#### FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. NTY ELECTI 3 CANDIDATE / MS / MRS / MR FIRST М OFFICEHOLDER Robert NAME Date Received JAN **NICKNAME** LAST **SUFFIX** Walker CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** PO Box 558 MAILING Receipt# Amount **ADDRESS** Change of Address Pinehurst, TX 77362 Date Processed Date Imaged CAMPAIGN MR FIRST М TREASURER NAME **NICKNAME** SUFFIX CAMPAIGN STREET ADDRESS (NO PO BOX PLE APT / SUITE #; CITY; STATE: ZIP CODE **TREASURER** 13585 Walker Rd. Willis **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER CAMPAIGN EXTENSION **TREASURER** 524-2572 436 PHONE 8 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer Х appointment (officeholder only) Exceeded modified July 15 8th day before election Final Report (Attach C/OH-FR) reporting limit 9 PERIOD Month Year Day Year Day Month COVERED 07/01/2023 **THROUGH** 12/31/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Dav Year Primary Other Runoff General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) County Commissioner Pct 1 Montgomery **GO TO PAGE 2**

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Forms provided by Texas Ethics Commission

# **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

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

					2 of 47
13 C / OH NAME	Walker, Robert	1	4 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without the difficeholders are required to report this information of	e candidate's or officer	iolder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC		·		
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	<u></u>		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	25.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	12,525.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES	- "	\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES	1,000	\$	69,807.40
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LASTRIOD	ST DAY OF THE	\$	167,807.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O TING PERIOD	F THE LAST DAY	\$	0.00
17 AFFIDAVIT					
NO NO	KIMA WHEELER STARY PUBLIC, STATE OF TEXAS oftary ID #12976220-1 pires January 15,2027	I swear, or affirm, under penalty of true and correct and includes all it under Title 15, Election Code.  Signature of Communications are also as a second control of the communication in the communication in the communication in the communication is a second control of the communication in the communication in the communication in the communication is a second control of the communication in the communication in the communication is a second control of the communication in the communication is a second correct and includes all its control of the communication in the communication is a second correct and includes all its control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the communication is a second control of the communication in the control of the communication is a second control of the control of t		be reporte	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworp to and subso	cribed before me, by the s	aid Robert Walker ertify which, witness my hand and seal of office.	, this the12 <sup>-1</sup>	h 	day
Signature of office	Welly cer administering	Kima Wheelev Printed name of officer administering	Admin. As Title of officer	 administer	ing oath

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

	COVER	SHEET PG 3 3 of 47			
.8 FILER NAME  Walker, Robert  19 Filer ID					
0 SCHEDULE SUBTOTALS  NAME OF SCHEDULE  SUBTOTAL AMOUNT					
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	12,500.00			
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	25.00			
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$				
4. SCHEDULE E: LOANS	\$				
5. X SCHEDULE F1; POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	69,807.40			
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$				
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$				
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$				
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$				
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/	/он \$				
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$				
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETU TO FILER	RNED \$				
		!			

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/47 2 FILER NAME 3 Filer ID Walker, Robert 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 09/13/2023 Carlson, Larry \$2,500.00 Contributor address; City; State; Zip Code 9427 Deer Path Ln Magnolia, TX 77354 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/13/2023 \$250.00 Imhoff, Frank Contributor address; City; State; Zip Code 10241 LEWIS CREEK CIR Willis, TX 77318 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:\_ Amount of Contribution (\$) 11/20/2023 Quiddity PAC \$2,000.00 Contributor address; City; State; Zip Code 6330 West Loop S Suite 150 Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) 07/27/2023 Rowdy Hayden Campaign \$250.00 Contributor address; City; State; Zip Code PO Box 529 Splendora, TX 77372 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 11/01/2023 Wilkerson, Dennis \$7,500.00 Contributor address; City; State; Zip Code 16 Augusta Pines Dr. Suite 210-C Spring, TX 77389 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 1/43 Rpt: 5/47	Walker, Robert
4	Date	5 Payee name
	09/30/2023	7 LEGUAS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$101.29	15949 TX-105
		Montgomery, TX 77356
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political Meeting
		1 onuca weening
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
	Date	
	Date 12/05/2023	Payee name All Seasons Ace Hardware
	Amount (\$)	Payee address; City; State; Zip Code
	\$62.33	12764 I-45 N Fwy Service Rd
		Willis, TX 77378
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Conroe Parade Float Decor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/30/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$355.95	410 Terry Ave N
	4000100	nze rany wa w
		Seattle, WA 98109
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Auction Items donations to Commissioner Riley
		fundraiser
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	evheunitrie to belieff C/OI	1

# SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
_	Sch: 2/43 Rpt: 6/47	Walker, Robert
4	Date	5 Payee name
	07/30/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$149.07	410 Terry Ave N
		` `
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Auction Items donations for Commissioner Riley fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	09/02/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.56	410 Terry Ave N
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
		Counciling for AASIII Large a committee Development
		Supplies for Willis Homecoming Parade
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	10/12/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.80	410 Terry Ave N
		Seattle, WA 98109
	PURPOSE	(a) Category (see Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
		Check if Austin, TX, officeholder living expense
		Supplies for Friendsgiving Supporter Appreciation Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 3/43 Rpt: 7/47	2 FILER NAME Walker, Robert 3 Filer ID	
	Date 10/13/2023	5 Payee name Amazon	
6	Amount (\$) \$52.29		
8	PURPOSE OF EXPENDITURE	Seattle, WA 98109  (a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule  Check if Austin, TX, officeholder living expense  Supplies for Friendsgiving Supporter A  Event	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held DH	
	Date 10/17/2023	Payee name Amazon	
	Amount (\$) \$77.91	Payee address; City; State; Zip Code . 410 Terry Ave N	
		Seattle, WA 98109	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule  Check if Austin, TX, officeholder living expense  Supplies for Friendsgiving Supporter A  Event	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date 10/29/2023	Payee name Amazon	
	Amount (\$) \$51.94	Payee address; City; State; Zip Code 410 Terry Ave N	
		Seattle, WA 98109	:
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule  Check if Austin, TX, officeholder living expense  Supplies for Friendsgiving Supporter and Event	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

OTHER (enter a category not listed above)

	Credit Card Paymone	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 4/43 Rpt: 8/47	Walker, Robert	
4	Date	5 Payee name	
	10/29/2023	Amazon	·
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$17.43	410 Terry Ave N	
		Seattle, WA 98109	
8	PURPOSE		Description
Ū	OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	<del></del>	Check if Austin, TX, officeholder living expense
			Supplies for Friendsgiving Supporter Appreciation Event
			Eveni
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	experiditure to beliefit C/Or	1	
	Date	Payee name	
	10/31/2023	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$51.91	410 Terry Ave N	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Supplies for Friendsgiving Supporter Appreciation Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office flesa
-	Data		
	Date 11/11/2023	Payee name	
		Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$47.78	410 Terry Ave N	
		Seattle, WA 98109	
	PURPOSE OF	, , ,	Description
	EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Supplies for Friendsgiving Supporter Appreciation
	:	İ	Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
ļ			
l			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 5/43 Rpt: 9/47	Walker, Robert	
4 [	Date	5 Payee name	
(	09/20/2023	BD Griffin Campaign	
6 /	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500,00	PO Box 1361	
		Conroe, TX 77305	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Donation to Fundraiser	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oi	Candidate/Officeholder name Office sought Office held	
[	Date	Payee name	
(	08/27/2023	Bartending2U	
,	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.80	4560 W 34th St Suite A	
		Houston, TX 77092	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	·	Check if Austin, TX, officeholder living expense  Drinks at Political Event	
		Dilliks at Political Event	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
_	07/05/2023	Bradshaw Boney & Associates	
,	Amount (\$)	Payee address; City; State; Zip Code	
	\$634.56	18333 Egret Bay Blvd Ste 110	
		Houston, TX 77058	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.	
	LAPLINDITORL	Check if Austin, TX, officeholder living expense	
		Post Card Reminder for Fundraiser	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
`			

