CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

FORM C/OH COVER SHEET PG 1

				•	1	
The C/OH Instruction G	uide explains how to	complete this form.	1 Filer ID (Eth	ics Commission Filers)	2 Total pages file	ed: 19
3 CANDIDATE / OFFICEHOLDER	MS / MRS)/ MR	FIRST		МІ	OFFICE	USE ONLY
NAME	NICKNAME WAL	LAST	ilsm	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	P.O. 30X 2483	Fort	city; state	TE; ZIP CODE		REC'D '23 pm1:08
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER 387 –9492		ENSION	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST		М.	Date Processed	
,	NICKNAME	Wilson		SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS		so po box please); apt/s San Jose D		city; TOV+ WOVAL	STATE;	76012
(Residence or Business)				WOVIV		
8 CAMPAIGN TREASURER PHONE	(469) S	PHONE NUMBER 97 - 9492		ENSION		· · · · · · · · · · · · · · · · · · ·
9 REPORT TYPE	January 15	30th day before	election	Runoff		fter campaign appointment er Only)
٠	July 15	8th day before e	election	Exceeded Modified Reporting Limit	Final Repo	ort (Attach C/OH - FR)
10 PERIOD COVERED	Month Ol /	Day Year /14 / 23	THROUGH	H O \mathcal{L}	Day Yes	
11 ELECTION	Month Day	Year Primary	_	Other Description		
12 OFFICE	OFFICE HELD (if any)		TUY	FICE SOUGHT (IF KNOW F WUYYY (Lity Loune	al Tostridl
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE CONSENT. CANDIDATES	E OF POLITICAL CONTRIBUTION EHOLDER. THESE EXPENDITUR AND OFFICEHOLDERS ARE REQ	RES MAY HAVE BEEN N	MADE WITHOUT THE CAI	NDIDATE'S OR OFFICEHO	OLDER'S KNOWLEDGE OR
	COMMITTEE TYPE	COMMITTEE NAME	-	0		
Additional Pages	GENERAL	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TI	REASURER NAME			
	SPECIFIC					
***		COMMITTEE CAMPAIGN T	TREASURER ADDRE	ESS		
		GO TO	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTION PLEDGES, LOANS, OR GUARANTEES OF LOA CONTRIBUTIONS MADE ELECTRONICALLY)	1 C
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARA)	NTEES OF LOANS) \$ 10, 633 00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITUR	E. \$ —
	4. TOTAL POLITICAL EXPENDITURES	\$ 9218.20
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAIN OF REPORTING PERIOD	\$ 9218.20 NED AS OF THE LAST DAY \$ 3450,02 IDING LOANS AS OF THE \$ 3,000 00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTAN LAST DAY OF THE REPORTING PERIOD	IDING LOANS AS OF THE \$ 3,000 00
	Please complete either THERESA M. GONZALES 8 Notary Public, State of Texas 8	Signature of Candidate or Officeholder option below:
(1) Affidavit	My Comm. Exp. 01-21-2026 8 ID No. 13354511-8	
NOTARY STAMP/SEA Sworn to and subscribed 20	before me by Thurlish bonzalls for which, witness my hand and seal of office.	Mythis the 7th day of April,
Signature of officer administr	ering oath Printed name of officer administerin	g oath Title of officer administering oath
	OR	
(2) Unsworn Declarat	ion	
My name is	, and	d my date of birth is
	(street)	(city) (state) (zip code) (country)
Executed in	County, State of , on the	day of, 20 (year)
		Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Con	mmission Filers)
Tara Maldonado-Wilson		
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$10,63300
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 7,000°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°
4. SCHEDULE E: LOANS		\$ 3000 00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 9218.20
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	TIONS RETURNED	\$
MERCHANIST TO THE PROPERTY OF		

