

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>MR</u> FIRST <u>Craig</u> MI NICKNAME      LAST <u>Morgan</u> SUFFIX	<b>OFFICE USE ONLY</b>  Date Received  <span style="font-size: 1.5em;">APR 2 '26 PM 3:47</span>  Date Hand-delivered or Date Postmarked  Receipt #      Amount \$  Date Processed  Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE  <div style="background-color: black; width: 150px; height: 20px; display: inline-block;"></div> <u>RR, TX 78665</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION  (      )		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u>MR</u> FIRST <u>Gary</u> MI NICKNAME      LAST <u>White</u> SUFFIX		
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE  <u>Round Rock TX</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION  (      )		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month      Day      Year      THROUGH      Month      Day      Year <u>1 / 01 / 26</u> <u>04 / 1 / 26</u>		
11 ELECTION	ELECTION DATE Month      Day      Year <u>5 / 2 / 26</u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <u>Mayor</u>	13 OFFICE SOUGHT (if known) <u>Mayor</u>	
14 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 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.  COMMITTEE TYPE      COMMITTEE NAME <input type="checkbox"/> GENERAL      COMMITTEE ADDRESS <input type="checkbox"/> SPECIFIC      COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS		

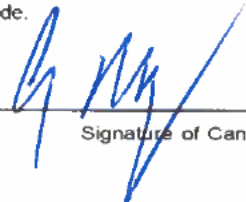
**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

<b>15 C/OH NAME</b>		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0-0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,950.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,017.89
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 21,029.54
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

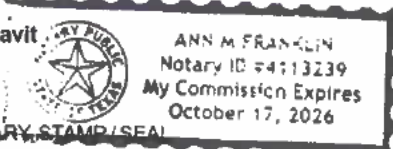
**18 SIGNATURE** I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

**Please complete either option below:**

(1) Affidavit



Sworn to and subscribed before me by Craig Morgan this the 2nd day of April, 2026, to certify which, witness my hand and seal of office.

Ann Franklin

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

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,950.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,017.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Craig Morgan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/13/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John Howard</i>	7 Amount of contribution (\$)  <i>250.00</i>
6 Contributor address; City; State; Zip Code <i>Marble Falls TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>1/22/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Patrick Hamilton</i>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		<i>200.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/16/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William Otto</i>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <i>Wauwatosa, WI</i>		<i>500.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/9/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jeffrey Vedlin</i>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <i>Georgetown, TX</i>		<i>500.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <i>Craig Morgan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/4/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lori Scott</i>	7 Amount of contribution (\$) <i>250.00</i>
6 Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/5/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Judy &amp; John Avery Sr.</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>Austin TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/1/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nelson Avery</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>Georgetown, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/13/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John Avery Jr.</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>Liberty Hill, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <i>Craig Morgan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/2/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Heather &amp; Larry Giddes</i>	7 Amount of contribution (\$)  <i>200.00</i>
6 Contributor address; City; State; Zip Code <i>Round Rock, Tx.</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Emily &amp; Ryan Therrell</i>	Amount of contribution (\$)  <i>250.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, Tx.</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cindy &amp; Russ Wetters</i>	Amount of contribution (\$)  <i>500.00</i>
Contributor address; City; State; Zip Code <i>Georgetown Tx.</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charlie &amp; Bill Higgins</i>	Amount of contribution (\$)  <i>500.00</i>
Contributor address; City; State; Zip Code <i>Georgetown Tx.</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# SCHEDULE A1

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2 FILER NAME <i>Craig Morgan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/2/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Denise &amp; Roy Beard</i>	7 Amount of contribution (\$)  <i>500.00</i>
6 Contributor address; City; State; Zip Code <i>Round Rock, TX.</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Patti &amp; David Kautz</i>	Amount of contribution (\$)  <i>50.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kristin &amp; Sean Stevens</i>	Amount of contribution (\$)  <i>500.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX.</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Angela &amp; Brent Baker</i>	Amount of contribution (\$)  <i>100.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
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:
2 FILER NAME <i>Craig Morgan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/2/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sheri &amp; Todd Nelson</i>	7 Amount of contribution (\$)  <i>2,000.00</i>
6 Contributor address; City; State; Zip Code <i>Wisconsin Dells, WI</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kathy &amp; Russ Baker</i>	Amount of contribution (\$)  <i>500.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Monti &amp; Jim Baker</i>	Amount of contribution (\$)  <i>250.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/2/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sally &amp; George White</i>	Amount of contribution (\$)  <i>500.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
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:
2 FILER NAME <i>Craig Morgan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/12/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Walt Beese</i>	7 Amount of contribution (\$)  <i>500.00</i>
6 Contributor address; City; State; Zip Code <i>Round Rock, Tx.</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>3/25/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gregory Rabney</i>	Amount of contribution (\$)  <i>250.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, Tx.</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/25/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hugh Coleman</i>	Amount of contribution (\$)  <i>100.00</i>
Contributor address; City; State; Zip Code <i>Denton, Tx</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>3/12/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ebony Howard</i>	Amount of contribution (\$)  <i>100.00</i>
Contributor address; City; State; Zip Code <i>Round Rock Tx</i>		
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:
2 FILER NAME <i>Craig Morgan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/12/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lore Weber</i>	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/12/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charles Culpepper</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/12/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tarig Sheikh</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/13/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Adem Lewis</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>Austin, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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	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:	2 FILER NAME <i>Craig Morgan</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/2/21</i>	5 Payee name <i>Jackson Sanchez</i>	
6 Amount (\$) <i>225.00</i>	7 Payee address: <i>Round Rock TX,</i>	City: State: Zip Code
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Exp.</i>	(b) Description <i>Photos</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	9 Complete ONLY if direct expenditure to benefit C/OH	
Date <i>3/4/21</i>	Candidate / Officeholder name	
Amount (\$) <i>838.94</i>	Payee name <i>MinuteMan Press</i>	Office sought Office held
PURPOSE OF EXPENDITURE	Payee address: <i>Austin, TX,</i>	City: State: Zip Code
	Category (See Categories listed at the top of this schedule) <i>Printing Exp.</i>	
	Description <i>Yard Signs</i>	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		
Date <i>3/17/26</i>	Candidate / Officeholder name	
Amount (\$) <i>838.94</i>	Payee name <i>MinuteMan Press</i>	Office sought Office held
PURPOSE OF EXPENDITURE	Payee address: <i>Austin TX,</i>	City: State: Zip Code
	Category (See Categories listed at the top of this schedule) <i>Printing Exp.</i>	
	Description <i>Yard Signs</i>	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		

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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME <i>Craig Morison</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>3/16/26</i>	<b>5</b> Payee name <i>Meayne Source</i>	
<b>6</b> Amount (\$) <i>3,090.00</i>	<b>7</b> Payee address: <i>Killrin</i>	City: <i>TX.</i> State: Zip Code
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	
	<b>(b)</b> Description <i>4x8 sign posted</i>	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> 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
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	
	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <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
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	
	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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