## SCHEDULE F1

Advertising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 6/43 Rpt: 10/47	Walker, Robert	
4	Date	5 Payee name	
	07/07/2023	Bradshaw Boney & Associates	
6	Amount (\$) \$1,719.19	7 Payee address; City; State; Zip Code 18333 Egret Bay Blvd Ste 110	
		Houston, TX 77058	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
-	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Solicitation/Fundraising Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Fiyer Mailed out for Fundraiser
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oi	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/23/2023	Bradshaw Boney & Associates	
	Amount (\$) \$6,125.78	Payee address; City; State; Zip Code 18333 Egret Bay Blvd Ste 110	
		Houston, TX 77058	
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Printing Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Christmas Cards to Constituents
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
-	Date	Payee name Brett Ligon Campaign	
	10/18/2023	· · · · · · · · · · · · · · · · · · ·	
	Amount (\$) \$1,287.70	Payee address; City; State; Zip Code PO Box 558	
		Pinehurst, TX 77362	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation to Fundraiser
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Polltica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 7/43 Rpt: 11/47	Walker, Robert
4	Date	5 Payee name
	12/29/2023	Bryan Christ Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	PO Box 558
		Pinehurst, TX 77362
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiunare to benefit C/O	
	Date	Payee name
	11/16/2023	Central Market HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,930.00	12350 Interstate 45 N
		Willis, TX 77378
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Thanksgiving Gifts for Pct 1 Employees
<b>-</b>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	07/26/2023	Conroe Noon Lions
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.00	1106 Wilson Rd
		Conroe, TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Monthly Dues
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		
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## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 8/43 Rpt: 12/47	Walker, Robert
4	Date	5 Payee name
	08/27/2023	Conroe Noon Lions
c		
ľ	Amount (\$)	
	\$55.00	1106 Wilson Rd
		Conroe, TX 77301
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Membership Dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	08/29/2023	Conroe Noon Lions
⊢		
	Amount (\$)	Payee address; City; State; Zip Code
	\$20,00	1106 Wilson Rd
		Conroe, TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Check If Austin, TX, officeholder living expense
		Tshirt
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Т	Date	Payee name
	09/26/2023	Conroe Noon Lions
┡		
	Amount (\$)	Payee address; City; State; Zip Code
1	\$55.00	1106 Wilson Rd
		Conroe, TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly Fees
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
1		
L		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 9/43 Rpt: 13/47	Walker, Robert
4	Date	5 Payee name
	09/29/2023	Conroe Noon Lions
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1106 Wilson Rd
	7-5-0-1	
		Conroe, TX 77301
8	DUDDOCE	
B	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Team for Tournament Fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/26/2023	Conroe Noon Lions
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.00	1106 Wilson Rd
		Conroe, TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Categories listed at the top of this scriedule)  Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
٠		Membership Fees
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experientare to beliefit orei	
	Date	Payee name
	11/27/2023	Conroe Noon Lions
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.00	1106 Wilson Rd
		Conroe, TX 77301
	PURPOSE	
	OF	Conroe, TX 77301  (a) Category (See Categories listed at the top of this schedule) Fees  (b) Description Check if travel outside of Texas. Complete Schedule T.
		(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Membership Dues
	OF EXPENDITURE  Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Membership Dues  Candidate/Officeholder name  Office sought  Office held
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Membership Dues  Candidate/Officeholder name  Office sought  Office held
	OF EXPENDITURE  Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Membership Dues  Candidate/Officeholder name  Office sought  Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 10/43 Rpt: 14/47	Walker, Robert
4	Date	5 Payee name
	11/30/2023	Conroe Noon Lions
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,475.00	1106 Wilson Rd
		Conroe, TX 77301
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation to City Shoot Fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/OI	dilice sought Office help
_		
	Date	Payee name
	12/27/2023	Conroe Noon Lions
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.00	1106 Wilson Rd
		Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Membership Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Datas
	09/07/2023	Payee name D&M True Value
	. <del> </del>	
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.34	400 W Montgomery St APT 8
		Willis, TX 77378
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Supplies for Willis Homecoming Parade
	Complete ONLY if divest	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Oł	
ļ		

### SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		es/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 11/43 Rpt: 15/47	Walker, Robert	
4 Date	5 Payee name	
12/15/2023	D&M True Value	
6 Amount (\$) \$37.88	7 Payee address; City; State; Zip Code 400 W Montgomery St APT 8	
	Willis, TX 77378	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Description  Check If travel outside of Texas. Complete Schedule T.  Check If Austin, TX, officeholder living expense  Supplies for Christmas Parade
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough H	t Office held
Date	Payee name	
12/06/2023	Dollar General	
Amount (\$) \$25.71	Payee address; City; State; Zip Code 10918 Fm 1484 Rd Conroe, TX 77303	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austln, TX, officeholder living expense Conroe Parade Float Decor
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough H	it Office held
Date	Payee name	
08/03/2023	Family Promise	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 692  Conroe, TX 77305	3
PUDDOGE		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation to Luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt Office held

