CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Comn	nission Filers)	2 Total pages filed:	OFFICE	USEONLY		
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr. Brian NICKNAME LAST Midd	SUFFIX	Date Received	MOV 5 2025 F		
4 ORIGINAL REPORT TYPE	January 15 Run	off Final report	Date Hand-delivered	or Date Postmarked		
=	30th day before election 15th		Receipt #	Amount \$		
5 ORIGINAL PERIOD	Month Day Year	Month Day Y	Date Processed			
COVERED	07 / 01 / 2024 тн		Date Imaged			
6 EXPLANATION OF CO	PRRECTION					
Added corporate was made on Sc	addresses for vendors on hedule F4.	Schedule F1. Added date	e credit card payn	nent		
	ear, or affirm, under penalty of	perjury, that this corrected re	port is true and corr	ect.		
	ck ONLY if applicable:					
Semiannual mislead or to	reports: I swear, or affirm, that to misrepre-sent the information o	he original report was made in g ontained in the report.	ood faith and without	an intent to		
	ts: I swear, or affirm, that I am fill ed that the report as originally file the report as originally filed was r	d is inaccurate or incomplete. I	than the 14th businesswear, or affirm, that a	ss day after the any error or		
FENTRA WARSAY RANDOLPHI Notary Public, State of Toxics Comm. Expires 04 29 2026 (Ty Affida vit Notary IID 1129 2013 20						
NOTARY STAMP/SEA	before me by 57100 M	1	he 5th day of	May.		
Who I	20 15 , to certify which, witness my hand and seal of office. The state of officer administering oath to the state of officer administering oath. Signature of officer administering oath. Title of officer administering oath.					
Signature of officer administ	ening datii Printed name	of officer administering oath	Title of office	administering battl		
(2) Unsworn Declarat	ion	OR				
My name is		, and my date of birth	r is			
My address is		, and my date of bits				
, 444.000 10	(street)	(city)	(state) (zip code)	(country)		
Executed in	County, State of	, on the day of	onth) , 20(year)			
		Signature of Ca	ndidate/Officeholder (Decl	arant)		
Remember To Atta	ch Any Part Of The Campaign	Finance Report Form Needed	To Report And Expla	in Corrections		

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/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: 1/24 Rpt: 6/32	Middleton,						
4	Date	5 Payee name	e					
	07/08/2024	Academy S	•					
6	Amount (\$) \$142.74	7 Payee address 16610 Soc	ess; City; State; thwest Fwy,	Zip Co	de			
		Sugar Lan	d, TX 77479					
8	PURPOSE	(a) Category (See Categories listed at the top of this scho	edule)	(b) Description			
	OF EXPENDITURE	Event Exp	ense				de of Texas. Complete Schedule T.	
					supplies for 6		officeholder living expense	
					supplies for e	vei	п	
_	0 1 2 0 11 11 11 11	0 "1 1 (0)	r					
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name O	Office sou	int .		Office held	
	Date	Payee name	9					
	07/22/2024	Adobe.con	ı					
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	de			
	\$82.64	345 Park A	• •					
	402.0	0.0.0.						
		San Jose,	CA 95110					
	PURPOSE	(a) Category (5	See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE	Fees					de of Texas. Complete Schedule T.	
	EXPENDITORE					, TX,	officeholder living expense	
					Software fee			
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name O	office soug	jht		Office held	
	Date	Payee name)					
	08/21/2024	Adobe.com						
	Amount (\$)	Payee addre	ess; City; State;	Zip Cod	de			2.00
	\$82.24	345 Park A		·				
	70212							
		San Jose,	CA 95110					
	PURPOSE	(a) Category (s	See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE	Fees					de of Texas. Complete Schedule T.	
	EXPENDITORE					, TX,	officeholder living expense	
					software fee			
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name O	office soug	yht		Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 2/24 Rpt: 7/32 Middleton, Brian 4 Date Payee name 09/23/2024 Adobe.com 6 Amount (\$) Payee address; City; State; Zip Code \$82.24 345 Park Avenue San Jose, CA 95110 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense software fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/28/2024 Adobe.com Payee address; Amount (\$) City; State; Zip Code \$82.24 345 Park Avenue San Jose, CA 95110 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fees Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 11/21/2024 Adobe.com Amount (\$) Payee address; City; State; Zip Code \$82.24 345 Park Avenue San Jose, CA 95110 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fee Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

\vdash		EXPENDITURE CATEGORIES FOR BOX 8(a)				_
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburse Fees Office Overhead/Rental Expense Gift/Awards/Memorials Expense Printing Expense	ense		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 F1:	FILER NAME		3	Filer ID	_
_	Sch: 3/24 Rpt: 8/32	Middleton, Brian			THO ID	
4	Date	Payee name				_
	12/23/2024	Adobe.com				
6	Amount (\$)	Payee address; City; State; Zip Code			N	_
	\$82.24	345 Park Avenue				
		San Jose, CA 95110				
8	PURPOSE	(b) Description (See Categories listed at the top of this schedule)	on			_
	OF EXPENDITURE	Fees Check i	Austin		ide of Texas. Complete Schedule T. , officeholder living expense	
		software	тее			
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought			Office held	_
	Date	Payee name				_
	12/17/2024	Ally				
	Amount (\$)	Payee address; City; State; Zip Code				_
	\$1,424.37	P.O. Box 660371				
		Dallas, TX 75266				
	PURPOSE OF EXPENDITURE	Check ii	travel of Austin, t to C	re.	ide of Texas. Complete Schedule T. , officeholder living expense dit Card Issuer for political ted on schedule F4	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought			Office held	_
	Date	Payee name				=
	10/29/2024	Amazon.com				
	Amount (\$)	Payee address; City; State; Zip Code				_
	\$18.37	410 Terry Avenue North				
		Seattle, WA 98109				
	PURPOSE OF EXPENDITURE	Office Overflead/Nerital Experise	travel o	TX,	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought			Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee Credit Card Payment 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 Sch: 4/24 Rpt: 9/32 Middleton, Brian 4 Date Payee name 12/23/2024 Amazon.com Payee address: 6 Amount (\$) City: State: Zip Code \$27.33 410Terry Avenue North Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense office supplies Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/24/2024 Amazon.com Payee address; Amount (\$) City; State; Zip Code \$138.12 410 Terry Avenue North Seattle, WA 98109 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense uniforms Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 12/30/2024 Amazon.com State; Zip Code Amount (\$) Payee address; City: \$130.24 410 Terry Avenue North Seattle, WA 98109 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) **OF** Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense office supplies Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Constributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense 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. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 5/24 Rpt: 10/32 Middleton, Brian 4 Date Payee name 12/31/2024 Amazon.com Amount (\$) Payee address; State; Zip Code \$76.47 410 Terry Avenue North Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/22/2024 Applian Technologies Amount (\$) Pavee address: State: Zip Code \$69.85 950 N. Collier Blvd Marco Island, FL 34145 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fee Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 09/03/2024 Campaign Partner.com State; Zip Code Payee address; Amount (\$) City; \$49.00 P.O. Box 118 Still River, MA 01467 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense fee for website Office held Complete ONLY if direct Office sought Candidate/Officeholder name expenditure to benefit C/OH

		EXPENDITURE CATEGORIES FOR BOX 8(a)	_
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
ļ_	Total pages Cabadula F1:	The Instruction Guide explains how to complete this form.	_
ľ	Total pages Schedule F1:		
Ļ	Sch: 6/24 Rpt: 11/32	Middleton, Brian	
4	Date 10/01/2024	5 Payee name Campaign Partner.com	
6	Amount (\$) \$49.00	7 Payee address; City; State; Zip Code P.O. Box 118 Still River, MA 01467	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee for website	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_
	Date	Payee name	_
	11/01/2024	Campaign Partner.com	
	Amount (\$) \$49.00	Payee address; City; State; Zip Code P,O. Box 118 Still River, MA 01467	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website fee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 12/02/2024	Payee name Campaign Partner.com	
	Amount (\$) \$49.00	Payee address; City; State; Zip Code P.O. Box 118	
		Still River, MA 01467	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website fee	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
Fo	rms provided by Texas E	thics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ac	e.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Printing Expense Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 7/24 Rpt: 12/32 Middleton, Brian 4 Date Payee name 12/31/2024 Central Fort Bend Chamber of Commerce 6 Amount (\$) Payee address; City; State: Zip Code \$355.00 4120 Avenue H Rosenberg, TX 77469 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/05/2024 Constant Contact.com Payee address; Amount (\$) City; State; Zip Code \$86.35 1601 Trapelo Road Waltham, MA 02451 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T. OF Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Fee for email blast service Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Pavee name 08/05/2024 Constant Contact.com Payee address; State; Zip Code Amount (\$) City; \$86.35 1601 Trapelo Road Waltham, MA 02451 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fee Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

L		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 8/24 Rpt: 13/32	2 FILER NAME Middleton, Brian
4	Date 09/11/2024	5 Payee name Constant Contact.com
6	Amount (\$) \$86.35	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense software fee for email blasts
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/07/2024	Payee name Constant Contact.com
	Amount (\$) \$86.35	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense software fee for email blast
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 11/05/2024	Payee name Constant Contact.com
	Amount (\$) \$86.35	Payee address; City; State; Zip Code 1601 Trapelo Road
		Waltham, MA 02451
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense software fee for email blasts
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense L Fees C Food/Beverage Expense C ty - Gift/Awards/Memorials Expense P	oan Repayment/Reimbursement office Overhead/Rental Expense olling Expense rinting Expense alaries/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 F1:		3	B Filer ID
Sch: 9/24 Rpt: 14/32	Middleton, Brian		1110112
4 Date	5 Payee name		
12/05/2024	Constant Contact.com		
6 Amount (\$) \$86.35	7 Payee address; City; State; 2 1601 Frapelo Road Waltham, MA 02451	Zip Code	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedu	(b) Description	
OF EXPENDITURE	Fees		tside of Texas, Complete Schedule T.
		software fee fo	X, officeholder living expense
		0011776110110	Toman blades
Complete ONLY if direct expenditure to benefit C/O		ce sought	Office held
Date	Payee name		
08/28/2024	Galls		
Amount (\$) \$54.11	Payee address; City; State; 71 Esplanade	ip Code	
	Houston, TX 77060		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Advertising Expense	Check if travel out	tside of Texas. Complete Schedule T. X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol		ce sought	Office held
Date	Payee name	·	
07/18/2024	Gannett Newspaper		
Amount (\$)	Payee address; City; State; Z	ip Code	
\$21.31	7950 Jones Branch Drive		
	McClean, VA 22107		
PURPOSE	(a) Category (See Categories listed at the top of this schedul		
OF EXPENDITURE	Fees	Check if travel out	tside of Texas. Complete Schedule T. X, officeholder living expense Otion
Complete ONLY if direct expenditure to benefit C/OI		ce sought	Office held
			Version VA 1.0 Edd2coc

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Travel Out of District			
1 Total pages Schedule F1	2 FILER NAME 3 Filer ID			
Sch: 10/24 Rpt: 15/32	Middleton, Brian			
4 Date 09/18/2024	5 Payee name Gannett Newspaper			
6 Amount (\$) \$21.31	7 Payee address; City; State; Zip Code 7950 Jones Branch McClean, VA 22107			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee for subscription			
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH			
Date	Payee name			
11/04/2024	Gannett Newspaper			
Amount (\$) \$21.31	Payee address; City; State; Zip Code 7950 Jones Branch Drive McClean, VA 22107			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense subscription fee			
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH			
Date 12/02/2024	Payee name Gannett Newspaper Payee address; City; State; Zip Code			
Amount (\$) \$20.99	7950 Jones Branch Drive McClean, VA 22107			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense subscription fee			
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH			
Forms provided by Toyas	orms provided by Toxas Ethics Commission MAMM ethics state by us Version V4.1.0.5dd2ace2			

L		EVDENDITURE CATECORIES FOR DOV 6/4)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID
1	Sch: 11/24 Rpt: 16/32	Middleton, Brian
4	Date	5 Payee name
Ì	07/15/2024	Guard Box Storage
6	Amount (\$) \$489.00	7 Payee address; City; State; Zip Code 2935 FM 521 Fresno, TX 77545
•	DUDDOCE	•
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee for storage
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/16/2024	Guard Box Storage
	Amount (\$) \$489.00	Payee address; City; State; Zip Code 2935 FM 521 Fresno, TX 77545
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee for storage
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/17/2024	Guard Box Storage
	Amount (\$) \$489.00	Payee address; City; State; Zip Code 2935 FM 521
		Fresno, TX 77545
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee for storage
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1. Total pages Cabadula F1.	<u> </u>
1 Total pages Schedule F1: Sch: 12/24 Rpt: 17/32	2 FILER NAME Middleton, Brian
4 Date	5 Payee name
12/20/2024	Guard Box Storage
6 Amount (\$) \$504.00	7 Payee address; City; State; Zip Code 2935 FM 521 Fresno, TX 77545
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense storage fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/17/2024	HEB
Amount (\$) \$68.41	Payee address; City; State; Zip Code 19900 Southwest Freeway Sugar Land, TX 77479
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food and beverages
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/23/2024	HEB
Amount (\$) \$164.85	Payee address; City; State; Zip Code 19900 Southwest Freeway
	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 Supplies for office Christmas celebration
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Forms provided by Toyos F	this Commission Wersian V4.1.0 5dd2ace2

		EXPENDITURE CATEGORIES FOR BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)		
L		The Instruction Guide explains how to complete this form.		
	Total pages Schedule F1: Sch: 13/24 Rpt: 18/32	2 FILER NAME Middleton, Brian 3 Filer ID		
4	Date 07/01/2024	5 Payee name Hilton Hotel Austin		
6	\$ Amount (\$) \$292.81	7 Payee address; City; State; Zip Code 505 E 4th Street Austin, TX 78701		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Attendance at conference		
g	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held		
Г	Date	Payee name		
l	07/29/2024	Hostway.com		
	Amount (\$) \$10.61	Payee address; City; State; Zip Code 100 N. Riverside, Suite 800		
L		Chicago, IL 60606		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software fee		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
	Date 08/28/2024	Payee name Hostway.com		
	Amount (\$) \$10.61	Payee address; City; State; Zip Code 100 N. Riverside, Suite 800 Chicago, IL 60606		
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense software fees		
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held		
-/	orms provided by Texas Fi	thics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2		

	EXPENDITURE CATEGORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
Sch: 14/24 Rpt: 19/32	Middleton, Brian	
4 Date 09/30/2024	5 Payee name Hostway.com	
6 Amount (\$) \$10.61	7 Payee address; City; State; Zip Code 101 N. Riverside, Suite 800 Chicago, IL 60606	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/28/2024	Hostway.com	
Amount (\$) \$10.61	Payee address; City; State; Zip Code 100 N. Riverside, Suite 800 Chicago, IL 60606	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software fee	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/29/2024	Hostway.com	
Amount (\$) \$10.61	Payee address; City; State; Zip Code 100 N. Riverside, Suite 800	
	Chicago, IL 60606	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website fee	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	this Commission Varsion VA 1.0 5dd2as	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 15/24 Rpt: 20/32 Middleton, Brian 4 Date Payee name 12/30/2024 Hostway.com 6 Amount (\$) Payee address: City: State; Zip Code \$10.61 100 N. Riverside Suite 800 Chicago, IL 60606 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/26/2024 Katy Democrats.com Amount (\$) Payee address; City; State; Zip Code \$150.00 24111 Haywards Crossing Ln Katy, TX 77494 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Expense for event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/23/2024 Norton.com Amount (\$) Payee address; City: State; Zip Code \$25.68 60 E Rio Salado Pkwy Suite 100 Tempe, AZ 85281 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 16/24 Rpt: 21/32	Middleton, Brian
4	Date	5 Payee name
l	07/25/2024	Palm San Antonio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.38	233 E Houston
		San Antonio, TX 78205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverage for meeting
		1 ood and beverage for meeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
F	Date	Payee name
	11/21/2024	Public Data.com
Т	Amount (\$)	Payee address; City; State; Zip Code
	\$42.76	7750 N. Mac Arthur Blvd
		Irving, TX 75063
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense software fee
		Soliware lee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	07/10/2024	San Antonio Express News.com
┝		Payee address; City; State; Zip Code
	Amount (\$) \$27.72	420 Btroadway St
	\$21.12	420 Billoadway St
		San Antonio, TX 78205
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Categories listed at the top of this scheduley Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Fee for subscription
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to belief C/Or	

\vdash							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Political Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID					
•	Sch: 17/24 Rpt: 22/32	Middleton, Brian					
4	Date	5 Payee name					
	08/07/2024	San Antonio Express News.com					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$27.72	420 Broadway Street San Antonio, TX 78205					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Fees Check if travel outside of Texas, Complete Schedule T.					
		Check if Austin, TX, officeholder living expense					
		fee for subscription					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	09/04/2024	San Antonio Express News.com					
	Amount (\$)	ayee address; City; State; Zip Code					
	\$27.72	420 Broadway					
		San Antonio, TX 78205					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Fees Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		fee for subscription					
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	10/02/2024	San Antonio Express News.com					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$27.72	420 Broadway Street					
		San Antonio, TX 78205					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Fees Categories issed at the top of this scriedule) Check if travel outside of Texas, Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		fee for subscription					
	Commission ONE VIII allows	Candidate/Officeholder name Office country					
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held					
	- Apericitare to beliefit G/Of	•					
	ms provided by Texas F	thics Commission www.ethics.state.tx.us Version.V4.1.0.5dd2ace					
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Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense						
Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District y - Git/Awards/Memorials Expense Printing Expense Travel Out of District						
Credit Card Payment	The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID						
Sch: 18/24 Rpt: 23/32	Middleton, Brian						
4 Date	5 Payee name						
11/27/2024	San Antonio Express News.com						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$27.72	\$27.72 420 Broadway Street						
	San Antonio, TX 78205						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	subscription fee						
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
11/04/2024	Streamyard.com						
Amount (\$)	Payee address; City; State; Zip Code						
\$240.00	169 Madison Ave, Suite 11218						
	New York, NY 10016						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.						
	Check if Austin, TX, officeholder living expense software platform fee						
	Solitivate platform for						
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
Date 07/01/2024	Payee name Target						
Amount (\$)	Payee address; City; State; Zip Code						
\$191.44	6000 Highway 6						
	Missouri City, TX 77459						
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. Check if Austin, TX, officeholder living expense						
	Supplies for event						
	обържания и постанувания и постанувания и постанувания и постанувания и постанувания и постанувания и постанув Постанувания и постанувания и постанувания и постанувания и постанувания и постанувания и постанувания и постан						
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
Forms provided by Tayas F	thics Commission Was ethics state ty us Version V4.1.0.5dd2ace2						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 19/24 Rpt: 24/32 Middleton, Brian 4 Date Payee name 09/16/2024 Uber.com 6 Amount (\$) Payee address; City; State; Zip Code \$36.88 1725 Third Street San Francisco, CA 94158 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense fee for uber Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/01/2024 Vonage.com Amount (\$) Payee address; City; State; Zip Code \$66.78 101Crawfords Corner Road Suite 2416 Holmdel, NJ 07733 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense VOIP fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/31/2024 Vonage.com Payee address; City; State; Zip Code Amount (\$) \$66.94 101 Crawfords Corner Road Holmdel, NJ 07733 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense VOIP fee Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
4 Total pages Cabadula Etc		
4 Date	5 Payee name	
09/03/2024	Vonage.com	
6 Amount (\$) \$66.69	7 Payee address; City; State; Zip Code 101 Crawfords Corner Road	
	Holmdel, NJ 07733	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software fee	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
10/01/2024	### Advantage Spense Accounting Basinship Contribution Downster Made 8 / Page	
Amount (\$) \$67.12	101 Crawfords Corner Road Suite 2416	
OF	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Date	Payee name	
10/31/2024	Vonage.com	
Amount (\$) \$67.27	101 Crawfords Corner Road Suite 2416	
OF	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O		

	EXPENDITURE CATEGORIE	S EOR BOY 9(4)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense	oan Repayment/Reimbursement office Overhead/Rental Expense ofling Expense rinting Expense alaries/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 F1:	The Instruction Guide explains how	3 Filer ID
Sch: 21/24 Rpt: 26/32	Middleton, Brian	3 Filer ID
4 Date	5 Payee name	
12/02/2024	Vonage.com	
6 Amount (\$) \$67.27		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense VOIP fee
Complete ONLY if direct expenditure to benefit C/OH		ce sought Office held
Date	Payee name	
12/31/2024	Vonage.com	
Amount (\$) \$67.27	Payee address; City; State; Z 101 Crawfords Corner Road Suite 2416 Holmdel, NJ 07733	Cip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ce sought Office held
Date	Payee name	
07/16/2024	dropbox.com	
Amount (\$) \$12.78	Payee address; City; State; Z 1800 Owens Street	ip Code
	San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee for software
Complete ONLY if direct expenditure to benefit C/OF		e sought Office held
	shine Commission	Vorsion V/4.1.0 Edd2acs

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
4 Total names Schoolide Etc.	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 22/24 Rpt: 27/32	2 FILER NAME Middleton, Brian
4 Date	
08/16/2024	5 Payee name dropbox.com
6 Amount (\$) \$12.78	7 Payee address; City; State; Zip Code 1800 Owens Street San Francisco, CA 94158
8 PURPOSE	
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fee for software
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/17/2024	dropbox.com
Amount (\$) \$12.78	Payee address; City; State; Zip Code 1800 Owens Street San Francisco, CA 94158
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense software fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/17/2024	dropbox.com
Amount (\$) \$12.78	Payee address; City; State; Zip Code 1800 Owens
	San Francisco, CA 94158
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense software fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 23/24 Rpt: 28/32 Middleton, Brian 4 Date Payee name 11/18/2024 dropbox.com 6 Amount (\$) Payee address; City; State; Zip Code \$12.78 1800 Owens San Francisco, CA 94158 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/16/2024 dropbox.com Amount (\$) Payee address; City; State; Zip Code \$12.78 1800 Owens Street San Francisco, CA 94158 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense software fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/18/2024 godaddy.com City; Amount (\$) Payee address; State; Zip Code \$288.39 2155 E. Go Daddy Way Tempe, AZ 85284 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense website fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense 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 B Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Salaries/	Expens Wages	s/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NA	ME			3	Filer ID	
L	Sch: 24/24 Rpt: 29/32	Middletor	n, Brian					
4	Date	5 Payee nar	me					
	12/24/2024	godaddy.	com					
6	Amount (\$)	7 Payee add	lress; City;	State; Zip C	ode			
ı	\$255.71	2155 E G	o Daddy Way					
ı		Tempe, A	Z 85284					
8	PURPOSE				(h)	Description		
ľ	OF	Fees	(See Categories listed at the to	p of this schedule)	(5)	Description Check if travel out	side of Texas. Complete Schedule T.	
	EXPENDITURE	1 003				_	K, officeholder living expense	
						software fee for	website	
9	Complete ONLY if direct		Officeholder name	Office sou	ight		Office held	
	expenditure to benefit C/OI	-1						
	Date	Payee nan	ne					
	12/24/2024	godaddy.						
Н	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode			
	\$105.48	,	o Daddy Way					
	,							
		Tempe, A	7 85284					
_	DUDDOCE				(1-)			
	PURPOSE OF		(See Categories listed at the top	p of this schedule)	(a)	Description Check if travel out	side of Texas. Complete Schedule T.	
	EXPENDITURE	Fees					(, officeholder living expense	
						software fee for		
	Complete ONLY if direct	Candidate/C	fficeholder name	Office sou	ght		Office held	
	expenditure to benefit C/O	1						
	Date	Payee nam	ne					
	09/09/2024	quizlet.co						
	Amount (\$)	Payee add	ress; City;	State; Zip Co	de			
	\$38.37	123 Town	send					
		Suite 600						
			cisco, CA 94107					
	DUDDOOF.				(%)			
	PURPOSE OF		(See Categories listed at the top	o of this schedule)	(D)	Description Check if travel outs	side of Texas. Complete Schedule T.	
	EXPENDITURE	Fees					t, officeholder living expense	
						fee for software		
	Complete ONLY if direct	Candidate/O	fficeholder name	Office sou	ght		Office held	
	expenditure to benefit C/OF	1						

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made B Candidate/Officeholder/Politica	al Committee Legal Serv		nting Expense laries/Wages/Contract Labor to complete this form.	Travel Out of District OTHER (enter a category	not listed a	above)	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID			
Sch: 1/3 Rpt: 30/32	Middleton, Brian						
4 CREDIT CARD ISSUER	Name of fina	ncial institution Ally	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A C	\$			
6 PAYMENT	(a) Amount Charged \$616.58	(b) Date of Charge 12/14/2024	(c) Date(s) Credit Car 12/17/2024	d Issuer Paid			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Expose Excellence Youth		4203 Glenshadow Katy, TX 77494	Court			
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	Contributions/Donations Made By Candidate/Officeholder/Political Committee		Donation at fundraiser for foundation				
Non-Political			Check if A	ustin, TX, officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer Paid			
	\$279.89	12/13/2024	12/17/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Intercontinental Hotel New		444 St. Charles Av	e			
			New Orleans, LA 7	0130			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Hotel at conference)			
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder living expe	ense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer Paid			
raimen	\$250.00	10/11/2024	12/17/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Cullen College		3100 Calhoun				
			Houston, TX 77004				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top of this schedule)		Donation at fundraising event for college				
X Political	Contributions/Donatio Candidate/Officeholde						
Non-Political		of Texas, Complete Schedule T.					
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held			
expenditure to benefit C/OH							

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit	By - Gift/Award ical Committee Legal Ser		Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a cate		above)		
		truction Guide explains h	now to complete this form.					
1 Total pages Schedule F4	: 2 FILER NAME			3 Filer ID				
Sch: 2/3 Rpt: 31/32	Middleton, Brian							
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEM					
ISSUER	see p	revious	EXPENDITURES CHARGED TO A C	REDIT S				
			CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid				
	\$529.80	11/28/2024	12/17/2024					
7 PAYEE	(a) Payee name	(a) Payee name		City,	State,	Zip Code		
	=		2006 Pecan Forest	2006 Pecan Forest Court				
Thankful Ones								
				6				
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE		(See Categories listed at the top of this schedule) Contributions/Donations Made By		for Thanksgiving 5	K Event			
x Political		Candidate/Officeholder/Political Committee						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	stin, TX, officeholder living e	expense			
9 Complete ONLY if direct	Candidate/Officeholde	r name O	ffice sought	Office held				
expenditure to benefit C/OF	1							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	(See Categories listed at the top	of this schedule)						
Political								
Non-Political	(7)	of Texas. Complete Schedule						
Complete ONLY if direct	Candidate/Officeholde	name Of	ffice sought	Office held				
expenditure to benefit C/OF								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	1							
	1 2							
	(a) Catagoni		(b) Description					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
Political								
Non-Political	(1)	of Texas. Complete Schedule		Office hold				
Complete ONLY if direct	Candidate/Officeholder	riame Of	ffice sought	Office held				
expenditure to benefit C/OF								

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Ser		Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a cate)		
		truction Guide explains	how to complete this form.	I		
1 Total pages Schedule F4:				3 Filer ID		
Sch: 3/3 Rpt: 32/32	Middleton, Brian					
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$		
6 PAYMENT	(a) Amount Charged \$255.08	(b) Date of Charge 09/19/2024	(c) Date(s) Credit Card Issu	ier Paid		
7 PAYEE	(a) Payee name Moody Gardens H	otel	(b) Payee address; 7 Hope Boulevard Galveston, TX 77554	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District		Hotel at TDCAA Confere	ence		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin, T.	X, officeholder living e	xpense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name (Office sought	Office held		