The JC/OH Instructio	n Guide explains how to co	omplete this form.	Filer ID		2 Total pages	s filed:
3 CANDIDATE /	MS/MRS/MR	FIRST		41		10
OFFICEHOLDER	MS/MRS/MR	FIRST Dean	I.	ΛI	OFFICE	E USE ONLY
NAME					Date Received	VA 44
	NICKNAME	LAST		SUFFIX		JUL 15 2025
	NICKIVAIVIE	Hrbacek	3	OFFIX		
CANDIDATE /	ADDRESS / PO BOX; A	PT / SHITE # CITY	7	IP CODE	Date Hand-delivere	ed or Date Postmarked
OFFICEHOLDER	1239 Creekford Circle	#1700HE#, 0H1,	2	II CODE		
MAILING ADDRESS					Receipt #	Amount
Change of Address	Sugar Land, TX 77478				Data Brassand	
_					Date Processed	
		3 4			Date Imaged	
CAMPAIGN TREASURER	MS / MRS / MR	FIRST			MI	
NAME	MS	ICATHY				
	NICKNAME	LAST		•••••	SUFFIX	
		LUCION B	ACH			
6 CAMPAIGN	STREET ADDRESS (NO F	PO BOX PLEASE);	APT / SUITE #;	CITY;	S	TATE; ZIP CODE
TREASURER	STREET ADDRESS (NO F	PO BOX PLEASE);	APT / SUITE #;	CITY;	y A TX	TATE; ZIP CODE
TREASURER ADDRESS		PO BOX PLEASE);	APT / SUITE #;	CITY;	UD TX	TATE; ZIP CODE
TREASURER	STREET ADDRESS (NO F	PO BOX PLEASE);	APT / SUITE #;	CITY;	UD TX	TATE; ZIP CODE 77478
TREASURER ADDRESS	STREET ADDRESS (NO F	PO BOX PLEASE);	APT / SUITE #;	CITY;	UD TX	TATE; ZIP CODE
TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO F	POBOX PLEASE);	APT/SUITE#;	CITY; R CA	UD TX	TATE; ZIP CODE 77478
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER	STREET ADDRESS (NO F	POBOX PLEASE);	APT / SUITE #;	CITY;	UD TX	TATE; ZIP CODE
TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO F	POBOX PLEASE);	APT/SUITE#;	CITY; R CA	UD TX	TATE; ZIP CODE C 77478
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT	STREET ADDRESS (NO F	PO BOX PLEASE); FUIEW DO	APT/SUITE#; SUGAN	CITY;	UD TX	77478
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO F	POBOX PLEASE);	APT/SUITE#; SUGAN	CITY;	15th day after o	TATE; ZIP CODE 77478 campaign treasurer fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT	STREET ADDRESS (NO F	PO BOX PLEASE); FUIEW DO	APT / SUITE #; SU G-Ar ENSION The image is a second of the content of the cont	C CA	15th day after cappointment (or	campaign treasurer
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE	STREET ADDRESS (NO F 534 LONG AREA CODE PHO January 15 X July 15	PO BOX PLEASE); PO BOX PLEASE); ONE NUMBER EXTERMANDO 30th day before elections 8th day before elections	APT / SUITE #; SU G-And ENSION ENSION Exceeded moor reporting limit	C CA	15th day after cappointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE	STREET ADDRESS (NO F 534 LONG AREA CODE PHO January 15 X July 15 Month Day Year	ONE NUMBER EXTE	APT / SUITE #; SU G-And ENSION The image is a second of the control of the con	dified Day	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD	STREET ADDRESS (NO F 534 LONG AREA CODE PHO January 15 X July 15	PO BOX PLEASE); PO BOX PLEASE); ONE NUMBER EXTERMANDO 30th day before elections 8th day before elections	APT / SUITE #; SU G-And ENSION The image is a second of the control of the con	C CA	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD COVERED	STREET ADDRESS (NO F 534 LONG AREA CODE PHO January 15 X July 15 Month Day Year	ONE NUMBER EXTE	APT / SUITE #; SU G-And ENSION The image is a second of the control of the con	Day 06/30/2025	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD COVERED	STREET ADDRESS (NO F S34 LONG AREA CODE PHO January 15 X July 15 Month Day Year 01/01/2025 ELECTION DATE Month Day Year	PO BOX PLEASE); PO BOX PLEASE); PO BOX PLEASE); ONE NUMBER EXTERNATION 30th day before election THROUGH	APT / SUITE #; SU G-And ENSION The second of the second	Day 06/30/2025	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD COVERED	STREET ADDRESS (NO F S34 LONG AREA CODE PHO January 15 X July 15 Month Day Year 01/01/2025 ELECTION DATE	PO BOX PLEASE); PO BOX PLEASE); PO BOX PLEASE); ONE NUMBER EXTERMAND 30th day before election THROUGH	APT / SUITE #; SU G-Ar ENSION tion Runoff on Exceeded mor reporting limit Month JGH ELECTION Runoff	Day 06/30/2025	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD COVERED	STREET ADDRESS (NO F S34 LONG AREA CODE PHO January 15 X July 15 Month Day Year 01/01/2025 ELECTION DATE Month Day Year	PO BOX PLEASE); PO BOX PLEASE PLANESCO P	APT / SUITE #; SU G-Ar ENSION tion Runoff on Exceeded mor reporting limit Month JGH ELECTION Runoff	Day 06/30/2025	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD COVERED 0 ELECTION	STREET ADDRESS (NO F S34 LONG AREA CODE PHO January 15 X July 15 Month Day Year 01/01/2025 ELECTION DATE Month Day Year	PO BOX PLEASE); PO BOX PLEASE PLANESCO P	APT / SUITE #; SU G-AN ENSION The second of the second	Day 06/30/2025	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD COVERED 0 ELECTION	STREET ADDRESS (NO F S34 LON 6 AREA CODE PHO January 15 X July 15 Month Day Year 01/01/2025 ELECTION DATE Month Day Year 03/03/2026	ONE NUMBER EXTERNAL SERVICE AND STATE OF THROUGHT.	APT / SUITE #; SU G-Ar ENSION tion Runoff on Exceeded mor reporting limit Month JGH ELECTION Runoff gy Runoff al Special	dified Day D6/30/2025	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)
TREASURER ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD	STREET ADDRESS (NO F S34 LON 6 AREA CODE PHO January 15 X July 15 Month Day Year 01/01/2025 ELECTION DATE Month Day Year 03/03/2026 OFFICE HELD (if any)	ONE NUMBER EXTERNAL SERVICE AND STATE OF THROUGHT.	APT / SUITE #; SU G-Ar ENSION tion Runoff on Exceeded mor reporting limit Month JGH ELECTION Runoff gy Runoff al Special	Day 06/30/2025	15th day after of appointment (of Final Report (A	campaign treasurer (fficeholder only)

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH **COVER SHEET PG 2**

13 C / OH NAME	Hrbacek, Dean		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political expendit . These expenditures may have been made without d officeholders are required to report this information	t the candidate's or office	eholder's kr	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS		.I IIZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		TICAL CONTRIBUTIONS	IC)	\$	0.00
EXPENDITURE		PLEDGES, LOANS, OR GUARANTEES OF LOAN IZED POLITICAL EXPENDITURES	15)	\$	711.32
TOTALS	4. TOTAL POLIT	ICAL EXPENDITURES			
	TOTAL POLIT	LACE EXPENDITORES		\$	4,623.67
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD	AST DAY OF THE	\$	2,719.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$	99,367.04
17 AFFIDAVIT	JAMES L. GOULDSMI NOTARY PUBLIC, STATE OF TI Notary ID #574005 Expires November 18, 2	2025	y of perjury, that the account infermation required to	be reporte	report is ed by me
AFFIX NO	TARY STAMP / SEAL AB	OVE	ve H	L.	
Sworn to and subso	cribed before me, by the s	aid Vean HR ha Celk ertify which, witness my hand and seal of office.	, this the <i>1</i> \$ 1 •		day
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer a	OU OC administer	ing oath
anna anadada tara	vas Ethios Commission	way othics state ty us		Vorcion \	// 1 0 f10d0fd8

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

					3 of 10
18 FILER Hrba	R NAM		19 Filer ID		
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE					OTAL AMOUNT
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	3,576.79
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,046.88
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11. [SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12. [SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Overho Polling Exper Printing Exper Salaries/Wag	ense es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel in District Travel Out of District OTHER (enter a category not listed above)	se
1	Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID	
	Sch: 1/5 Rpt: 4/10	Hrbacek, D					
4	Date	5 Payee name	9				
	05/05/2025	Costco Bus	siness				
6	Amount (\$) \$125.88	7 Payee addre 12717 Net Stafford, T.	work Dr.	e; Zip Code			
8	PURPOSE OF EXPENDITURE		See Categories listed at the top of this se rage Expense	chedule) (b		outside of Texas. Complete Schedule T. , TX, officeholder living expense e	
9	Complete ONLY if direct expenditure to benefit C/O		ïceholder name	Office sough	t	Office held	
	Date	Payee name					
	06/08/2025	Costco Bus	siness				
	Amount (\$) \$90.74	Payee addre		e; Zip Code			
		Stafford, T	K 77477				
	PURPOSE OF EXPENDITURE		ee Categories listed at the top of this so rage Expense	hedule) (b		outside of Texas. Complete Schedule T. TX, officeholder living expense fice	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ceholder name	Office sought		Office held	
	Date	Payee name					
	01/11/2025	Costco					
	Amount (\$) \$104.54	Payee addre 17520 Sout	ss; City; State hwest Freeway	e; Zip Code			
		Sugar Land	, TX 77478				
	PURPOSE OF EXPENDITURE		ee Categories listed at the top of this sc age Expense	hedule) (b)		nutside of Texas. Complete Schedule T. TX, officeholder living expense for office	
	Complete ONLY if direct expenditure to benefit C/Oh		ceholder name	Office sought		Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1: Sch: 2/5 Rpt: 5/10	Hrbacek, Dean
4 Date 02/25/2025	5 Payee name Fort Bend Republican Women's Club
6 Amount (\$) \$32.00	7 Payee address; City; State; Zip Code 3019 Arrowhead Dr. Sugar Land, TX 77479
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch Event
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 05/28/2025	Payee name Fort Bend Republican Women's Club
Amount (\$) \$120.00	Payee address; City; State; Zip Code 3019 Arrowhead Dr. Sugar Land, TX 77479
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EventExpene
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 02/18/2025	Payee name Hrbacek, Dean
Amount (\$) \$300.00	Payee address; City; State; Zip Code 1239 Creekford Circle
	Sugar Land, TX 77478
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimburse Fort Bend Chamber Event
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Forms provided by Texas E	thics Commission www.ethics.state.tx.us Version V4.1.0.f10d0fd8

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1: Sch: 3/5 Rpt: 6/10	2 FILER NAME Hrbacek, Dean 3 Filer ID
4 Date 02/18/2025	5 Payee name Hrbacek, Dean
6 Amount (\$) \$711.81	7 Payee address; City; State; Zip Code 1239 Creekford Circle Sugar Land, TX 77478
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimburse Chris Garcia, Bailiff retirement party
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 04/25/2025	Payee name Hrbacek, Dean
Amount (\$) \$35.07	Payee address; City; State; Zip Code 1239 Creekford Circle Sugar Land, TX 77478
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimburse for food expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 02/26/2025	Payee name NewFirst Bank
Amount (\$) \$15.00	Payee address; City; State; Zip Code P.O. BOX 470
	EL CAMPO, TX 77437
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Charges
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salarise/Magas/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER Capter a patenting of the Property of the Property

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
L	Sch: 4/5 Rpt: 7/10	Hrbacek, Dean
4	Date	5 Payee name
L	03/31/2025	NewFirst Bank
6	Amount (\$) \$15.00	7 Payee address; City; State; Zip Code P.O. BOX 470 EL CAMPO, TX 77437
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Charges
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/30/2025	NewFirst Bank
	Amount (\$) \$15.00	Payee address; City; State; Zip Code P.O. BOX 470 EL CAMPO, TX 77437
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/30/2025	NewFirst Bank
	Amount (\$) \$15.00	Payee address; City; State; Zip Code P.O. BOX 470
		EL CAMPO, TX 77437
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Charge
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 5/5 Rpt: 8/10	Hrbacek, Dean
4	Date	5 Payee name
	06/30/2025	NewFirst Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	P.O. BOX 470
		EL CAMPO, TX 77437
8	PURPOSE	
0	OF	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank Charge
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/15/2025	Rolling Dough
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.43	1827 Richmond Pkwy
		Richmond, TX 77469
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food for jury/staff.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	06/30/2025	Payee name Sugar Creek Country Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	420 Sugar Creek Blvd.
		Sugar Land, TX 77478
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXTENDITORE	Check if Austin, TX, officeholder living expense
		Event Down Payment
		Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	•
	me provided by Toyon Et	bios Commission Way ethics state by us Version V4.1.0 f10d0fd8

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

			-		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politici Credit Card Payment	Fees Office C Food/Beverage Expense Polling I By - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Overhead/Rental Expense Expense Expense s/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID	
ı	Sch: 1/1 Rpt: 9/10	Hrbacek, Dean			
4	Date	5 Payee name			
ľ	01/25/2025	El Tiempo Cantina			
6	Amount (\$)	7 Payee address; City; State; Zip C	ode		
	\$711.81	12710 Southwest Freeway			
	Reimbursement from political contributions intended	Stafford, TX 77478			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedul	e T.
	OF EXPENDITURE	Food/Beverage Expense	L	Check if Austin, TX, officeholder living expense	
			Retirement Party	y for staff for Deputy Chris Garcia, Ba	ilitt
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
_	Date	Payee name			
	01/30/2025	Fort Bend Chamber of Commerce			
_			ada		
	Amount (\$)	Payee address; City; State; Zip C	ode		
	\$300.00	445 Commerce Green Blvd.			
	Reimbursement from political contributions intended	Sugar Land, TX 77478			
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule	T.
	OF EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense	
	EXI ENDITORE		Chamber Event		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date	Payee name			
	01/29/2025	Shipley Donuts			
	Amount (\$)	Payee address; City; State; Zip C	ode		
	\$35.07				
	Reimbursement from	52, 1			
	y political contributions intended	Sugar Land, TX 77478			
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule	: T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense	
			Food for jury/staf	ff	
				0.00	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
				Varsian V/4.1.0 f10d/	05-16

OUTSTAI	NDING LOANS	SCHEDULE L
The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 10/10
FILER NAME Hrbacek, Dean		3 Filer ID
LENDER INFORMATION	4 Name of lender Hrbacek, Dean 5 Lender address; City; State; Zip Code 1239 Creekford Cir. Sugar Land, TX 77478	
GUARANTOR INFORMATION	6 Name of guarantor	
X not applicable	7 Guarantor address; City; State; Zip Code	