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services The Instruction Guide expla		/ages/Contract Labor	OTHER (enter a category not li	sted above)
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID	
<u> </u>	Sch: 12/43 Rpt: 16/47	Walker, Rol	pert				
	Date	5 Payee name					
	11/13/2023	Family Pron	nise				
6	Amount (\$) \$4,400.00	7 Payee addres PO Box 692 Conroe, TX	2	ate; Zip Co	de		
8	PURPOSE	(a) Category (Se	ee Categories listed at the top of this	s schedule)	(b) Description		
	OF EXPENDITURE	Contribution	s/Donations Made By Officeholder/Political Co		Check if Aust	el outside of Texas. Complete Schedule in, TX, officeholder living expense Family Promise	÷Υ.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ght	Office held	
	Date	Payee name					
	11/13/2023	Family Pror	nise				
	Amount (\$) \$100.00	Payee addre: PO Box 692 Conroe, TX	2	ate; Zip Co	de		
	PURPOSE	(a) Category (Se	ee Categories listed at the top of this	s schedule)	(b) Description		
	OF EXPENDITURE	Contribution	ns/Donations Made By Officeholder/Political Co		Check if trave	el outside of Texas. Complete Schedule Iln, TX, officeholder living expense Family Promise	∍T,
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offi H	ceholder name	Office sau	ght	Office held	
	Date	Payee name					
	09/01/2023	Flip Flop Bli	ng				
	Amount (\$) \$387.54	Payee addres 10598 FM 1 Willis, TX 7	097	tate; Zip Co	de		
	PURPOSE	(a) Category (Sa	ee Categories listed at the top of thi	s schedule)	(b) Description		
	OF EXPENDITURE	Event Expe		s acricule)	Check if trave	el outside of Texas. Complete Schedule tin, TX, officeholder living expense r Willis Homecoming Parad	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ceholder name	Office sou	ght	Office held	
		<del></del>					

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Onations Made By -

Event Expense
Fees
Food/Beverage Expense
Glif/Awar/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	
	Sch: 13/43 Rpt: 17/47	Walker, Robert
4	Date	5 Payee name
	09/22/2023	Flip Flop Bling
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.30	10598 FM 1097
		Willis, TX 77318
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Advertising supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/15/2023	God's Garage
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,200.00	2100 E Davis St
		Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation to Non Profit
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/13/2023	Green, Jimmy
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	204 W Montgomery
		Willis, TX 77378
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule)  (b) Description  Contributions/Denations Made Ry  Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation for School Supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	expenditure to belieffice/O	•

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee   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:	2 FILER NAME 3 Filer ID
	Sch: 14/43 Rpt: 18/47	Walker, Robert
4	Date	5 Payee name
	09/14/2023	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.86	12350 Interstate 45 N
		Willis, TX 77378
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Good donation for Montgomery Food Bank
		1 ood donation for monigomery Food Bank
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
<u> </u>		
	Date	Payee name
	09/14/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$129.86	12350 Interstate 45 N
		Willis, TX 77378
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Food donation for Montgomery Food Bank
	Complete ONILV if dive at	Condidate (Office helder was a Condidate Condi
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/16/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.82	12350 Interstate 45 N
		Willis, TX 77378
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas, Complete Schedule T.
	LA LINDITORE	Check if Austin, TX, officeholder living expense
		Food donation for Montgomery Food Bank
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services The Instruction Guide		-	s/Contract Labor ete this form.	OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID	,, , , , , , , , , , , , , , , , , , ,
	Sch: 15/43 Rpt: 19/47	Walker, Ro	bert					
4	Date	5 Payee name	e					
	10/21/2023	HEB						
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip Co	ode			
	<b>\$1</b> 26.71	12350 Inte	rstate 45 N					
		Willis, TX	77378					
8	PURPOSE	(a) Category (	See Categories listed at the top	o of this schedule)	(b)	Description		
	OF EXPENDITURE	Event Exp	ense				outside of Texas. Con	
							, TX, officeholder livin	
						Event	-nendsgiving s	Supporter Appreciation
		L			<u> </u>			
9	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sou	ught		Office h	eld
	expenditure to benefit oron	ı						
	Date	Payee name	e					**************************************
	12/01/2023	HEB						
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode		····	
	\$124.47	_	rstate 45 N	•				
	<del></del>							
		U## TV	77070					
		Willis, TX	11318			,		
	PURPOSE OF		See Categories listed at the to	p of this schedule)	(b)	Description		
	EXPENDITURE	Event Exp	ense			J	outside of Texas. Con	
						Candy for Co	ı, TX, officeholder livin aproe Parade	g expense
						Carlay for Oc	moe ranae	
	0	C	ficeholder name	O#i			Office h	
	Complete ONLY if direct expenditure to benefit C/OH		Ticenoider name	Office so	ugnt		Office n	ela
	Date	Payee nam	е					
	12/08/2023	HEB						
	Amount (\$)	Payee addr	ess; City;	State; Zip Ci	ode	·		
	\$75.38	1.2350 Inte	erstate 45 N					
		Willis, TX	77378					
-	PURPOSE				/b)	Description		<u> </u>
	OF		See Categories listed at the to	p of this schedule)	[(0)	Description Check if travel	outside of Texas. Cor	malete Schedule T
	EXPENDITURE	FOOUREVE	erage Expense			Lum	n, TX, officeholder livir	- ·
								r County Employees
							-	
	Complete ONLY if direct	L Candidate/O:	fficeholder name	Office so	l uaht		Office h	neld
	expenditure to benefit C/O		moonoido, nama	Office add	-911k		Omoc t	

