

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Jeffrey K. Neal		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 30,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,460.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 19,513.42
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

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 administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Jeffrey K. Neal, and my date of birth is 5/18/1970.
 My address is _____, Terarkana, TX, 75501, Bowie.
(street) (city) (state) (zip code) (country)
 Executed in Bowie County, State of Texas, on the 5th day of January, 2024.
(month) (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Jeffrey K. Neal		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 29,700.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 500.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. SCHEDULE E: LOANS		\$ 0.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 10,460.34
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 8/9/23	5 Full name of contributor out-of-state PAC (ID# _____) Robert Bunch	7 Amount of contribution (\$) \$1000.00
	6 Contributor address; City; State; Zip Code [Redacted] Nash, Tx 75569	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/10/23	Full name of contributor out-of-state PAC (ID# _____) George Moore	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/10/23	Full name of contributor out-of-state PAC (ID# _____) William Morriss	Amount of contribution (\$) \$250.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/10/23	Full name of contributor out-of-state PAC (ID# _____) Maurice Orr	Amount of contribution (\$) \$500.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 8/10/23	5 Full name of contributor out-of-state PAC (ID#: _____) Kenneth Reese	7 Amount of contribution (\$) \$1000.⁰⁰
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75501	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 8/10/23	Full name of contributor out-of-state PAC (ID#: _____) David Alexander	Amount of contribution (\$) \$1000.⁰⁰
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 8/11/23	Full name of contributor out-of-state PAC (ID#: _____) Vickers Fugua	Amount of contribution (\$) \$500.⁰⁰
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75504	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 8/11/23	Full name of contributor out-of-state PAC (ID#: _____) Gregory Flanagan	Amount of contribution (\$) \$250.⁰⁰
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 8/11/23	5 Full name of contributor out-of-state PAC (ID#: _____) Auan Williamson	7 Amount of contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/11/23	Full name of contributor out-of-state PAC (ID#: _____) Sandra Shambarger	Amount of contribution (\$) \$200.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/11/23	Full name of contributor out-of-state PAC (ID#: _____) Kyle Davis	Amount of contribution (\$) \$500.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75505	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/11/23	Full name of contributor out-of-state PAC (ID#: _____) John Pickett	Amount of contribution (\$) \$1000.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 8/11/23	5 Full name of contributor out-of-state PAC (ID#: _____) Katie Andrus	7 Amount of contribution (\$) \$ 300.00
	6 Contributor address; City; State; Zip Code Texarkana, Tx 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/11/23	Full name of contributor out-of-state PAC (ID#: _____) Carl Smith	Amount of contribution (\$) \$ 200.00
	Contributor address; City; State; Zip Code Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/12/23	Full name of contributor out-of-state PAC (ID#: _____) Matt Yang	Amount of contribution (\$) \$ 1000.00
	Contributor address; City; State; Zip Code Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/12/23	Full name of contributor out-of-state PAC (ID#: _____) Cary Patterson	Amount of contribution (\$) \$ 1000.00
	Contributor address; City; State; Zip Code Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>21</u>
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date <u>8/12/23</u>	5 Full name of contributor out-of-state PAC (ID#: _____) <u>Debbie Alkire</u>	7 Amount of contribution (\$) <u>\$250.00</u>
	6 Contributor address; City; State; Zip Code [Redacted] <u>Texarkana, Tx 75503</u>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>8/14/23</u>	Full name of contributor out-of-state PAC (ID#: _____) <u>Alan Shimming</u>	Amount of contribution (\$) <u>\$150.00</u>
	Contributor address; City; State; Zip Code [Redacted] <u>Texarkana, Tx 75503</u>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>8/14/23</u>	Full name of contributor out-of-state PAC (ID#: _____) <u>Greg Lockerell</u>	Amount of contribution (\$) <u>\$200.00</u>
	Contributor address; City; State; Zip Code [Redacted] <u>Texarkana, Tx 75503</u>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>8/14/23</u>	Full name of contributor out-of-state PAC (ID#: _____) <u>Buddy McCollough</u>	Amount of contribution (\$) <u>\$1000.00</u>
	Contributor address; City; State; Zip Code [Redacted] <u>Texarkana, Tx 75503</u>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 8/14/23	5 Full name of contributor out-of-state PAC (ID#: _____) Jim Bunch	7 Amount of contribution (\$) \$1000.00
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/14/23	Full name of contributor out-of-state PAC (ID#: _____) Steve Ledwell	Amount of contribution (\$) \$2500.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75501	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/15/23	Full name of contributor out-of-state PAC (ID#: _____) Andy Prince	Amount of contribution (\$) \$1000.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/14/23	Full name of contributor out-of-state PAC (ID#: _____) Eric Cain	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 8/16/23	5 Full name of contributor out-of-state PAC (ID# _____) Judy Morgan	7 Amount of contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/16/23	Full name of contributor out-of-state PAC (ID# _____) Judge Bobby Howell Campaign	Amount of contribution (\$) \$500.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/14/23	Full name of contributor out-of-state PAC (ID# _____) James Henry Russell	Amount of contribution (\$) \$250.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/17/23	Full name of contributor out-of-state PAC (ID# _____) Robert Nelsen	Amount of contribution (\$) \$300.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

