>4</u>		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date <u>6/7/2022</u>		6 Payee name <u>Facebook</u>			
7 Amount (\$) <u>8242</u>		8 Payee address;		City;	State; Zip Code
				<u>CA</u>	
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description	
		<u>Advertising Expense</u>		<u>Facebook ads</u>	
		(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>9/27/2022</u>		Payee name <u>Facebook</u>			
Amount (\$) <u>23791</u>		Payee address;		City;	State; Zip Code
				<u>CA</u>	
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description	
		<u>Advertising Expense</u>		<u>Facebook Ads</u>	
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p>					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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 F4: 4		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 5/20/2022		6 Payee name Campaign Sidekick			
7 Amount (\$) 138⁰⁰/₁₀₀		8 Payee address; Alcedo TX		City; State; Zip Code	
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Candidate Expense		(b) Description Blackwolkers App paid.	
		(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 6/20/2022		Payee name Campaign Sidekick			
Amount (\$) 138⁰⁰/₁₀₀		Payee address; Alcedo TX		City; State; Zip Code	
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Candidate Expense		Description Blackwolkers App paid.	
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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 F4: 4		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 6/30/2022		6 Payee name Facebook			
7 Amount (\$) 250.74		8 Payee address;		City;	State; Zip Code CA
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Facebook ads	
		(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address;		City;	State; Zip Code
TYPE OF EXPENDITURE		<input type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description	
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					