

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:

33

OFFICE USE ONLY

Date Received

OCT 10 2022 RWD

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

MR

William

T

NICKNAME

LAST

SUFFIX

Bill

Rickert

Jr

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1934 Crisfield Dr, Sugar Land, TX 77479

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(713)

377-1149

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

MR

Jeffery

C

NICKNAME

LAST

SUFFIX

Jeff

McClellan

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

6519 Dutch John Cir, Richmond, TX 77469

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(281)

725-6085

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

7

/

1

/

22

THROUGH

Month

Day

Year

9

/

30

/

22

11 ELECTION

ELECTION DATE

Month

Day

Year

11

/

8

/

22

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

Fort Bend County Treasurer

13 OFFICE SOUGHT (if known)

Fort Bend County Treasurer

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

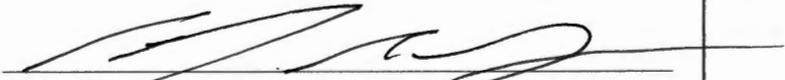
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

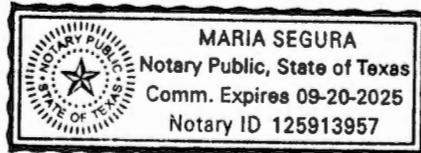
15 C/OH NAME Bill Rickert		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 17,986.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 446.11
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,448.05
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 13,835.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 61,500.00

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 of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by William T. Rickert Jr. this the 10th day of October, 2022, to certify which, witness my hand and seal of office.

Maria Segura Maria Segura Notary Public
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)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Bill Rickert		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 13,986.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 4,000.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 61,500.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 10,448.05
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 7,365.83
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$.28

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: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/06/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Gary Gillen	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 1012 Morton Street, Richmond, TX 77469		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 07/07/2022	Full name of contributor out-of-state PAC (ID#: _____) Trisha Fredrick	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 8011 Cross Trail Drive, Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 07/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Richard Zoll	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1111 Hermann Drive, 22E, Houston, TX 77004		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 07/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Ellen Hughes	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1715 Misty Fawn Lane, Fresno, TX 77545		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Dan Mathews	7 Amount of contribution (\$) 250.00
	6 Contributor address; City; State; Zip Code 4419 Ludwig Lane, Stafford, TX 77477	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) ABHR LLP	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 3200 Southwest Freeway, Suite 2600, Houston, TX 77027	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Earl Hersh	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 1010 Kern St, Houston, TX 77009-2922	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Emiley & Greg Barnes	Amount of contribution (\$) 25.00
	Contributor address; City; State; Zip Code 626 Saguaro Way, Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Evelyn Montalvo 6 Contributor address; City; State; Zip Code 1906 Wildwood Lane, Richmond, TX 77406	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Faisal Zayed Contributor address; City; State; Zip Code 3907 Dogwood Canyon LN, Sugar Land, TX 77479	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Irtaza Rana Contributor address; City; State; Zip Code 20314 Rainflower Bay Lane, Richmond, TX 77407	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Jessica Huang Contributor address; City; State; Zip Code 17424 West Grand Parkway South PMB 777, Sugar Land TX 77407	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Justin Schiro 6 Contributor address; City; State; Zip Code 21118 Meadow Ash Court, Richmond, TX 77407	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Marie & Jerry Moffett Contributor address; City; State; Zip Code 1718 Teal Brook Lane, Sugar Land, TX 77479	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Martin Steed Contributor address; City; State; Zip Code 602 Pinyon Ct, Richmond, TX 77469	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Mike & Barbara Rozell Contributor address; City; State; Zip Code 8518 Chipping Rock Dr, Sugar Land, TX 77479	Amount of contribution (\$) 100.00
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**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: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Pervez Sultan	250.00
	6 Contributor address; City; State; Zip Code 16631 Pecan Dr, Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Phillip Andrews	100.00
	Contributor address; City; State; Zip Code PO Box 17176, Sugar Land, TX 77496	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Ray Aguilar Campaign	500.00
	Contributor address; City; State; Zip Code 2011 Martin Lake Ct, Richmond TX, 77406	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Rick Harsch	100.00
	Contributor address; City; State; Zip Code 1734 Berkoff Dr, Sugar Land, TX 77479	
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**If the requested information is not applicable, **DO NOT** include this page in the report.

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2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Sourabh Sanduja 6 Contributor address; City; State; Zip Code 8711 Hawk Haven Court, 77469	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Sudarshan Belose Contributor address; City; State; Zip Code 6523 Monrovia Lane, Sugar Land, TX 77479	Amount of contribution (\$) 101.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Tanya & Tanika Bailey Contributor address; City; State; Zip Code 1938 Crisfield Dr, Sugar Land, TX 77479	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Tommy Kuykendall Contributor address; City; State; Zip Code 4216 Penn Lane, Richmond, TX 77406	Amount of contribution (\$) 200.00
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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2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Trent Williams 6 Contributor address; City; State; Zip Code 9307 Mount Logan, Missouri City, TX 77459	7 Amount of contribution (\$) 40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Yvonne Ramsey Contributor address; City; State; Zip Code 5608 Mimosa Ln, Richmond, TX 77406	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/14/2022	Full name of contributor out-of-state PAC (ID#: _____) Leah Hagan Contributor address; City; State; Zip Code 2111 Canyon Crest Drive, Sugar Land, TX 77479	Amount of contribution (\$) 125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/14/2022	Full name of contributor out-of-state PAC (ID#: _____) Naushad Kermally Contributor address; City; State; Zip Code 606 Moss Hammock WAY, Sugar Land, TX 77479	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/14/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Shawn Scott	7 Amount of contribution (\$) 20.00
6 Contributor address; City; State; Zip Code 1834 Fall Meadow Drive, Missouri City, TX 77459		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 07/15/2022	Full name of contributor out-of-state PAC (ID#: _____) Shriya Solutions (Ashish Agrawal)	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 6714 Apsley Creek Ln, Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 07/16/2022	Full name of contributor out-of-state PAC (ID#: _____) Priscilla L Forkner	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 7 Eden Hollow Ln, Sugar Land, TX 77406		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 07/16/2022	Full name of contributor out-of-state PAC (ID#: _____) Rizwan Nabi	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 12627 Altuve Dr, Houston, TX 77034		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 07/18/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Bill Benton 6 Contributor address; City; State; Zip Code 1509 GEORGINA ST, ROSENBERG, TX, 77471-	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 08/01/2022	Full name of contributor out-of-state PAC (ID#: _____) DEC Pac Contributor address; City; State; Zip Code 1 Greenway Plaza Ste 225, Houston, TX 77048	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 08/04/2022	Full name of contributor out-of-state PAC (ID#: _____) Kristen McCarty Contributor address; City; State; Zip Code 2611 Domineco Lane, Katy, TX 77450	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 08/04/2022	Full name of contributor out-of-state PAC (ID#: _____) Norm Mason Contributor address; City; State; Zip Code 915 Goldfinch Ave Sugar Land, TX 77478-3433	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 08/15/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Quartus Graves III 6 Contributor address; City; State; Zip Code 18818 FM442, Needville, TX 77461	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/15/2022	Full name of contributor out-of-state PAC (ID#: _____) Greg & Brenda Cauthen Contributor address; City; State; Zip Code 4727 Sugar Maple Ct Fulshear TX 77441-1673	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/15/2022	Full name of contributor out-of-state PAC (ID#: _____) Andrew & Danielle McCall Contributor address; City; State; Zip Code 30719 Parkside Passage Dr Fulshear 77441	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/15/2022	Full name of contributor out-of-state PAC (ID#: _____) Donnald & Christina McCall Contributor address; City; State; Zip Code 4838 Zachary Ln Sugar Land TX 77479-5451	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 08/16/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Keith King 6 Contributor address; City; State; Zip Code 5010 Bent Tree Dr Fulshear TX 77441	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/16/2022	Full name of contributor out-of-state PAC (ID#: _____) Melissa Guinn Contributor address; City; State; Zip Code 24319 Bay Hill Blvd Katy TX 77494	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2022	Full name of contributor out-of-state PAC (ID#: _____) Stephen Abney Contributor address; City; State; Zip Code 2010 Crisfield Dr, Sugar Land, TX 77479	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/30/2022	Full name of contributor out-of-state PAC (ID#: _____) Michael Schmidt Contributor address; City; State; Zip Code 4312 Pine Harvest Lane, Manvel, TX 77578	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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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: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 09/14/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Nancy J Parr	750.00
	6 Contributor address; City; State; Zip Code 14019 Southwest Fwy 301 414, Sugar Land, TX 77478	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/15/2022	Full name of contributor out-of-state PAC (ID#: _____) Vernon Edward Beyer	1,000.00
	Contributor address; City; State; Zip Code 4 Ellicott Way Sugar Land TX 77479-2870	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2022	Full name of contributor out-of-state PAC (ID#: _____) David Boehm	200.00
	Contributor address; City; State; Zip Code 23503 Eula Mae, Richmond, TX 77469	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/17/2022	Full name of contributor out-of-state PAC (ID#: _____) Susie Duarte	100.00
	Contributor address; City; State; Zip Code 2907 Carlisle Terrace Ct Richmond TX 77406	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 09/27/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Robert and Becky Haas	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code PO Box 606 Richmond TX 77406		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 1	
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 4,000.00	
5 Date 07/15/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Infan Motiwala 7 Contributor address; City; State; Zip Code 6543 US Alt-90, Sugar Land, TX 77498	8 Amount of Contribution \$ 2,000.00	9 In-kind contribution description Campaign Event <small>Check if travel outside of Texas. Complete Schedule T.</small>
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drew McCall Contributor address; City; State; Zip Code 30719 Parkside Passage Dr, Fulshear 77441	Amount of Contribution \$ 2,000.00	In-kind contribution description Campaign Event <small>Check if travel outside of Texas. Complete Schedule T.</small>
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

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: 6	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2022	5 Payee name Mr Ji Connections	
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code 1706 Foxwood Ct, Missouri City, TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Services
	(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 07/01/2022	Payee name ABCommunications	
Amount (\$) 200.00	Payee address; City; State; Zip Code 9600 Glenfield Court Suite 148 Houston, Texas 77096	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Services
	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 08/08/2022	Payee name ABCommunications	
Amount (\$) 100.00	Payee address; City; State; Zip Code 9600 Glenfield Court Suite 148 Houston, Texas 77096	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign services
	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: 6	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 Date 08/08/2022	5 Payee name Mr Ji Connections	
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 1706 Foxwood Ct, Missouri City, TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Services
	(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 08/25/2022	Payee name Blue Moon Signs & Graphics	
Amount (\$) 508.72	Payee address; City; State; Zip Code 5901 Blase Rd, Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Services
	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 08/31/2022	Payee name ABCommunications	
Amount (\$) 500.00	Payee address; City; State; Zip Code 9600 Glenfield Court Suite 148 Houston, Texas 77096	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign services
	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: 6		2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)	
4 Date 07/31/2022		5 Payee name Anedot			
6 Amount (\$) 189.44		7 Payee address; City; State; Zip Code 1340 Poydras Street. Suite 1770. New Orleans LA 70112			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense		(b) Description Anedot Fees		
	(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					
Date 08/31/2022		Candidate / Officeholder name Anedot			
Amount (\$) 56.40		Payee address; City; State; Zip Code 1340 Poydras Street. Suite 1770. New Orleans LA 70112			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense		Description Anedot Fees		
	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					
Date 09/30/2022		Candidate / Officeholder name Anedot			
Amount (\$) 18.60		Payee address; City; State; Zip Code 1340 Poydras Street. Suite 1770. New Orleans LA 70112			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense		Description Anedot Fees		
	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					

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: 6	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
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4 Date 09/06/2022	5 Payee name ABCommunications
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6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 9600 Glenfield Court Suite 148 Houston, Texas 77096
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Services
	(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
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Date 9/1/2022	Payee name Ray Aguilar Campaign
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Amount (\$) 100.00	Payee address; City; State; Zip Code 2011 Martin Lake Ct, Richmond TX, 77406
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution	Description Contribution to campaign
	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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Date 8/22/2022	Payee name Randall & Wright PTO's
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Amount (\$) 100.00	Payee address; City; State; Zip Code LAMAR CISD Rosenberg, TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution	Description donation to PTO
	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

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: 6	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 Date 09/15/2022	5 Payee name Blue Moon Signs & Graphics	
6 Amount (\$) 519.60	7 Payee address; City; State; Zip Code 5901 Blase Rd, Rosenberg, TX 77471	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign Services
	(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 09/19/2022	Payee name Texas GOP Store	
Amount (\$) 979.66	Payee address; City; State; Zip Code 404 IH-45 Huntsville TX 77488	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Services
	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 8/15/2022	Payee name Central Fort Bend Chamber	
Amount (\$) 35.00	Payee address; City; State; Zip Code 4120 Ave H Rosenberg, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Richmond State of the City
	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: 6	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 Date 7/15/2022	5 Payee name American Express	
6 Amount (\$) 1,121.54	7 Payee address; City; State; Zip Code P.O. Box 650448 Dallas TX 75265-0453	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description
	(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 8/15/2022	Payee name American Express	
Amount (\$) 1,330.14	Payee address; City; State; Zip Code P.O. Box 650448 Dallas TX 75265-0453	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	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
Date 9/15/2022	Payee name American Express	
Amount (\$) 4,238.95	Payee address; City; State; Zip Code P.O. Box 650448 Dallas TX 75265-0453	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	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

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	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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 7	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 446.11
5 Date 07/11/2022	6 Payee name Print Matters	
7 Amount (\$) 1,082.50	8 Payee address; City; State; Zip Code 1646 BLAISDALE RD SUITE 2500, RICHMOND TX 77406	
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 Expenses	(b) Description Merchandise & Supplies-Clothing Stores
	(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 07/13/2022	Payee name Microsoft Bing Ads	
Amount (\$) 102.51	Payee address; City; State; Zip Code 111 WALL STREET, New York NY 10043	
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) Advertising Expenses	Description Business Services
	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	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)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 7	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 446.11
5 Date 07/25/2022	6 Payee name Fort Bend Christian Chamber of Commerce	
7 Amount (\$) 600.00	8 Payee address; City; State; Zip Code 11511 KATY FWY, HOUSTON TX 77079	
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) Event Expense	(b) Description Merchandise & Supplies
	(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 07/26/2022	Payee name The Big Dogs Creative	
Amount (\$) 1032.00	Payee address; City; State; Zip Code 223 SUMMER GATE CT Houston TX 77469	
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) Consulting Expense	Description Website & Graphics
	(c) 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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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	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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 7	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 446.11
5 Date 07/31/2022	6 Payee name Facebook	
7 Amount (\$) 638.51	8 Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park CA 94025	
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 Advertising Services
	(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 08/01/2022	Payee name Google	
Amount (\$) 338.05	Payee address; City; State; Zip Code 1600 AMPHITHEATRE PKWY, Mountain View CA 94043	
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) Advertising Expense	Description Advertising Services
	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	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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 7	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 446.11
5 Date 08/09/2022	6 Payee name Microsoft	
7 Amount (\$) 102.54	8 Payee address; City; State; Zip Code 111 WALL STREET, New York NY 10043	
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 Advertising Services
	(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 08/13/2022	Payee name Microsoft	
Amount (\$) 102.72	Payee address; City; State; Zip Code 111 WALL STREET, New York NY 10043	
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) Advertising Expense	Description Advertising Services
	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	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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 7	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 446.11
5 Date 08/16/2022	6 Payee name Print Matters	
7 Amount (\$) 1,082.50	8 Payee address; City; State; Zip Code 1646 BLAISDALE RD SUITE 2500, RICHMOND TX 77406	
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 Merchandise & Supplies-Clothing Stores
	(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 08/30/2022	Payee name Facebook	
Amount (\$) 750.00	Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park CA 94025	
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) Advertising Expense	Description Advertising Services
	(c) 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	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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 7	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 446.11
5 Date 08/31/2022	6 Payee name Facebook	
7 Amount (\$) 84.54	8 Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park CA 94025	
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 Advertising Services
	(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 09/01/2022	Payee name Google	
Amount (\$) 179.38	Payee address; City; State; Zip Code 1600 AMPHITHEATRE PKWY, Mountain View CA 94043	
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) Advertising Expense	Description Advertising Services
	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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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	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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 7	2 FILER NAME Bill Rickert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 446.11
5 Date 09/13/2022	6 Payee name Facebook	
7 Amount (\$) 750.00	8 Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park CA 94025	
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 Advertising Services
	(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 09/21/2022	Payee name Microsoft	
Amount (\$) 74.47	Payee address; City; State; Zip Code 111 WALL STREET, New York NY 10043	
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) Advertising Expense	Description Advertising Services
	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

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

SCHEDULE K

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 K: 1
2 FILER NAME Bill Rickert		3 Filer ID (Ethics Commission Filers)
4 Date 8/19/2022	5 Name of person from whom amount is received Chase Bank	8 Amount (\$) 0.13
	6 Address of person from whom amount is received; City; State; Zip Code P O Box 659754 San Antonio TX 78265-9759	
	7 Purpose for which amount is received Check if political contribution returned to filer Bank account interest	
Date 9/22/2022	Name of person from whom amount is received Chase Bank	Amount (\$) 0.15
	Address of person from whom amount is received; City; State; Zip Code P O Box 659754 San Antonio TX 78265-9759	
	Purpose for which amount is received Check if political contribution returned to filer Bank account interest	
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received Check if political contribution returned to filer	
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received Check if political contribution returned to filer	

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