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	Haldwado-Wilson	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) \[\text{VMA Plene2} \] 6 Contributor address; City; State; Zip Code \[\text{VoNM TX 76/07} \] pation / Job title (See Instructions) 9 Employer (See Instructions)	7 Amount of contribution (\$)
Date	Full name of contributor	Amount of contribution (\$)
1/25/25	Lan Brunham Contributor address; City; State; Zip Code Furt Wish TX 7(ell D	\$ 75000
	pation / Job title (See Instructions) Employer (See Instruc	ctions)
Date	Full name of contributor	Amount of contribution (\$)
Principal occur	pation / Job title (See Instructions) Employer (See Instruc	ctions)
Date	Full name of contributor	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	ctions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS I	

5587177 2023-04-05 16:0 55888784 2023-04-05 18:3 5590757 2023-04-05 17:1	8255548708 2023-04-04 15:0 8255587070 2023-04-05 16:0	AB255436209 2023-04-01 23:5 AB255539913 2023-04-04 13:1	A8255401402 2023-04-01 9:13	AB255366156 2023-03-31 20:0 AB255386551 2023-03-31 22:2	AB255363034 2023-03-31 19:4	AB255340057 2023-03-31 17:0	AB255335585 2023-03-31 18:3	AB255324320 2023-03-31 15:2 AB255324437 2023-03-31 15:1	AB255373482 2023-03-31 14:4	AB255311207 2023-03-31 13:4	AB255047829 2023-03-28 17:4 AB255283654 2023-03-31 9:15	AB2556038685 2023-03-28 18:0	AB254920698 2023-03-26 14:0	AB254874136 2023-03-25 11:1	AB253639760 2023-03-24-4-59	AB254793973 2023-03-23 15-0	AB254661079 2023-03-20 17:0	AB254535910 2023-03-17 9.42	AB254527037 2023-03-16 21:3	AB254511869 2023-03-16 18:5	AB254292260 2023-03-11 9:02 AB254345575 2023-03-12 21:4	AB254288962 2023-03-10 23:5	AB254280650 2023-03-10 20:0	AB254188757 2023-03-08 15:3	AB254186790 2023-03-08 15:0	AB253971641 2023-03-02 12:3	A8253961474 2023-03-01 22:2	AB253904417 2023-02-28 18:3	AB253898874 2023-02-28 17:3	AB253895816 2023-02-28 16:5	AB253894254 2023-02-28 16:3 AB253894519 2023-02-28 16:4	AB253894167 2023-02-28 18:3	AB253893947 2023-02-28 16:3	AB253862534 2023-02-28 2:38	AB253761852 2023-02-25 17:5 AB253781579 2023-02-26 12:2	ABZ53780560 2023-02-25 17-2	AB253756485 2023-02-25 16:0 AB253766404 2023-02-25 17:2	AB253674783 2023-02-23 16:1	AB253653331 2023-02-23 9:27	A8253649716 2023-02-23 2:36	AB253637841 2023-03-22 20-5	AB253624466 2023-02-22 17:2	AB253620042 2023-02-22 16:1	AB253617617 2023-02-22 15:3	AB253572371 2022-02-21 15:5	AB253525856 2023-02-20 5-45	AB253520778 2023-02-19 21-4	AB253492983 2023-02-18 22-1	AB253465685 2023-02-18 1:05 AB253468091 2023-02-18 9:08	2-16	AB253455027 2023-02-17 17:4 AB253455084 2023-02-17 21:1	AB253398842 2023-02-16 8-51	8 8	AB253179287 2023-02-08 15:0	MBG 2023-02-07	AB252878347 2023-02-01 14-2 AB252975155 2023-02-04 10-5	AB252648258 2023-01-27 16 0	AB252544857 2023-01-25 21 3	NB252496291 2023-01-25 5-11
50 Salvedor 500 Catalina E 35 Marquiet	SO Statanie 15 Harold	25 Korts 25 James	50 Kimberly	SO Sade	100 Katherine	50 Henry		50 Brooklyn	15 Norma	50 Salvador	11 Tidany	50 Michelle	SOO Tomory		10 Emma	50 Reginald	250 Creg		15 Lady	35 Maryellen	25 Carmen		25 Stephen	250 LAGINA	35 Paula	50 Lady 100 Salvador		35 Valerie	25 DEBORAH	100 Arthur S0 Eather	100 Krists 50 Maryellen	250 Elasa	35 Charles	5 James	100 Roxanna 35 Frances	250 Fernando	25 Sandy	100 Sal	100 Sabrina	50 Skyler	35 NEZ		35 Auron	100 charlton		200 Celma	25 Taylor	500 Bob	50 S. LaVonne		500 Bob	500 Catalina E	25 Tommy	25 E		100 Amenda 50 Sandy	25 Harold	100 Vanessa	11 James
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2408 Dalford St 10455 N. Central Expressway 6601 Teranyson Drive 108 6001 Ten Mile Rodno Rd	5745 Chelmatord Trail 4233 Enchanted Rock Lan	8152 La Fronters Trail 4004 Volk Ct.	2810 Glends Street	406 W Smith St 222 Avo H	5801 Tonnyson Dr. 108 10	9040 Blue Ridge Tri	ca 5900 Yolanda Drive 1818 S. Adams St.	4233 Enchanted Rock Lan	12A	2408 Dalford St	9853 Brazona Trail	3217 Woodlark Dr	211 Stallon Dr	613 green river trail	5108 Independence	P O Box 152182	-4004 Volk Ct.	2500 SH 121 Apt 1515	ce 5900 Yolanda Drive	2408 Dollard St	2532 Galvez Avenue	1425 Revenuend	2642 Stillwater Rd E	9 5	913 Summerfree Ln	car 5900 Yolanda Drive 2408 Daltord St	3816 redwood creek in	1155 Union Circle 305888 3700 W 6th St	613 Green River Trail	1814 John Smith Dr 1217 E Collin St	p o box 19185	502 S Winnerka Ave. Dallas	1936 Warner Rd	1470 Cleneges Cir	1315 NE 37th St 1024 Blac St	3812 Gordon Ave	1468 Pine Lane	2408 Dalford	362 Foch St	4803 Bundyhill Dr.	27025 Outlook PI	211 Staffon dr	1810 Winewood	642 S Charles L McKay Pl	1704 Montdair Drive	918 Lomo St 2703 Allen Forest Dr	3767 West 5th	362 FOCH ST	1616 S. Adams St.	2515 Dell St	1428 Virginia PI	10455 N. Central Expressiv	211 Station Dr 246 Nethola Street	2408 Dalford	3415 Navajo Ct	PO Box 430 10335 Tammaron	4233 Enchanted Rock Lan	5600 Ranchito Drive	1470 Clenegas Car
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TX 78111 United States TX 75231 United States TX 78710 United States TX 78115 United States	TX 76244-4937 United States Candidate Communication TX 76244-4937 United States Aircreft Mechanics	TX 76002 United States TX 76244 United States	TX 76112 United States Not Employed 7	TX 76003 United States Retail Merchand TX 76705 United States LVN	TX 76710 United States Rn Tra	TX 76118- United States detabase develo Artech Information TX 70107 United States Communications Arts Fort Worth	TX 78112 United States CNA TX 78104 United States Young Living Es	TX 78244-4937 United States Avrault Mechanis	TX 75119 United States NA	TX 78103 United States Tax accounting TX 78103 United States Landscape de	TX 78128 United States Not Employed	TX 78123 United States	TX 76248 United States Not Employed	TX 78103 United States retired	TX 75015-5036 United States Not Employed TX 75017 United States Attorney	76161 United States Solutions Archite	8	7X 76039 United States Principal Idea public schools 7x 7x 17x Halled States Foreigner Lockhood Martin 81		TX 76119 United States Not Employed Not employed of TX 76111 United States Tax accounting STF Services	s Government	TX 76064 United States Pool learnings - Varghese Sunine	NN SST19 United Status Admin Manenata Nurses	TX 76105 United States Aussaude out	TX 70092 United States Not Employed Not Employed	TX 76111 United States Tax accounting STF Services		TX 76107 United States Not Employed Not Employed	TX 76103 United States Not Employed Not Employed		ployed	TX 75208 United States Attorney Dallas County	CA 92312 United States Project Manager PGSE TX 76110 United States Chairman T.S.Byrne	Americ	TX 7610 United States Medicare Sales MissMedicare101		TX 78140 United States. Teacher American Reading		TX 76107 United States Registered Nurs-Toxas Health Fort Worth	or Every Texas	•	TX 75248 United States Owner Self-employed	TX 78001 United States Placed of buck Arc. 7X 78001 United States Director of Supp Raytheon Tochrol	ğ.	TX 75103 United States Landscape des(Self TX 75701 United States Nume HhER	TX 77803 United States Not Employed Not Employed TX 77803 United States Not Employed Not Employed	Sun Lily Ente	TX 76107 United States Educator FWISO TX 76110 United States Nurse Texas Health Re	TX 76104 United States Young	TX 76111 United States Regional Directs UWTC TY 76053 United States North Texas Pro Asset Fundow N	TX 76107-2466 United States Potecti Strategic Everytown for Gun	United States Not Employed Not Employed	TX 76248 United States Community Fair Owner NA 2062 United States Not Employed Not Employed	TX 75111 United Status Tax accounting STF Services	TX 75224 United States Consultant Solf TX 75103 United States Engineer Lockhood Montin 8	TX 76140 United States Repres research representation TX 76140 United States Teacher Gold	TX 76244 United States Aviation Mechan American Authors	S.	Jage Spec
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PLEDGED CONTRIBUTIONS

SCHEDULE B

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

·	''	1 3	•	
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedu	ıle B:
2 FILER NAME	Maldinado-Witan		3 Filer ID (Ethics Co	ommission Filers)
	UNITEMIZED PLEDGES		\$ 2000 00)
5 Date 3/51/23	6 Full name of pledgor out-of-state PAC (ID#:_ Flowands femble 7 Pledgor address; City; Sta 3432 Runden De Worth	ate; Zip Code		9 In-kind contribution description
' (10 Principal occu	3612 Ruden De Worth	TY 70100		de of Texas. Complete Schedule T,
Date	Full name of pledgor out-of-state PAC (ID#:)	Amount of Pledge \$	In-kind contribution description
4/3/23	Tommy Isby Pledgor address; City; St. 21 Stallion Pr. Keller	ate; Zip Code TX 76248	& OOO	de of Texas. Complete Schedule T.
	Dation / Job title (See Instructions)	Employer (See		
Date 3/12/23	Full name of pledgor out-of-state PAC (ID#:	ate; Zip Code	Amount of Pledge \$	In-kind contribution description de of Texas. Complete Schedule T.
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of pledgor	; Zip Code	Amount of Pledge \$	In-kind contribution description
***			Check if travel outsi	de of Texas. Complete Schedule T.
Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)	
1.5	ATTACH ADDITIONAL COPIES	OF THIS SCHEDUL	LE AS NEEDED	

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

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

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Vages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Waldwade - W	3 Filer ID (Ethics Commission Filers)
4 Date $v / 8/23$	5 Payee name Fink	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
27.55	9001 Apport Fuy #100	City; State; Zip Code MAGALLA LAUS IX 7(USU)
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Banking	Checks
	(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/OF	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
1/10/23	City of Fart Warth	
Amount (\$)	Payee address;	City; State; Zip Code
10000	200 Texas St.	North TX 76102
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Fees	Filins 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	
2/1/23	Frost Bank	
Amount (\$)	Payee address;	City; State; Zip Code
17,55	gool Airport Fuy \$100	Rightend Hills TX 76180
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Banking	cheeks
7	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	1	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

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 Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Printing Expense Travel In District Contributions/Donations Made By Gift/Awards/Memorials Expense Travel Out Of District Legal Services Candidate/Officeholder/Political Committee 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) <u>Idenado</u> Wilson City: State; Zip Code Jan Antonio TX 18710 Rogers 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Jocial Wedia Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Act Blue City; Somerville, MA 366 Summer 87. Category (See Categories listed at the top of this schedule) Description **PURPOSE** Fundus sin Fees EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Clifford Sparks Amount (\$) 2412 Meaders Are FORT NORTH TX 76112

PURPOSE

EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

Description

Office sought

DFW FOOd FRAVal

Check if Austin, TX, officeholder living expense

Category (See Categories listed at the top of this schedule)

Candidate / Officeholder name

Check if travel outside of Texas, Complete Schedule T.

Advertising

Office held

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)

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME Waldwardo - u) ilson 3 Filer	ID (Ethics Commission Filers)
4 Date /31/23	5 Payee name Swites		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
77.97	1600 Amphi theater Plu	vy, Mountain	CA 94043
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	office dray head	Comprison E.	RearT
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, office	eholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Ófficeholder name I	Office sought	Office held
Date	Payee name		
2/11/13	Tortilandia		
Amount (\$)	Payee address;	<i>-</i> ' ' '	State; Zip Code
552.57	1112 W. Berry St.	Fort Worth	TX 76110
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	event Expense/Food	Fundrais 816	}-
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, office	cholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
:			
Amount (C)	Davis address	~!·	
Amount (\$)	Payee address;	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE			
OF EXPENDITURE			
,	Check if travel outside of Texas, Complete Schedule T,	Check if Austin, TX, office	holder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
ANALYSIS AND ANALYSIS ANALYSIS AND ANALYSIS ANALYSIS AND	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	
	ATTACATACE AND THE OF THE		

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/Wades/Contract Labor

Credit Card Payment	The Instruction Guide explains how to c		intel a category notificial above,
1 Total pages Schedule F1:	2 FILER NAME Waldenado- W) 180m 3 Filer	ID (Ethics Commission Filers)
4 Date 2/21/23	5 Payee name		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
150.00	2412 Meaders Ave.	Futworth	TX 76012
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	CC 4 44644
PURPOSE OF EXPENDITURE	Evont Expense	Hatiana L	Herson Commun center
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, offic	ceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Ófficeholder name I	Office sought	Office held
Date	Payee name		
2/22/23	Mailchimp		
Amount (\$)	Payee address;	City;	State; Zip Code
13,86	Payee address; #500 Le75 Ponce De Lecon Are	NE Atlanta	6A
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Solicitation	Email	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, offic	ceholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
1/13/13	U.S.P.S	•	
Amount (\$)	Payee address;	City;	State; Zip Code
97.00	1475 Handley Pr	Furt Works	TX 76112
·	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Rental expense	P.O. BOX	
,	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, offic	eholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	100 Maria 100 Ma

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 c	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Maldonado - Wi	Kon	Filer ID (Ethics	Commission Filers)
4 Date 127/23	Banken Printing			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$ 129,90	2357 S. Collins St.	Anlington	TX	76014
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Printing	hish card	5	
	(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/O	Candidate / Ófficeholder name H	Office sought	·	Office held
Date ,	Pavee name			
0/17/13	Staples			
Amount (\$)	Payee address;	City;	State;	Zip Code
174.54	1660 S. Univer 67y Dr.	Farty	TX	76107
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Solicitation	Envelopes		
	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/Ol	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
2/17/23	Amazon			
Amount (\$)	Payee address;	City;	State;	Zip Code
8120,12	410 Terry Are. N.	scaffle	WA	98109
1	Category (See Categories listed at the top of this schedule)	Description		**************************************
PURPOSE OF EXPENDITURE	Solicitation		·	
,	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
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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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarias Magazi Contract Leber

Credit Card Payment	The Instruction Guide explains how to co		a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Waldonado - IVI	Som 3 Filer ID	(Ethics Commission Filers)
4 Date 177/23	5 Payee name Campaign Venty	<u> </u>	
6 Amount (\$)	7 Payee address;	City; Sta	ate; Zip Code
95.00		washington 10	C
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Solicitation	Phones	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officehol	der living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Ófficeholder name	Office sought	Office held
Date	Payee name		
2/17/23	Bisan smallesies		
Amount (\$)	Payee address;	•	ate; Zip Code
1,25413	P.D. BOX We2	oldahuma o	K 73101
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Union	Door Hangers	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officehol	der living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
2/28/23	hoogle suites	•	
Amount (\$)	Payee address;	City; Sta	ate; Zip Code
76.75	1000 AmphiHaeater Di	, Muntay New	OA 94043
	Category (See Categories listed at the top of this schedule)	Description	•
PURPOSE OF EXPENDITURE	office Werhead	Campoign auro	as]
,	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officehold	der 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 S	CHEDULE AS NEEDED	

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

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

Credit Card Payment	The Instruction Guide explains how to co		(enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Waldonado - WIS	3 File	er ID (Ethics Commission Filers)
4 Date 3/01/23	5 Payee name Cdwards 2 Palkysur		
6 Amount (\$) 2,118,59	7 Payee address; 203 S. Belt line Rd,	city;	State; Zip Code 75060
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Priver Min Advertsy	Campai son	Signs
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, of	ficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Ófficeholder name I	Office sought	Office held
Date	Payee name		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
03/01/23	U.S. P.S		
Amount (\$)	Payee address;	City;	State; Zip Code
63.00	1475 Handley Pr.	Furth	TX Well 2
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Solicitation	Stamps	
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, of	ficeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
3/02/23	Scale To Win	,	
Amount (\$)	Payee address;	City;	State; Zip Code
23, 38	13742 Harper 87.	Santa	CA 91361
•	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	solicitation	Testins	
,	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, of	ficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED	

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.

	ine instruction Guide explains how to d	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Waldenado - Wi	Sou 3 Filer ID (I	Ethics Commission Filers)
4 Date $3/3/23$	5 Payee name APH Digntal LLC	•	
6 Amount (\$)	7 Payee address;	City; State	•
250.00	18710 logers Hen	San Antonio TX	18238
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	, , , , , , , , , , , , , , , , , , , ,
PURPOSE OF EXPENDITURE	Advertising	Social Media	
	(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 / Ófficeholder name	Office sought	Office held
Date	Payee name		
3/6/23	U.S.P.S.		
Amount (\$)	Payee address;	City; State	; Zip Code
63.00	1475 Handley Dr.	Town on TX	76112
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	solicitation	87amps	
	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/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
3/8/13	Bankon Brintins		
Amount (\$)	Payee address;	City; State	e; Zip Code
54.13	2357 S. Collins 87.	Ansnstan T	16014
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisins	Push cards	
(Check if travel outside of Texas, Complete Schedule T,	Check if Austin, TX, officeholder	living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
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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.

	the instruction Guide explains now to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME Waldenado - W Son	3 Filer I	D (Ethics Commission Filers)
4 Date /8/23	5 Payee name U.S.P.S.		
6 Amount (\$)	7 Payee address;	City; , S	State; Zip Code
124.00	1475 Hand by Pr	Furt An -	TX 76012
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Solicitation	Samps	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeh	older living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Ófficeholder name I	Office sought	Office held
Date	Payee name		
3/9/23	APH Digital LLC		2
Amount (\$)	Payee address;	City; S	State; Zip Code
29800	18710 Poges Hen	Santorius	TX 78258
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	Social Media	ĩ
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeh	older living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 3/10/23	Rodman Campaigns	LLC	
Amount (\$)	Payee address;	City;	State; Zip Code
59402	211 E HU SAR 620	Austin :	TX 76701
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Solicitation	Text/Emai	/
1	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeho	older living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

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 Consulting Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel In District Contributions/Donations Made By 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) City: State; Zip Code 1111 East chase PKWA 337. 24 70120 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description Sign Stakes **PURPOSE** Advertising OF **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Home Repot Payee address; 1157 Bridge wood Dr. Category (See Categories listed at the top of this schedule) **PURPOSE** Adver \$35 ng **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Home Repot Payee address; Zip.Code Furt TX 76112 1151 Bridgewood Pr. Category (See Categories listed at the top of this schedule) Description **PURPOSE** Tie downs Advertismi **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH

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 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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out Of District
Other (enter a category not listed above)

Orodic Odro i dymoni	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME Waldenado - Wita	M 3 File	er ID (Ethics Commission Filers)
4 Date 3/20/23	Jan Waldonado - Wita 5 Payee name Academy Sports + D	ntdoors	
6 Amount (\$)	7 Payee address;	City:	State; Zip Code
10.29	1441 NE WOP 800	fidlands	TX 76180
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Event Expense		
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, of	fficeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Ófficeholder name H	Office sought	Office held
Date	Payee name		
3/20/23	winco Foods		
Amount (\$)	Payee address;	City;	State; Zip Code
45.09	5152 Rufe Snow Dr.	North Pithland Hills	N Theiro
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food Expense	DFW Food F	estival
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, of	fficeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		AND
3/22/23	Mailchimp		
Amount (\$)	Payee address;	City;	State; Zip Code
20.79	475 Ponce Releon Are A	15 Atlanta	a GA
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Solicitation	[mail	
(Check if travel outside of Texas, Complete Schedule T,	Check if Austin, TX, of	ficeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name i	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	1000000 1000000 1000000 10000000 1000000

SCHEDULE F1

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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 co	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME Waldonado - Wi	3 Filer ID (Ethics Commission Filers)	
4 Date 3/22/23	5 Payee name APH Hightal LLC	<u>'</u>	
6 Amount (\$)	7 Payee address;	City; State; Zip Code	
50000	18710 Rogers Wen	San Antonio TX 7625B	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising	Social Aldia	
	(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/OF	Candidate / Ófficeholder name I	Office sought Office held	
Date	Payee name		
3/23/23	Mailchimp		
Amount (\$)	Payee address;	City; State; Zip Code	
47.92	675 Ponce De Leon Are. NE	oo Atlanta GA	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Solicitation	Emas)	
	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	Payee name		
3/27/23	Stormie's Unday	•	
Amount (\$)	Payee address;	City; State; Zip.Code	
31,39	3509 6 Benz 87,	Fort Worth TX 76/05	_
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food Expense	Volunteer lunch	
,	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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SCHEDULE F1

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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	al Committee Legal Services Salaries/	xpense Travel Out Of District 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:	Tava Waldonado Wils	3 Filer ID (Ethics Commission Filers)
4 Date 3/26/23	Tam Waldwardo Wiss 5 Payee name 1 phie Repot	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
116.59	1151 Bridgewood Br.	Tut Wirth TX 76112
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertising	Sign Stakes
	(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/OF	Candidate / Ófficeholder name H	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address;	City; State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE		
OF EXPENDITURE		
	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	Payee name	
Amount (\$)	Payee address;	City; State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF		
EXPENDITURE		
	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

SCHEDULE F1

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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

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) 5 Payee name 94043 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description **PURPOSE** office Weshen Campaign emas EXPENDITURE (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Zip Code Category (See Categories listed at the top of this schedule) **PURPOSE** Advert Sint **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name Amount (\$) Zip.Code 91361 Category (See Categories listed at the top of this schedule) Description PURPOSE Sol Getation OF **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH