

# 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: **18**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

Travis

W

NICKNAME

LAST

SUFFIX

Mitchell

OFFICE USE ONLY

Date Received

4/22/2024 - gk

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

[REDACTED]

Kyle, TX 78640

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

[REDACTED]

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

Travis

W

NICKNAME

LAST

SUFFIX

Mitchell

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #

CITY

STATE

ZIP CODE

[REDACTED]

Kyle, TX 78640

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

[REDACTED]

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year

Month Day Year

10 / 28 / 23

THROUGH

01 / 15 / 24

11 ELECTION

ELECTION DATE

Month Day Year

/ /

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

Mayor, City of Kyle

13 OFFICE SOUGHT (if known)

14 NOTICE FROM POLITICAL COMMITTEE(S)

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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME <i>Travis Mitchell</i>		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)	\$ <u>—</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>10,550.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>38.01</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>19,096.04</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>2,929.54</u>
OUTSTANDING LOAN TOTALS	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.



*Travis Mitchell*  
Signature of Candidate or Officeholder

Please complete either option below:

**(1) Affidavit**

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Travis Mitchell this the 22<sup>nd</sup> day of January,

20 24, to certify which, witness my hand and seal of office.

*Jennifer Kirkland*  
Signature of officer administering oath

Jennifer Kirkland  
Printed name of officer administering oath

Notary Public  
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 <i>Travis Mitchell</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>10,550.00</i>
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>19,096.00</i>
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:

1 of 4

2 FILER NAME

Travis Mitchell

3 Filer ID (Ethics Commission Filers)

4 Date

10/30/23

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Steven J Spears & J Rebecca Leonard

7 Amount of contribution (\$)

300

6 Contributor address;

City;

State;

Zip Code

[REDACTED]

Austin TX 78723

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/30/23

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Megan E Shannon

Amount of contribution (\$)

300

Contributor address;

City;

State;

Zip Code

[REDACTED]

Austin TX 78702

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/23

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Robert Gass & Judith B Gass

Amount of contribution (\$)

300

Contributor address;

City;

State;

Zip Code

[REDACTED]

Dallas TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/23

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Terry Mitchell

Amount of contribution (\$)

1,000

Contributor address;

City;

State;

Zip Code

[REDACTED]

Austin TX 78703

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: <i>2 of 4</i>
2 FILER NAME <i>Travis Mitchell</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/30/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Curtis E Ford</i>	7 Amount of contribution (\$) <i>1,000</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>Austin TX 76746</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>10/30/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John Doucet &amp; Amy L Doucet</i>	Amount of contribution (\$) <i>500</i>
Contributor address; City; State; Zip Code [Redacted] <i>Dripping Springs TX 78620</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>10/30/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Parth A Parikh</i>	Amount of contribution (\$) <i>1,500</i>
Contributor address; City; State; Zip Code [Redacted] <i>Orange Park, FL 32073</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>10/30/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joseph Cantalupo &amp; Janet D Cantalupo</i>	Amount of contribution (\$) <i>150</i>
Contributor address; City; State; Zip Code [Redacted] <i>Spring Branch TX 78070</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:  
3 of 4

2 FILER NAME

Travis Mitchell

3 Filer ID (Ethics Commission Filers)

4 Date

10/30/23  
~~10/26/23~~

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Karen A. Friese

7 Amount of contribution (\$)

250

6 Contributor address; City; State; Zip Code

[Redacted] Austin TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/30/23  
~~10/26/23~~

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

HBA Home PAC

Amount of contribution (\$)

500

Contributor address; City; State; Zip Code

[Redacted] Austin TX 78754

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/23  
~~10/26/23~~

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

William K. Reagan

Amount of contribution (\$)

2,500

Contributor address; City; State; Zip Code

[Redacted] Salt Lake City, UT 84116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/23  
~~10/26/23~~

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Pape-Dawson Engineers PAC

Amount of contribution (\$)

1,000

Contributor address; City; State; Zip Code

[Redacted] San Antonio, TX 78213

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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: 4 of 4
2 FILER NAME Travis Mitchell		3 Filer ID (Ethics Commission Filers)
4 Date 10/30/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC	7 Amount of contribution (\$) 1,000
6 Contributor address; City; State; Zip Code [Redacted] Austin TX 76768		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/30/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANPAC	Amount of contribution (\$) 250
Contributor address; City; State; Zip Code [Redacted] Houston, TX 77042		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
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.

# 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: <i>1 of 11</i>	<b>2</b> FILER NAME <i>Travis Mitchell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>10/30/23</i>	<b>5</b> Payee name <i>Walgreens</i>	
<b>6</b> Amount (\$) <i>84.18</i>	<b>7</b> Payee address; City; State; Zip Code <i>6205 FM 2770 Kyle, TX 75640</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	<b>(b)</b> Description <i>Office Supplies</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 <i>10/30/23</i>	Payee name <i>Dollar General</i>	
Amount (\$) <i>138.45</i>	Payee address; City; State; Zip Code <i>850 Veterans Drive Kyle, TX 79640</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Event Supplies</i>
	<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 <i>10/30/23</i>	Payee name <i>Walgreens</i>	
Amount (\$) <i>46.82</i>	Payee address; City; State; Zip Code <i>6205 FM 2770 Kyle, TX 79640</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	Description <i>Office Supplies</i>
	<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

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: <i>2 of 11</i>	<b>2</b> FILER NAME <i>Travis Mitchell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>10/31/23</i>	<b>5</b> Payee name <i>Texas Mail house</i>	
<b>6</b> Amount (\$) <i>2,729<sup>00</sup></i>	<b>7</b> Payee address; City; State; Zip Code <i>8606 Wall St Austin, TX 78754</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Printing / Advertising</i>	<b>(b)</b> Description <i>Printing / Advertising</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 <i>11/2/23</i>	Payee name <i>7-Eleven</i>	City; State; Zip Code
Amount (\$) <i>37.70</i>	Payee address; <i>22553 I-35 Kyle, TX 78640</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>Food/Beverage Expense</i>
	<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 <i>11/2/23</i>	Payee name <i>Cynthia Hinojosa</i>	City; State; Zip Code
Amount (\$) <i>2,400<sup>00</sup></i>	Payee address; <i>2309 Berkley Ave Apt 1020 Austin, TX 78745</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	Description <i>Consulting Expense</i>
	<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

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: 3 of 11	2 FILER NAME Travis Mitchell	3 Filer ID (Ethics Commission Filers)
---------------------------------------	---------------------------------	---------------------------------------

4 Date 11/2/23	5 Payee name Scale to Win, LLC
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6 Amount (\$) 454.89	7 Payee address; City; State; Zip Code 13742 Harper Street Santa Ana, CA 92703
-------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising Campaign
	(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	Candidate / Officeholder name	Office sought	Office held
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Date 11/3/23	Payee name Kyle's Daily Grind
-----------------	----------------------------------

Amount (\$) 4.36	Payee address; City; State; Zip Code 607 W Center St Kyle, TX 78640
---------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food/Beverage Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/3/23	Payee name Jeneva Garza
-----------------	----------------------------

Amount (\$) 100	Payee address; City; State; Zip Code [Redacted] Kyle, TX 78640
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PURPOSE OF EXPENDITURE	Description Donation by Candidate	Description UTW
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# 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.

<b>1</b> Total pages Schedule F1: <i>4 of 11</i>	<b>2</b> FILER NAME <i>Travis Mitchell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/3/23</i>	<b>5</b> Payee name <i>Via 313</i>	
<b>6</b> Amount (\$) <i>51.96</i>	<b>7</b> Payee address; City; State; Zip Code <i>19230 S 1-35 Ste 300 Kyle, TX 78640</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	<b>(b)</b> Description <i>Food/Beverage Expense</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 <i>11/6/23</i>	Payee name <i>Batch Geo, LLC</i>	
Amount (\$) <i>99.00</i>	Payee address; City; State; Zip Code <i>113 Cherry St # 15478 Seattle, WA 98104</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Other</i>	Description <i>Data Service Expense</i>
	<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 <i>11/6/23</i>	Payee name <i>CT Cetina</i>	
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>106 Lakeview CT Kyle, TX 78640</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Block Walking</i>
	<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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# 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: 5 of 11	2 FILER-NAME Travis Mitchell	3 Filer ID (Ethics Commission Filers)
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4 Date 11/8/23	5 Payee name Z Tejas
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6 Amount (\$) 50 <sup>00</sup>	7 Payee address; 18920 S 1-35 Hyle, TX 78640	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Food/Beverage
	(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	Candidate / Officeholder name	Office sought	Office held
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Date 11/9/23	Payee name Texas Mailhouse, Inc
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Amount (\$) 297 <sup>69</sup>	Payee address; 5606 Wall St Austin, TX 78754	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing / Advertising	Description Printing / Advertising
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/9/23	Payee name Scale to Win
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Amount (\$) 621 <sup>66</sup>	Payee address; 13742 Harper St Santa Ana, CA 92703	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Advertising Campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY 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 of 11</i>	2 FILER NAME <i>Travis Mitchell</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>11/13/23</i>	5 Payee name <i>Los Vaqueros</i>
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6 Amount (\$) <i>33<sup>00</sup></i>	7 Payee address, City, State, Zip Code <i>804 W Center St Kyle, TX 78640</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	(b) Description <i>Food/Beverage Expense</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	Candidate / Officeholder name	Office sought	Office held
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Date <i>11/13/23</i>	Payee name <i>Dark Skies Tavern</i>
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Amount (\$) <i>35<sup>57</sup></i>	Payee address, City, State, Zip Code <i>1 Woodcreek Cir Wimberley, TX 78676</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>Food/Beverage Expense</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>11/20/23</i>	Payee name <i>Amazon</i>
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Amount (\$) <i>63<sup>87</sup></i>	Payee address, City, State, Zip Code <i>410 Terry Ave N Seattle, WA 98109</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	Description <i>Office Supplies</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY 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.

<b>1</b> Total pages Schedule F1: <i>7 of 11</i>	<b>2</b> FILER NAME <i>Travis Mitchell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/21/23</i>	<b>5</b> Payee name <i>Apple, Inc</i>	
<b>6</b> Amount (\$) <i>4,403.61</i>	<b>7</b> Payee address; City; State; Zip Code <i>One Apple Park Way Cupertino, CA 94024</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Other</i>	<b>(b)</b> Description <i>Campaign Equipment</i>
	<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 <i>11/21/23</i>	Payee name <i>Amazon, Inc</i>	
Amount (\$) <i>3,286.45</i>	Payee address; City; State; Zip Code <i>410 Terry Ave N Seattle, WA 98109</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Other</i>	Description <i>Campaign Equipment</i>
	<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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# 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 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: <i>8 of 11</i>		2 FILER NAME <i>Travis Mitchell</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>11/20/23</i>		5 Payee name <i>Amazon</i>			
6 Amount (\$) <i>63.67</i>		7 Payee address; City; State; Zip Code <i>410 Terry Lane Ave N Seattle, WA 98109</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>		(b) Description <i>Office Supplies</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		Candidate / Officeholder name		Office sought Office held	
Date <i>11/24/23</i>		Payee name <i>Jake Webb Campaign</i>			
Amount (\$) <i>1,088.89</i>		Payee address; City; State; Zip Code <i>[Redacted] Kyle, TX 78640</i>			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Donation by Candidate</i>		(b) Description <i>Donation by Candidate</i>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>12/1/23</i>		Payee name <i>Amazon</i>			
Amount (\$) <i>54.11</i>		Payee address; City; State; Zip Code <i>410 Terry Lane Ave N Seattle, WA 98109</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office Supplies</i>		Description <i>Printing Expense</i>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY 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: <b>9 of 11</b>	2 FILER NAME <b>Travis Mitchell</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>12/1/23</b>	5 Payee name <b>Amazon</b>	
6 Amount (\$) <b>264.08</b>	7 Payee address; City; State; Zip Code <b>410 Terry Lane Ave N Seattle, WA 98109</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Office Supplies</b>	(b) Description <b>Printing expense</b>
	(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	Candidate / Officeholder name	Office sought Office held

Date <b>12/4/23</b>	Payee name <b>Amazon</b>	
Amount (\$) <b>177.53</b>	Payee address; City; State; Zip Code <b>410 Terry Lane Ave N Seattle, WA 98109</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Office Supplies</b>	Description <b>Printing expense</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>12/4/23</b>	Payee name <b>Batch Geo, LLC</b>	
Amount (\$) <b>99.00</b>	Payee address; City; State; Zip Code <b>113 Cherry St # 15478 Seattle, WA 98104</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Other</b>	Description <b>Data Services</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: <i>10 of 11</i>	<b>2</b> FILER NAME <i>Travis Mitchell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>12/11/23</i>	<b>5</b> Payee name <i>Whataburger</i>	
<b>6</b> Amount (\$) <i>20.71</i>	<b>7</b> Payee address; City; State; Zip Code <i>5401 Fm 1626 Ste 500 Kyle, TX 78640</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	<b>(b)</b> Description <i>Food/Beverage Expense</i>
	<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 <i>12/12/23</i>	Payee name <i>Jack Allen's</i>	
Amount (\$) <i>63.04</i>	Payee address; City; State; Zip Code <i>3010 W Anderson LN Ste D Austin, TX 78757</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>Food/Beverage Expense</i>
	<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 <i>12/22/23</i>	Payee name <i>Z Tejas</i>	
Amount (\$) <i>44.59</i>	Payee address; City; State; Zip Code <i>18920 S 1-35 Kyle, TX 78640</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>Food/Beverage Expense</i>
	<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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# 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: <i>11 of 11</i>	<b>2</b> FILER NAME <i>Travis Mitchell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>12/12/23</i>	<b>5</b> Payee name <i>Cynthia Hinojosa</i>	
<b>6</b> Amount (\$) <i>2,000<sup>00</sup></i>	<b>7</b> Payee address; City; State; Zip Code <i>2309 Berkley Ave # 1620 Austin, TX 78745</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>consulting</i>	<b>(b)</b> Description <i>consulting</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 <i>1/2/24</i>	Payee name <i>Casa Garcias</i>	
Amount (\$) <i>95<sup>00</sup></i>	Payee address; City; State; Zip Code <i>5401 FM 1626 Kyle, TX 78640</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>Food/Beverage Expense</i>
	<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 <i>1/4/24</i>	Payee name <i>Batch Geo, LLC</i>	
Amount (\$) <i>99<sup>00</sup></i>	Payee address; City; State; Zip Code <i>113 Cherry St # 15478 Seattle, WA 98104</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Other</i>	Description <i>Data Services</i>
	<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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