

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

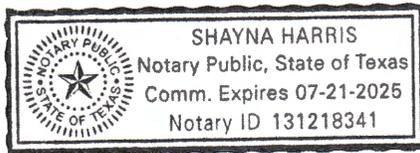
FORM C/OH
COVER SHEET PG 2

15 C/OH NAME KYLE P. GEORGE		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)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 211,960 ⁰⁰
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 16762 ⁸⁴
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 232,912 ¹⁶
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

K.P. George
Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Shayna Harris this the 16th day of January, 2024, to certify which, witness my hand and seal of office.

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 KYLE P. GEORGE		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 211,960 ⁹⁹
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 16,762 ⁹⁹
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 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	\$

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: **1**

2 FILER NAME

KYLE P. GEORGE

3 Filer ID (Ethics Commission Filers)

4 Date
07/30/2023

5 Full name of contributor out-of-state PAC (ID#: _____)
Brian Barran

6 Contributor address; City; State; Zip Code
4127 Amber Trace Court Sugar Land, Tx 77479

7 Amount of contribution (\$)

10.00

8 Principal occupation / Job title (See Instructions)
Software Developer

9 Employer (See Instructions)
Bluware

Date
08/18/2023

Full name of contributor out-of-state PAC (ID#: _____)
Tahir Bhatti

Contributor address; City; State; Zip Code
10m Harbor View Dr Sugar Land Tx 77479

Amount of contribution (\$)

2,500.00

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Focus Merchant Services

Date
08/21/2023

Full name of contributor out-of-state PAC (ID#: _____)
Atul Kothari

Contributor address; City; State; Zip Code
426 Bermuda Dr Sugar Land Tx 77479

Amount of contribution (\$)

1,000.00

Principal occupation / Job title (See Instructions)
CPA

Employer (See Instructions)
Atul B Kothari CPA PC

Date
08/30/2023

Full name of contributor out-of-state PAC (ID#: _____)
Brian Barran

Contributor address; City; State; Zip Code
4127 Amber Trace Ct Sugar Land Tx 77479

Amount of contribution (\$)

10.00

Principal occupation / Job title (See Instructions)
Software Developer

Employer (See Instructions)
Bluware

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: 2
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 9/7/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillip Crain	7 Amount of contribution (\$) \$2500
6 Contributor address; City; State; Zip Code 3812 Buckholt St Pearland, TX 77581		
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Crain Group LLC
Date 9/7/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriel Johnson	Amount of contribution (\$) \$5,000
Contributor address; City; State; Zip Code 9407 Reston Grove Lane Houston, TX 77095		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) ATG Technical Services LLC
Date 9/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adriano Carvalho	Amount of contribution (\$) \$5
Contributor address; City; State; Zip Code 1302 Mystic River Ln Rosenberg TX 77471		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) STELL
Date 9/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walt Sass	Amount of contribution (\$) \$500.
Contributor address; City; State; Zip Code PO Box 380 Barker, TX 77413		
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Weisser Engineering + Surveying
<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>		

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: 3
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 9/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evelyn Liendro	7 Amount of contribution (\$) \$100.
6 Contributor address; City; State; Zip Code 2216 Thompson Rd Richmond TX 77469		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Auto Title of Texas
Date 9/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Bonnette	Amount of contribution (\$) \$1,500.
Contributor address; City; State; Zip Code 923 Woodland St Houston, TX 77009		
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) PGAL Inc
Date 9/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Muller	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 202 Century Square Blvd Sugarland, TX 77428		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Muller Law Group
Date 9/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Britton	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 3665 Willwick Dr. Houston, TX 77019		
Principal occupation / Job title (See Instructions) Executive Chair		Employer (See Instructions) Perry Homes

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: 4
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 9/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Golan	7 Amount of contribution (\$) \$1,000.
6 Contributor address; City; State; Zip Code 2316 Portofino Ridge Dr. Sugar Land TX		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Weston Homes
Date 9/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi Benton	Amount of contribution (\$) \$250.
Contributor address; City; State; Zip Code 3417 Milam St. Houston, TX 77062		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Levi Benton + Associates PLLC
Date 9/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Barran	Amount of contribution (\$) \$10
Contributor address; City; State; Zip Code 4127 AmberTrace Ct Sugarland, TX 77479		
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Blware
Date 9/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saib Saour	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 5469 Holly Springs Dr Houston, TX 77056		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Benchmark Engineering

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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: 5
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fakhruddin Sabir	7 Amount of contribution (\$) \$10,000.
6 Contributor address; City; State; Zip Code 11810 Hallwood Stream Ln Cypress Tx 77433		
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) F S Group Architects
Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muhammad Aziz	Amount of contribution (\$) \$5,000.
Contributor address; City; State; Zip Code 800 Commerce St Houston, Tx 77002		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Abraham Watkins Nichols Agosto Aziz + Stagner
Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chao-Chiung Lee	Amount of contribution (\$) \$5,000.
Contributor address; City; State; Zip Code 6001 Savoy Dr Southwood Houston, Tx 77036		
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) STBA Architects
Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutfi Hassan	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 9100 Southwest Fwy Houston, Tx 77084		
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) APEX group
<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>		

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: 6
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/5/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irfan Abji	7 Amount of contribution (\$) \$1,500.
6 Contributor address; City; State; Zip Code 11530 Westmoor Dr Richmond, TX 77407		
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Irfan Abji
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ali Roshanfekar	Amount of contribution (\$) \$1,500.
Contributor address; City; State; Zip Code 14127 Kimberley Ln Houston, TX 77079		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Cascade Civil Services
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saul Valentin	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 1943 Norfolk St Apt A Houston, TX 77098		
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Collaborate
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvin San Miguel	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 8101 Kircher Rd Manvel, TX 77578		
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Johnson Development Corp.
<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>		

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: 7
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Barran	7 Amount of contribution (\$) \$10.
6 Contributor address; City; State; Zip Code 4127 AmberTrace Ct Sugarland, TX 77479		
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Bluware
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Barran	Amount of contribution (\$) \$10
Contributor address; City; State; Zip Code 4127 AmberTrace Ct Sugarland, TX 77479		
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Bluware
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasruddin Rupani	Amount of contribution (\$) \$5,000.
Contributor address; City; State; Zip Code 7500 Bellaire Blvd Ste 900 Houston, TX 77036		
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Worlds Gold + Diamonds Inc
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judy Harris	Amount of contribution (\$) \$20.
Contributor address; City; State; Zip Code 3226 Dandelion Dr Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Unemployed		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: 8
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atul Kothari	7 Amount of contribution (\$) \$500.
6 Contributor address; City; State; Zip Code 4526 Bermuda Dr Sugarland, TX 77479		
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Atul B Kothari CPA PC
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saul Valentin	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 1943 Norfolk St Apt A Houston, TX 77098		
Principal occupation / Job title (See Instructions) Founding Principal		Employer (See Instructions) Collaborate Architects
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Barran	Amount of contribution (\$) \$10.
Contributor address; City; State; Zip Code 4127 Amber Trace Ct Sugarland, TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Rice	Amount of contribution (\$) \$250.
Contributor address; City; State; Zip Code 5402 Oban Terrace Sugarland, TX 77479		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Rice + Gardner Consultants Inc.
<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>		

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: 9
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/4/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Boggio	7 Amount of contribution (\$) \$5,000.
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vijaya K. Rapolu	Amount of contribution (\$) \$3,000.
Contributor address; City; State; Zip Code 27822 Acacia Glen Ln. Katy, TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnie C Moss	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 12418 Westella Dr Houston, TX 77077		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank C. Mbachu	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 4419 April Meadow Way Sugarland, TX 77479		
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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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: 10
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/5/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Cibor	7 Amount of contribution (\$) \$5,000.
	6 Contributor address; City; State; Zip Code 6254 Wickersham Ln Houston, TX 77057	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew A. Schatte	Amount of contribution (\$) \$5,000.
	Contributor address; City; State; Zip Code 5330 Montrose Blvd Houston, TX 77006	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Good Government PAC	Amount of contribution (\$) \$5,000.
	Contributor address; City; State; Zip Code 99 Detering St Ste 164 Houston, TX 77007	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satya Pilla	Amount of contribution (\$) \$5,000.
	Contributor address; City; State; Zip Code 4103 Oak Blossom Ct Houston, TX 77059	
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: 11
2 FILER NAME Kyle Pleasance		3 Filer ID (Ethics Commission Filers)
4 Date 8/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay K Sears	7 Amount of contribution (\$) \$2,500.
6 Contributor address; City; State; Zip Code 8827 W Sam Houston Pkwy N Ste 200 Houston, TX 77040		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Bane Humphries Robinson LLP	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 3200 Southwest Freeway Suite 2600 Houston, TX 77027		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 9/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven D. Alvis	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 8827 W Sam Houston Pkwy N Suite 200 Houston, TX 77040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 9/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Alvis	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 6203 Lynbrook Dr Houston, TX 77057		
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: 12
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/2/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb Fendley PAC	7 Amount of contribution (\$) \$2,500.
	6 Contributor address; City; State; Zip Code 13430 Northwest Fwy Ste 1100 Houston, TX 77040	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jubair Hossain	Amount of contribution (\$) \$2,500.
	Contributor address; City; State; Zip Code 15227 Sand Bluestem Dr Cypress, TX 77433	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karuna Kar Sreerama	Amount of contribution (\$) \$2,500.
	Contributor address; City; State; Zip Code 4406 Orange Leaf Ct. Houston, TX 77058	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/4/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hema Chandra P. Kolluru	Amount of contribution (\$) \$2,000.
	Contributor address; City; State; Zip Code 94 Heathrow Ln. Sugar Land, TX 77479	
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: 13
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/5/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRA Engineering PAC	7 Amount of contribution (\$) \$1,500.
6 Contributor address; City; State; Zip Code 10011 Meadow Glen Ln. Houston, TX 77042		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/5/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle E. Henkel	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 8630 Wyndham Village Dr. Jersey Village, TX 77040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohan Ballagere	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 10306 Logan Bridge Ln. Sugarland, TX 77498		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry F Janak	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 19215 Cohen Green Ln Houston, TX 77094		
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: 14
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 9/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H. Dean Lane Jr.	7 Amount of contribution (\$) \$1,000.
6 Contributor address; City; State; Zip Code 31 Sandalwood Houston, TX 77024		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle D. Lippman	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 3 Bending Oaks Ln. Houston, TX. 77024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANPAC	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 2925 BriarPark Dr Ste 400 Houston, TX 77042		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/3/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David A. Hamilton	Amount of contribution (\$) \$500.
Contributor address; City; State; Zip Code 12315 Woodthorpe Ln Houston, TX 77024		
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>		

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 Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 8/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amiralli Dodhiya	7 Amount of contribution (\$) \$5,000.
6 Contributor address; City; State; Zip Code Le Quiet Path Dr. Sugarland, TX 77498		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 8/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Randermann	Amount of contribution (\$) \$2,500.
Contributor address; City; State; Zip Code 4860 James Ln Fulshear, TX 77441		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 9/9/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James D Rice	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 5402 ObenTerrace Ln Sugarland, TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 9/6/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alliance PAC	Amount of contribution (\$) \$25,000.
Contributor address; City; State; Zip Code 6200 Savay Dr Ste 100 Houston, TX 77036		
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

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: 16
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 8/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LineBarger Goggen Blair + Sampson LLP	7 Amount of contribution (\$) \$ 5,000.
6 Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel K. Signorelli	Amount of contribution (\$) \$10,000.
Contributor address; City; State; Zip Code 1401 Woodlands Pkwy Woodlands, TX 77380		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/14/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huitt-Zollars, Inc Texas PAC	Amount of contribution (\$) \$ 5,000.
Contributor address; City; State; Zip Code 5430 LBJ Freeway, Ste 1500 Dallas, TX 75240		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/18/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Eastwood	Amount of contribution (\$) \$ 500.
Contributor address; City; State; Zip Code 17407 Hwy 59N Humble, TX 77396		
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>		

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: 17
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 9/13/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell PAC	7 Amount of contribution (\$) \$2,000.
	6 Contributor address; City; State; Zip Code 711 Louisiana St Ste 2300 Houston, TX 77002	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 10/3/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HonePAC Greater Houston Builders Assn.	Amount of contribution (\$) \$2,500.
	Contributor address; City; State; Zip Code 9611 W Sam Houston Pkwy Houston, TX 77064	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 9/15/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pathrose Simon	Amount of contribution (\$) \$1,000.
	Contributor address; City; State; Zip Code 18 Hidden Cove Missouri City, TX 77459	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RS+H PAC Texas	Amount of contribution (\$) \$1,500.
	Contributor address; City; State; Zip Code 8240 North MOPAC Expressway Austin, TX 78759	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 18
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/16/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardurra Group PAC	7 Amount of contribution (\$) \$1,000.
6 Contributor address; City; State; Zip Code 5851 San Felipe St Houston, TX 77057		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 10/23/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABA-KISTNER PAC, Inc.	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/8/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samantha K Schatte	Amount of contribution (\$) \$5,000.
Contributor address; City; State; Zip Code 5330 Montrose Blvd Houston, TX 77005		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/25/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highland Homes Houston LLC	Amount of contribution (\$) \$1,000.
Contributor address; City; State; Zip Code 10603 W. Sem Houston Pkwy N Houston, TX 77064		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 19
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 11/20/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amar Amancharla	7 Amount of contribution (\$) \$5,000.
	6 Contributor address; City; State; Zip Code 3010 Colonial Dr. Sugarland, TX 77479	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 11/20/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlmc-PAC Greater Houston Builders Assoc.	Amount of contribution (\$) \$250.
	Contributor address; City; State; Zip Code 9571 W. Sem Houston Pkwy N Houston, TX 77064	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/13/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Priti Singh	Amount of contribution (\$) \$5,000.
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/18/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Siwierka	Amount of contribution (\$) \$2,500.
	Contributor address; City; State; Zip Code 5711 Silver Bay Ct Sugarland, TX 77479	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 10
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rana Ellaham	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 23230 Summers Creek Ct Katy, TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omar Alhammouri	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 12888 Queensbury Ln. #W528 Houston, TX 77024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judith Harris	Amount of contribution (\$) \$25.-
Contributor address; City; State; Zip Code 3226 Dandstein Dr. Richmond, TX 77469		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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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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: 20
2 FILER NAME Kyle P. George		3 Filer ID (Ethics Commission Filers)
4 Date 12/21/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larance Turner	7 Amount of contribution (\$) \$ 3,000.
6 Contributor address; City; State; Zip Code Stafford, TX 77497		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/26/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varinder (Bobby) Singh	Amount of contribution (\$) \$ 10,000.
Contributor address; City; State; Zip Code 12571 Still Harbour Dr Houston, TX 77041		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> 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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>1</u>	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date <u>6/03/2023</u>	5 Payee name <u>Google LLC GSUITE</u>	
6 Amount (\$) <u>\$63.96</u>	7 Payee address; City; State; Zip Code <u>Mountainview, California 94043</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Campaign tool</u>	(b) Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <u>7/3/2023</u>	Payee name <u>Google service</u>	
Amount (\$) <u>\$14.</u>	Payee address; City; State; Zip Code <u>Mountainview, CA 94043</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Campaign tool</u>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held
Date <u>7/24/2023</u>	Payee name <u>Act Blue</u>	
Amount (\$) <u>\$35.</u>	Payee address; City; State; Zip Code <u>366 Summer St. Somerville MA 02144</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fund raising.</u>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 8/01/2023	5 Payee name Google GSuite
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6 Amount (\$) \$63.96	7 Payee address; Mountainview, CA 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Software	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date 8/01/2023	Payee name Google service
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Amount (\$) \$14.	Payee address; Mountainview, CA 94043
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/01/2023	Payee name Google service
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Amount (\$) \$14.03	Payee address; Mountainview, CA 94043
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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: 3	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 9/01/2023	5 Payee name Google G Suite
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6 Amount (\$) \$63.96	7 Payee address; Mountainview, CA 94043	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Software	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date 10/02/2023	Payee name Google Service
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Amount (\$) \$14.02	Payee address; Mountainview, CA 94043	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/02/2023	Payee name Google G Suite
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Amount (\$) \$63.96	Payee address; Mountainview, CA 94043	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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: 4	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 11/01/2023	5 Payee name Google G-SUITE
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6 Amount (\$) \$63.96	7 Payee address; City; State; Zip Code Mountain View, CA 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Software	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name Google Service
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Amount (\$) \$13.48	Payee address; City; State; Zip Code Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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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Date 12/01/2023	Payee name Google Service
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Amount (\$) \$13.48	Payee address; City; State; Zip Code Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 12/01/2023	5 Payee name Google G SUITE
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6 Amount (\$) \$63.96	7 Payee address; City; State; Zip Code Mountainview, CA 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Software	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 7/31/2023	Payee name Bank service charge
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Amount (\$) \$5	Payee address; City; State; Zip Code Frost Bank Houston, TX 77002
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Bank Fee	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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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Date 8/31/2023	Payee name Bank service charge
--------------------------	--

Amount (\$) \$5	Payee address; City; State; Zip Code Frost Bank HOUSTON, TX 77002
---------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Bank Fee	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 9/29/2023	5 Payee name Bank Service Charge	
6 Amount (\$) \$5.	7 Payee address; City; State; Zip Code Frost Bank, HOUSTON TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank fee	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 10/31/23	Payee name Bank Service Charge	
Amount (\$) \$5.	Payee address; City; State; Zip Code Frost Bank HOUSTON, TX 77002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Bank fee	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/30/23	Payee name Bank Service Charge	
Amount (\$) \$5	Payee address; City; State; Zip Code Frost Bank HOUSTON, TX 77002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Bank fee	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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: 7	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 12/29/2023	5 Payee name Bank Service Charge	
6 Amount (\$) \$5.	7 Payee address; City; State; Zip Code FROST BANK HOUSTON, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank fee	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 8/21/2023	Payee name Fort Bend Democratic Party	
Amount (\$) \$1,000.	Payee address; City; State; Zip Code Sugar Land TX 77479.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2023	Payee name Hina Qadri	
Amount (\$) \$500.	Payee address; City; State; Zip Code Sugar Land TX 77479	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign consulting	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>8</u>	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date <u>10/20/23</u>	5 Payee name <u>Babu Thomas</u>	
6 Amount (\$) <u>\$2,000.</u>	7 Payee address; City; State; Zip Code <u>knights ct. Missouri City TX 77459.</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Campaign office out.</u>	
	(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <u>10/5/2023</u>	Payee name <u>Strong Strategies</u>	
Amount (\$) <u>\$6,000.</u>	Payee address; City; State; Zip Code <u>325 W 18th St Houston TX 77008</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Campaign Fundraising</u>	
	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>10/16/2023</u>	Payee name <u>Chris Hollins Campaign</u>	
Amount (\$) <u>\$500.</u>	Payee address; City; State; Zip Code <u>Houston TX 77036</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Campaign Contribution</u>	
	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 10/25/2023	5 Payee name TARAL PATEL
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6 Amount (\$) \$750.	7 Payee address; Sugar Land	City; TX	State; TX	Zip Code 77479
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Consulting	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date 11/13/2023	Payee name Patrick Quincy Campaign
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Amount (\$) \$250.	Payee address; Richmond	City; TX	State; TX	Zip Code 77469.
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution -	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/25/2023	Payee name Grady Prestage Campaign
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Amount (\$) \$500.	Payee address; Missoula	City; TX	State; TX	Zip Code 77459
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution -	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>60</i>	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date <i>10/25/2023</i>	5 Payee name <i>FBHSN-41</i>	
6 Amount (\$) <i>\$500.</i>	7 Payee address; City; State; Zip Code <i>Houston TX 7</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contribution</i>	
	(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <i>7-15-2023</i>	Payee name <i>NGP VAN INC</i>	
Amount (\$) <i>\$341.12</i>	Payee address; City; State; Zip Code <i>655 15th St. NW Washington DC 20005</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Campaign Software</i>	
	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>8-16-2023</i>	Payee name <i>NGP.VAN INC</i>	
Amount (\$) <i>\$341.12</i>	Payee address; City; State; Zip Code <i>655 15th St. NW Washington DC 20005</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Campaign Software</i>	
	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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: 11	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 9-14-2023	5 Payee name NGP VAN Inc
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6 Amount (\$) \$341.12	7 Payee address: 655 15th St. NW	City: Washington	State: DC	Zip Code 20005
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Software	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date 10-26-2023	Payee name NGP VAN. INC.
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Amount (\$) 341.12.	Payee address: 655 15th St. NW.	City: Washington	State: DC	Zip Code 20005.
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-5-2023	Payee name NGP VAN INC.
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Amount (\$) \$341.12.	Payee address: 655 15th St NW	City: Washington	State: DC	Zip Code 20005
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Software	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Kyle P. George	3 Filer ID (Ethics Commission Filers)
4 Date 12-26-2023	5 Payee name NBP VAN INC	
6 Amount (\$) \$341.12	7 Payee address; 655 15th St. NW	City; Washington State; DC Zip Code 20005
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Campaign Tech Tool.	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-06-2023	Payee name Go Daddy.com		
Amount (\$) \$44.34	Payee address; 2155 E. Goddard way	City; Tempe	State; AR Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Domain Name Regn.		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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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Date 9-30-2023	Payee name Actblue		
Amount (\$) \$686.32	Payee address; 366 Summer St	City; Somerville	State; MA Zip Code 0214
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Final raising fees.		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13.	2 FILER NAME Kyle P. George	3 Filer ID (Ethics Commission Filers)
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4 Date 12-30-2023	5 Payee name Act blue Inc.
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6 Amount (\$) \$ 1453.62	7 Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fund raising fees.	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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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