21

2 FILER NAME

Jeffrey K. Neal

3 Filer ID (Ethics Commission Filers)

4 Date

8/19/23

5 Full name of contributor

out-of-state PAC (ID#: _____)

Lesley Dikelow

7 Amount of contribution (\$)

\$ 500.⁰⁰

6 Contributor address;

City;

State;

Zip Code

Texarkana, TX 75503

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/19/23

Full name of contributor

out-of-state PAC (ID#: _____)

James Day

Amount of contribution (\$)

\$ 500.⁰⁰

Contributor address;

City;

State;

Zip Code

Texarkana, TX 75503

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/22/23

Full name of contributor

out-of-state PAC (ID#: _____)

Paul Miller

Amount of contribution (\$)

\$ 500.⁰⁰

Contributor address;

City;

State;

Zip Code

75503

Texarkana, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/23/23

Full name of contributor

out-of-state PAC (ID#: _____)

Matt Robertson

Amount of contribution (\$)

\$ 250.⁰⁰

Contributor address;

City;

State;

Zip Code

Texarkana, TX 75503

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 8/24/23	5 Full name of contributor out-of-state PAC (ID#: _____) Borden Bell Jr.	7 Amount of contribution (\$) \$150.⁰⁰
	6 Contributor address; City; State; Zip Code Texarkana, TX 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/24/23	Full name of contributor out-of-state PAC (ID#: _____) Scott Norton	Amount of contribution (\$) \$200.⁰⁰
	Contributor address; City; State; Zip Code Texarkana, TX 75501	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/31/23	Full name of contributor out-of-state PAC (ID#: _____) Sonya Hubbard	Amount of contribution (\$) \$1000.⁰⁰
	Contributor address; City; State; Zip Code Texarkana, TX 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/9/23	Full name of contributor out-of-state PAC (ID#: _____) Gary Courtney	Amount of contribution (\$) \$250.⁰⁰
	Contributor address; City; State; Zip Code Texarkana, TX 75501	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 9/9/23	5 Full name of contributor out-of-state PAC (ID#: _____) Jimmy Estill	7 Amount of contribution (\$) \$ 500.⁰⁰
	6 Contributor address; City; State; Zip Code [REDACTED] Texarkana, Tx 75505	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/9/23	Full name of contributor out-of-state PAC (ID#: _____) John Goins	Amount of contribution (\$) \$ 50.⁰⁰
	Contributor address; City; State; Zip Code [REDACTED] Texarkana, AR 71854	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/9/23	Full name of contributor out-of-state PAC (ID#: _____) John Mercy	Amount of contribution (\$) \$ 100.⁰⁰
	Contributor address; City; State; Zip Code [REDACTED] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/11/23	Full name of contributor out-of-state PAC (ID#: _____) Kelley Stone	Amount of contribution (\$) \$ 500.⁰⁰
	Contributor address; City; State; Zip Code [REDACTED] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
21

2 FILER NAME
Jeffrey K. Neal

3 Filer ID (Ethics Commission Filers)

4 Date

9/11/23

5 Full name of contributor out-of-state PAC (ID# _____)
Michael Coleman

6 Contributor address; City; State; Zip Code
[Redacted] Texarkana, TX 75503

7 Amount of contribution (\$)

\$ 500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/12/23

Full name of contributor out-of-state PAC (ID# _____)
Amy Warren

Contributor address; City; State; Zip Code
[Redacted] Texarkana, TX 75503

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/12/23

Full name of contributor out-of-state PAC (ID# _____)
Bob Bruggeman

Contributor address; City; State; Zip Code
[Redacted] Texarkana, TX 75503

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/12/23

Full name of contributor out-of-state PAC (ID# _____)
Lucille Hawkins

Contributor address; City; State; Zip Code
[Redacted] Texarkana, TX 75501

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 9/12/23	5 Full name of contributor out-of-state PAC (ID# _____) Robert Ingram	7 Amount of contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75505	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID# _____) Robert Sitterley	Amount of contribution (\$) \$200.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID# _____) Joe Nichols	Amount of contribution (\$) \$250.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID# _____) Gary Van Deaver	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code [Redacted] New Boston, Tx 75570	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 9/12/23	5 Full name of contributor Carl Teel out-of-state PAC (ID# _____)	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75501		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/12/23	Full name of contributor William Smith III out-of-state PAC (ID# _____)	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor Kelly Mitchell out-of-state PAC (ID# _____)	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor David Bradford out-of-state PAC (ID# _____)	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code [Redacted] New Boston, Tx 75570		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 9/12/23	5 Full name of contributor out-of-state PAC (ID#: _____) David Glenn	7 Amount of contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID#: _____) Tom McLeod	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID#: _____) Sue Proste	Amount of contribution (\$) \$200.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75501	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID#: _____) Betty Fair	Amount of contribution (\$) \$500.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 9/12/23	5 Full name of contributor Lowell Walker out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code [Redacted] Pekarb, Tx 75559	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/12/23	Full name of contributor Herold Williams out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code [Redacted] Wake Village, Tx 75501	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor Blake Carlow out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code [Redacted] New Boston, Tx 75570	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor Van Alexander out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 9/12/23	5 Full name of contributor out-of-state PAC (ID# _____) Justin white	7 Amount of contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, TX 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID# _____) Johnny Stone	Amount of contribution (\$) \$250.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, TX 75501	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID# _____) Herald Hightight	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code [Redacted] New Boston, TX 75570	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/12/23	Full name of contributor out-of-state PAC (ID# _____) Robert Irwin	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, TX 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

21

2 FILER NAME

Jeffrey K. Neal

3 Filer ID (Ethics Commission Filers)

4 Date

9/12/23

5 Full name of contributor

Lisa Henry

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100.⁰⁰

6 Contributor address;

City; State; Zip Code

Texarkana, Tx 75503

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/12/23

Full name of contributor

Terry Broske

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.⁰⁰

Contributor address;

City; State; Zip Code

Texarkana, Tx 75501

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/12/23

Full name of contributor

Brad Carlaw

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$500.⁰⁰

Contributor address;

City; State; Zip Code

Texarkana, Tx 75501

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/12/23

Full name of contributor

Butch Dunbar

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$200.⁰⁰

Contributor address;

City; State; Zip Code

Texarkana, Tx 75503

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 9/13/23	5 Full name of contributor out-of-state PAC (ID#: _____) Terrie Arnold	7 Amount of contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/14/23	Full name of contributor out-of-state PAC (ID#: _____) Gary Treadway	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/15/23	Full name of contributor out-of-state PAC (ID#: _____) Steve Munger	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75501	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/18/23	Full name of contributor out-of-state PAC (ID#: _____) Mark Morgan	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code [Redacted] New Boston, Tx 75570	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/23	5 Full name of contributor out-of-state PAC (ID#: _____) David Bradford	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code [Redacted] New Boston, Tx 75570		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/12/23	Full name of contributor out-of-state PAC (ID#: _____) Anthony Pinkham	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75501		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/23	Full name of contributor out-of-state PAC (ID#: _____) Josh Davis	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code [Redacted] Texarkana, Tx 75503		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/23	Full name of contributor out-of-state PAC (ID#: _____) Chris Moser	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code [Redacted] DeKalb, Tx 75559		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

21

2 FILER NAME

Jeffrey K. Neal

3 Filer ID (Ethics Commission Filers)

4 Date

10/12/23

5 Full name of contributor
David Mims

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$150.00

6 Contributor address;

City;

State;

Zip Code

Texarkana, Tx 75503

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/12/23

Full name of contributor

R.P. White

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

Texarkana, Tx 75503

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/23

Full name of contributor

Buddy Hawkins

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

Texarkana, Tx 75503

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/23

Full name of contributor

Romie Smith

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

Texarkana, Tx 75501

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/23	5 Full name of contributor out-of-state PAC (ID#: Sharon Smith	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code [Redacted] Texarkana, TX 75501		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/30/23	Full name of contributor out-of-state PAC (ID#: George Lavender	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code [Redacted] Texarkana, TX 75503		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/8/23	Full name of contributor out-of-state PAC (ID#: Thomas Alston	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code [Redacted] Texarkana, TX 75503		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME Jeffrey K. Neal		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>9/12/23</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>James Henry Russell</u>	8 Amount of Contribution \$ <u>\$250.00</u>	9 In-kind contribution description <u>Food for Fundraiser</u>
7 Contributor address; City; State; Zip Code <u>[Redacted] Texarkana, TX 75503</u>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <u>9/12/23</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Dean Barry</u>	Amount of Contribution \$ <u>\$250.00</u>	In-kind contribution description <u>Food for Fundraiser</u>
Contributor address; City; State; Zip Code <u>[Redacted] Texarkana, TX 75503</u>		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>6</u>	2 FILER NAME <u>Jeffrey K. Neal</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>8/19/23</u>	5 Payee name <u>Blessing Allison Photography</u>	
6 Amount (\$) <u>\$180.00</u>	7 Payee address; City; State; Zip Code <u>[Redacted] Texarkana, AR 71854</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Other</u>	(b) Description <u>Campaign Photographs</u>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

Date <u>8/24/23</u>	Payee name <u>Greater Texarkana Branch NAACP</u>		
Amount (\$) <u>\$75.00</u>	Payee address; City; State; Zip Code <u>[Redacted] Texarkana, Tx 75504</u>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	Description <u>Ad</u>	
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <u>8/25/23</u>	Payee name <u>United States Postal Service</u>		
Amount (\$) <u>\$66.00</u>	Payee address; City; State; Zip Code <u>[Redacted] Texarkana, Tx 75501</u>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Other</u>	Description <u>Stamps</u>	
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>6</u>	2 FILER NAME <u>Jeffrey K. Neal</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>8/28/23</u>	5 Payee name <u>Patterson Company</u>	
6 Amount (\$) <u>\$5,380.00</u>	7 Payee address; City; State; Zip Code <u>[REDACTED] Austin, Tx 78737</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	(b) Description <u>Mailer</u>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <u>8/29/23</u>	Payee name <u>Bowie County Citizens Tribune</u>		
Amount (\$) <u>\$200.00</u>	Payee address; City; State; Zip Code <u>[REDACTED] New Boston, Tx 75570</u>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	Description <u>Ad</u>	
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <u>8/31/23</u>	Payee name <u>Maud ISD</u>		
Amount (\$) <u>\$250.00</u>	Payee address; City; State; Zip Code <u>[REDACTED] Maud, Tx 75567</u>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	Description <u>T-Shirt Logo</u>	
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>4</i>	2 FILER NAME <i>Jeffrey K. Neal</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>9/13/23</i>	5 Payee name <i>Ramage Farms</i>	
6 Amount (\$) <i>\$750.00</i>	7 Payee address; City; State; Zip Code <i>[Redacted] Hooks, Tx 75561</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Venue Rental</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>9/14/23</i>	Payee name <i>Scoreboard</i>	
Amount (\$) <i>\$135.31</i>	Payee address; City; State; Zip Code <i>[Redacted] Texarkana, Tx 75503</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>T-Shirts</i>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>9/23/23</i>	Payee name <i>Party City</i>	
Amount (\$) <i>\$22.84</i>	Payee address; City; State; Zip Code <i>[Redacted] Texarkana, Tx 75503</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Plates / Cups / Napkins</i>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **6** 2 FILER NAME: **Jeffrey K. Neal** 3 Filer ID (Ethics Commission Filers)

4 Date: **9/27/23** 5 Payee name: **For All Brandkind**

6 Amount (\$): **\$250.00** 7 Payee address; City; State; Zip Code: **[Redacted] Texarkana, Tx 75503**

8 PURPOSE OF EXPENDITURE: **Advertising Expense** (b) Description: **Mailer Design**
 (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/OH Candidate / Officeholder name Office sought Office held

Date: **9/29/23** Payee name: **Texarkana Digital Press**

Amount (\$): **\$381.19** Payee address; City; State; Zip Code: **[Redacted] Texarkana, Tx 75501**

PURPOSE OF EXPENDITURE: **Advertising Expense** Description: **Mailer Printing / Postage**
 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: **9/29/23** Payee name: **Bowie County Citizens Tribune**

Amount (\$): **\$270.00** Payee address; City; State; Zip Code: **[Redacted] New Boston, Tx 75570**

PURPOSE OF EXPENDITURE: **Advertising Expense** Description: **Event Ad**
 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 NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>6</u>	2 FILER NAME <u>Jeffrey K. Neal</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>10/12/23</u>	5 Payee name <u>Amy Barron</u>	
6 Amount (\$) <u>\$450.00</u>	7 Payee address; City; State; Zip Code <u>[Redacted] New Boston, Tx 75570</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Food/Beverage Expense</u>	(b) Description <u>Fundraiser Food</u>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>11/12/23</u>	Payee name <u>Bowie County Republican Party</u>	
Amount (\$) <u>\$750.00</u>	Payee address; City; State; Zip Code <u>[Redacted] Texarkana, Tx 755</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fees</u>	Description <u>Filing Fee</u>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>12/12/23</u>	Payee name <u>Iron Wood Grill</u>	
Amount (\$) <u>\$250.00</u>	Payee address; City; State; Zip Code <u>[Redacted] Texarkana, Tx 75503</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Gifts</u>	Description <u>Gift Cards</u>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>6</i>	2 FILER NAME <i>Jeffrey K. Neal</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/12/23</i>	5 Payee name <i>Bowie County Citizens Tribune</i>	
6 Amount (\$) <i>\$150.00</i>	7 Payee address; 	City; State; Zip Code <i>New Boston, Tx 75570</i>
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Calendar Ad</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>12/12/23</i>	Payee name <i>Jeff Neal</i>	
Amount (\$) <i>\$900.00</i>	Payee address; 	City; State; Zip Code <i>Texarkana, Tx 75501</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Loan Repayment</i>	Description <i>Loan Repayment</i>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED