#### CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 3 CANDIDATE/ MS / MRS / MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Mr. Trey NAME eceived CEIVED **NICKNAME** LAST SUFFIX Holleway 6 2024 ADDRESS / PO BOX; APT / SUITE # 4 CANDIDATE / CITY: STATE ZIP CODE **OFFICEHOLDER** P.O. Box 132, Chappell Hill, TX 77426 MAILING **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER **EXTENSION OFFICEHOLDER** (281)932-6702 PHONE Receipt # MS / MRS / MR FIRST 6 CAMPAIGN **TREASURER** Roger Mr. Date Proce NAME NICKNAME LAST SUFFIX Date Imag Metzger STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CAMPAIGN TREASURER 3560 Bluebonnet Blvd, Brenham, TX 77833 **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER **EXTENSION** 8 CAMPAIGN TREASURER PHONE 2510272 (979 9 REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Day Month Day Year COVERED 12 31 23 12 4 23 THROUGH ELECTION DATE ELECTION TYPE 11 ELECTION Primary Runoff Other Month Day Year Description General Special 24 3 5 OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE Washington County Sheriff Washingon Co. Precinct 2 - Constable THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2 Reset Form** CS.S Revised 8/17/2020 **Reset Page** Forms provided by Texas Ethics Com

FORM C/OH

CANDIDATE / OFFICEHOLDER

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

15 C/OH NAME	Trey Hollowry 10	Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 1,120.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,950.00
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,303.15
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST IS OF REPORTING PERIOD	\$ 4,766.85
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TI LAST DAY OF THE REPORTING PERIOD	* 0.00
(1) Affidavit	Signature of Candi Please complete either option below:	date or Officeholder
NOTARY STAMP/SEA		
Sworn to and subscribed	before me by this the	day of,
20, to certify	which, witness my hand and seal of office.	
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath
<b>2000年100日</b>	OR OR	
(2) Unsworn Declaration	on	
My name is Greens	D. "Trey" Holleway III , and my date of birth is	09/05/1969
My address is 2430		1 71833 USA
	(street) (city) (state	
Executed in Washing	County, State of 1 tx45 , on the 16 day of (month)	, 20 <u>a 4</u> . (year)
	Com 13 Mary	Officeholder (Deelcoort)
	Signature of Candidate	e/Officeholder (Declarant)

# SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

19	Trey Holloway 20 Filer ID (Ethics Co	mmission Filers)
	SCHEDULE SUBTOTALS V	SUBTOTAL AMOUNT
1.	SCHEDULEA1: MONETARY POLITICAL CONTRIBUTIONS	\$ 13,070.00
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	\$ 8,303.15
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	\$

SCHEDULE A1

The	Instruction Guide explains how to complete t	his form.	1 Total pages Schedule A1:
Trey Holle		CONTROL MODERNANT LONG	3 Filer ID (Ethics Commission Filers)
4 Date 12/05/2023	5 Full name of contributor out-of-state out-	7 Amount of contribution (\$)  500.00	
8 Principal occu Routt Family	pation / Job title (See Instructions) Farms	9 Employer (See Instruct	tions)
Date 12/05/2023	Noel & Carol Rainey  Contributor address; City;  8521 Sauney Chapel Road, Chapp	State; Zip Code	Amount of contribution (\$)  100.00
Principal occup	Deation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 12/05/2024	Full name of contributor out-of-state in Martin & Kristen Pepper  Contributor address; City;  448 West 19th, Housto	State; Zip Code	Amount of contribution (\$)  750.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct Self-Employed	ions)
Date 12/05/2023	Full name of contributor out-of-state Full name & Antoinette Mather  Contributor address; City;  3527 Bluebonnet Blvd, Brenh	State; Zip Code	Amount of contribution (\$)  50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES		

SCHEDULE A1

The	Instruction Guide expla	ins how to complete	this form.		1 Total pages S	chedule A1:
2 FILER NAME Trey Holle	eway				3 Filer ID (Ethio	es Commission Filers)
4 Date 12/05/2023	5 Full name of contribution Dennis & Kristina 6 Contributor address; 5530 Doe Run	a Newton  City;	State		7 Amount of co	50.00
8 Principal occu	pation / Job title (See Inst	ructions)	<b>9</b> Em	ployer (See Instruc	ctions)	
Date 12/05/2023	Derrell & Betty  Contributor address: 3351 Jasmine	Fogarty  City: St., Brenham,	TX 778		10	00.00
Principal occup	pation / Job title (See Instr	uctions)	Retire	ployer (See Instruc	ctions)	
Date 12/05/2023	John & Gayle  Contributor address; P.O. Box 369,	Doak City;	State	; Zip Code		00.00
Principal occup	pation / Job title (See Instr	ructions)	Retire	ployer (See Instruc ed	ctions)	
Date 12/05/2023	Full name of contributed Helen Hink  Contributor address: P.O. Box 66, 0	City;		; Zip Code	1.0	00.00
Principal occup	pation / Job title (See Instr	ructions)	Retire	ployer (See Instruc	ctions)	
Forms provided by	If contributor is out-of-			uide for additional	reporting requirer	nents.  Revised 8/17/2020
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SCHEDULE A1

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

The	Instruction Guide explains how to complete th	in form	1 Total pages Schedule A1:
2 FILER NAME Trey Holle		is form.	3 Filer ID (Ethics Commission Filers)
4 Date 12/05/2023	Full name of contributor out-of-state Property out-of-state Proper	State; Zip Code	7 Amount of contribution (\$) 250.00
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction Self	ions)
Date 12/05/2023	Full name of contributor out-of-state Pour Margie & Clyde Ricks  Contributor address; City;  10039 FM 2621 Rd, Brenham,	State; Zip Code	Amount of contribution (\$)  1,000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction Self	ions)
Date 12/05/2023	Full name of contributor out-of-state Pour JP & Sharlie Douglass-Hall  Contributor address; City;  8200 FM 2447, Chappell Hill,	State; Zip Code	Amount of contribution (\$)  250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction  J Hill Properties	ions)
Date 12/05/2023	Full name of contributor out-of-state Parker  Contributor address; City;  P.O. Box 2255, Brenha	State; Zip Code	Amount of contribution (\$)  150.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	ATTACH ADDITIONAL COPIES If contributor is out-of-state PAC, please see Ins		

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SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME Trey Holle	eway	3 Filer ID (Ethics Commission Filers)	
4 Date 12/05/2023	Full name of contributor out-of-state PAC Rodney & Becky Hanath  6 Contributor address; City; 4455 FM 1155, Chappell Hill, T	7 Amount of contribution (\$)  100.00	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Rodney's General R			
Date 12/05/2023	Ray & Annette Ballantine-Segu  Contributor address; City;  2017 Dryden Rd., Houston, TX	ra State; Zip Code	Amount of contribution (\$)  250.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 12/05/2023	Full name of contributor out-of-state PAC  Jeffery & Gail Cole  Contributor address; City;  700 Walnut Hill Dr., Brenham, 7	State; Zip Code	Amount of contribution (\$)  1,000.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction Retired	ons)
Date 12/05/2023	Full name of contributor out-of-state PACE  Emil Mokry  Contributor address; City;  312 W. Vulcan, Brenhan	State; Zip Code	Amount of contribution (\$)  500.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction Retired	ons)
	ATTACH ADDITIONAL COPIES Of the contributor is out-of-state PAC, please see Instru		

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SCHEDULE A1

The	Instruction Guide	explains how to c	omplete this	s form.		1 Total p	ages Schedule A1:
Trey Holle						3 Filer ID	(Ethics Commission Filers)
4 Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:)      Bob Funk				250.00		
8 Principal occu	upation / Job title (See	e Instructions)		9 Emp	oloyer (See Instruc	ctions)	
Date 12/08/2023	Full name of cor Jeff & Sand Contributor add 7802 Newm	ra Presnal	city;	State;			250.00
Principal occup	pation / Job title (See	Instructions)		Self	loyer (See Instruc	tions)	
Date 12/10/2023	Full name of con Brandi Con Contributor addi 608 Spence	way ress;	city;	State;	Zip Code		500.00
Principal occup	pation / Job title (See	Instructions)		Self	oloyer (See Instruc	etions)	
Date 12/11/2023	Full name of cor Howard Okak Contributor add	oyashi ress;	out-of-state PAG City;  Or., Mag	State;	Zip Code TX 77355	4	,500.00
Principal occup	pation / Job title (See	Instructions)		self	oloyer (See Instruc	ctions)	
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SCHEDULE A1

The	Instruction Guide e	xplains how to com	plete this form.	1 Total pages Schedule A1:
Trey Holle				3 Filer ID (Ethics Commission Filers)
4 Date 12/11/2023	5 Full name of con Sandra Kindt 6 Contributor addr 1205 FM 39			7 Amount of contribution (\$) 100.00
8 Principal occu	pation / Job title (See	Instructions)	9 Employer (See Inst Retired	ructions)
Date 12/12/2023	Full name of con Bill McMean Contributor addr P.O. Box 35	S		Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See	nstructions)	Employer (See Insti	ructions)
Date 12/15/2023	Coy Sevier  Contributor addre	ess; City	f-state PAC (ID#:; State; Zip Code happell Hill, TX 77426	Amount of contribution (\$) 50.00
Principal occup	pation / Job title (See	nstructions)	Employer (See Instruction Heritage Hall	ructions)
Date 12/16/2023	Full name of cont Elizabeth & Re  Contributor addr  302 Comma	obert Rigney  ess;  City	State; Zip Code	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See	nstructions)	Employer (See Insti	ructions)
			COPIES OF THIS SCHEDULE AS see Instruction guide for addition	
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SCHEDULE A1

Revised 8/17/2020

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The	nstruction Guide explains how to complete this form	n.	1 Total pages Schedule A1:
Trey Holle	way		3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2023	Full name of contributor out-of-state PAC (ID#_Kenneth D. McGuyer  Contributor address; City; St. 6000 Valley View Ln., Brenham, T.	ate; Zip Code	7 Amount of contribution (\$)  500.00
8 Principal occup	ation / Job title (See Instructions)  9 Self	Employer (See Instructio	ns)
Date 12/19/2023	Full name of contributor out-of-state PAC (ID#:_Mark & Carol Madeley  Contributor address; City; St  3027 Jasmine St., Brenham, TX 7	ate; Zip Code	Amount of contribution (\$)  500.00
Principal occupa		Employer (See Instructio	ns)
Date 12/19/2023	Full name of contributor out-of-state PAC (ID#:_ Edward Williams  Contributor address; City; State PAC (ID#:_ 962 Gowan Dr., Conroe, TX 77301	ate; Zip Code I-4259	Amount of contribution (\$)  500.00
Principal occup		Employer (See Instruction mens Energy	ns)
Date 12/20/2023	Full name of contributor out-of-state PAC (ID#:_Robert & Cathleen Davis  Contributor address; City; St  6070 Gibbs Creek Rd., Chappell Hill, TX	ate; Zip Code ( 77426	Amount of contribution (\$)  250.00
Principal occup	reti	Employer (See Instruction	ns)
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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
Trey Holle	eway		3 Filer ID (Ethics Commission Filers)
4 Date 12/05/2023	5 Full name of contributor out-of-state PAC ( Jim & Susan Chisolm  6 Contributor address; City;  P.O. Box 545, Chappell Hill, TX	7 Amount of contribution (\$)  500.00	
	0: 11/1	e Employer (See Instructi	ons)
Date 12/30/2023	Full name of contributor out-of-state PAC ( Lance Logan  Contributor address; City;  7270 Kurt Dr., Brenham,	State; Zip Code	Amount of contribution (\$)  100.00
Principal occup Self	eation / Job title (See Instructions)	Employer (See Instruction Retired	ons)
Date 12/30/2023	Full name of contributor out-of-state PAC (In the Bruce Hebert  Contributor address; City;  2620 Blue Bell Ln, Brenham, TX	State; Zip Code	Amount of contribution (\$)  50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction Retired	ons)
Date	Full name of contributor out-of-state PAC (I  Contributor address; City;	State; Zip Code	Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
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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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/ The Instruction Guide explains how to	Wages/Contract Labor	Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Trey Holleway		3 Filer ID (Ethics Commission Filers)
4 Date 12/05/2023	Payee name     Washington County Republican Part	ty	
757.50	7 Payee address; 100 W. Main Street, Brenham, TX 77	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Filing Fee for V	Vashington County Sheriff
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
12/18/2023	NBD Graphics		
Amount (\$)	Payee address;	City;	State; Zip Code
1,038.88	917 S. Mason, Katy, Texas 77450		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Printing Expense	Description 30 4x4 double	sided signs
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
12/20/2023	Texas Star Winery		
Amount (\$) 443.05	Payee address; P.O. Box 545, Chappell Hill, TX 7742	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Event Expense/Beverage Expense	Kick-Off Event \	/enue & Wine
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED	DED

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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 Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel In District Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out Of District Legal Services Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Trey Holleway 4 Date 5 Payee name 12/20/2023 Texana Public Affairs 6 Amount (\$) 7 Payee address; City; State: Zip Code 2720 Bluebonnet Blvd, Brenham, TX 77833 1,144.00 (a) Category (See Categories listed at the top of this schedule) (b) Description EIN # for campaign: \$279.00 Magnetic Signs: \$325.00 Catering for Kick-Off: \$540.00 Campaign **PURPOSE** OF Expense/Reimbursement **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name 12/27/2023 KWIK KOPY Amount (\$) Zip Code Payee address; City: State: 2305 S. Day Street, Brenham, TX 77833 284.26 Category (See Categories listed at the top of this schedule) Description Printing Expense Push & Business Cards PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name 12/31/2023 Texana Public Affairs Pavee address: Amount (\$) City; State: Zip Code 2720 Bluebonnet Blvd, Brenham, TX 77833 4,551.26 Description Category (See Categories listed at the top of this schedule) Campaign Expense Campaign Signs - 4x4's, Yard signs,4x8s, **PURPOSE** Reimbursement and 4x6s. EXPENDITURE

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Complete ONLY if direct

expenditure to benefit C/OH

Candidate / Officeholder name

Check if travel outside of Texas. Complete Schedule T.

Office sought

Check if Austin, TX, officeholder living expense

Office held

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Trey Holleway		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2023	5 Payee name Stripe Payment Services		
6 Amount (\$) 84.20	7 Payee address; 354 Oyster Point Blvd., South San F	city; rancisco, CA 94	State; Zip Code 1080
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees	(b) Description On-line donate thru Dec. 31,	ion processing fees (Dec. 5 2023)
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED

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