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 16/43 Rpt: 20/47	Walker, Robert
4	Date	5 Payee name
	12/14/2023	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$62.56	12350 Interstate 45 N
	:	Willis, TX 77378
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVENDETHEE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Desserts for Employees Christmas Party
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/14/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.97	12350 Interstate 45 N
		Willis, TX 77378
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Desserts for Employees Christmas Party
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/27/2023	Hello Flowers
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.46	407 E Fort St #3RD
		Detroit, MI 48226
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Funeral Flowers for Constituent
	Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
	,	

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Solicine/Magnet/Contract Labor

Credit Card Payment	By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District  Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The treatment of Cuide available hourse appealant this form
2 m · 1	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	l l
Sch: 17/43 Rpt: 21/47	Walker, Robert
4 Date	5 Payee name
10/16/2023	Henry's Horse Sanctuary
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	14638 Perry Rd
	Conroe, TX 77302
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
	Donation to Fundraiser
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
08/31/2023	Hobby Lobby
Amount (\$)	Payee address; City; State; Zip Code
\$37.24	1217 N Loop 336 W
	Conroe, TX 77301
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense  Check if travel outside of Texas, Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Supplies for Willis Homecoming Parade
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	DH Control of the con
Date	Payee name
Date 12/05/2023	Payee name Hobby Lobby
Date 12/05/2023 Amount (\$)	Payee name Hobby Lobby Payee address; City; State; Zip Code
Date 12/05/2023	Payee name Hobby Lobby Payee address; City; State; Zip Code
Date 12/05/2023 Amount (\$)	Payee name Hobby Lobby Payee address; City; State; Zip Code 1217 N Loop 336 W
Date 12/05/2023 Amount (\$)	Payee name Hobby Lobby Payee address; City; State; Zip Code
Date 12/05/2023 Amount (\$) \$47.52	Payee name Hobby Lobby Payee address; City; State; Zip Code 1217 N Loop 336 W
Date 12/05/2023 Amount (\$) \$47.52 PURPOSE OF	Payee name Hobby Lobby  Payee address; City; State; Zip Code 1217 N Loop 336 W  Conroe, TX 77301   (a) Category (See Categories listed at the top of this schedule) Event Expense    Description   Check if travel outside of Texas, Complete Schedule T.
Date 12/05/2023 Amount (\$) \$47.52	Payee name Hobby Lobby  Payee address; City; State; Zip Code 1217 N Loop 336 W  Conroe, TX 77301  (a) Category (See Categories listed at the top of this schedule) Event Expense  (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
Date 12/05/2023 Amount (\$) \$47.52 PURPOSE OF	Payee name Hobby Lobby  Payee address; City; State; Zip Code 1217 N Loop 336 W  Conroe, TX 77301   (a) Category (See Categories listed at the top of this schedule) Event Expense    Description   Check if travel outside of Texas, Complete Schedule T.
Date 12/05/2023  Amount (\$) \$47.52  PURPOSE OF EXPENDITURE	Payee name Hobby Lobby  Payee address; City; State; Zip Code 1217 N Loop 336 W  Conroe, TX 77301  (a) Category (See Categories listed at the top of this schedule) Event Expense  (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Conroe Parade Float Decor
Date 12/05/2023  Amount (\$)  \$47.52  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Hobby Lobby  Payee address; City; State; Zip Code  1217 N Loop 336 W  Conroe, TX 77301  (a) Category (See Categories listed at the top of this schedule) Event Expense  Candidate/Officeholder name  Candidate/Officeholder name  Office sought  Office held
Date 12/05/2023  Amount (\$)  \$47.52  PURPOSE OF EXPENDITURE	Payee name Hobby Lobby  Payee address; City; State; Zip Code  1217 N Loop 336 W  Conroe, TX 77301  (a) Category (See Categories listed at the top of this schedule) Event Expense  Candidate/Officeholder name  Candidate/Officeholder name  Office sought  Office held
Date 12/05/2023  Amount (\$) \$47.52  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Hobby Lobby  Payee address; City; State; Zip Code  1217 N Loop 336 W  Conroe, TX 77301  (a) Category (See Categories listed at the top of this schedule) Event Expense  Candidate/Officeholder name  Candidate/Officeholder name  Office sought  Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Relimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services  The Instruction Guide expla		Vages/	Contract Labor	OTHER (enter a d	category not listed above)	
1 Total pages Scho	edule F1:	2 FILER NAM					3 Filer ID	
Sch: 18/43 Rpt		Walker, Ro						
4 Date		5 Payee name						
12/06/2023		Hobby Lob	by					
6 Amount (\$)		7 Payee addre	ess; City; S	State; Zip Co	de	·		
	\$58,83	1217 N Loc	pp 336 W					
		Conroe, TX	( 77301					
8 PURPOSE		(a) Category (S	see Categories listed at the top of th	is schedule)	(b)	Description		"
OF EXPENDITURE	≣	Event Expe	ense			Luci	outside of Texas, Comp	
						_	TX, officeholder living de Float Decor	expense
						Conide Farac	de Float Decoi	
0.0	te tt.	0 : "   (0"	9 In 13	0.00	1		O.C.	
<ul> <li>Complete ONLY expenditure to be</li> </ul>			iceholder name	Office sou	ignt		Office he	ela .
Date		Payee name						=
11/27/2023		Knights of	Columbus					
Amount (\$)		Payee addre	ess; City; S	State; Zip Co	ode			" - "-"
;	\$450.00	16663 TX-	75					
		Willis, TX 7	7378					
PURPOSE OF			See Categories listed at the top of th	nis schedule)	(b)	Description		
EXPENDITURE	≘		ns/Donations Made By	*			outside of Texas, Comp	
		Candidate/	Officeholder/Political Co	ommittee		Donation to F	, TX, officeholder living Tundraiser	expense
						Donalon to 1	anaraiser	
Complete ONLY	if direct	Candidate/Off	iceholder name	Office sou	L		Office he	
expenditure to be			ilicendider name	Office sou	ıyı ıı		Onice He	nu.
		T						
Date		Payee name						
11/27/2023		Knights of	Columbus					
Amount (\$)		Payee addre	ess; City; S	State; Zip Co	ode			
;	\$580,00	16663 TX-	75					
		Willis, TX 7	7378					
PURPOSE	-	(a) Category (s	See Categories listed at the top of the	nis schedule)	(b)	Description		
OF EXPENDITURE	=		ns/Donations Made By			$\Box$	outside of Texas. Com	•
2,0 2.13.1.011	_	Candidate/	'Officeholder/Political Co	ommittee			, TX, officeholder living	expense
						Donation to F	-unuralSef	
Orania stra	r of Little	0	#	O ## -	\		orr '	-1-1
Complete <u>ONLY</u> expenditure to b			ficeholder name	Office sou	ugnt		Office he	ėiū.
					· · · · · · · · · · · · · · · · · · ·		<del> </del>	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Glit/Awards/Memorlals Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1		2 FILER NAME 3 Filer ID
	Sch: 19/43 Rpt: 23/47	Walker, Robert
4	Date	5 Payee name
	09/30/2023	Kroger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$77.11	12605 Interstate 45 N
		Willis, TX 77318
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense  Lunch for Office
		Lunding Onice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/25/2023	Kuntry Katfish
	Amount (\$)	Payee address; City; State; Zip Code
	\$126.80	5901 W Davis St
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political Meeting
		1 Ontotal Weeting
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
=	Date	Payee name
	07/26/2023	Lake Conroe Area Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 737
	\$2,000.00	
		Montgomery, TX 77356
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, afficeholder living expense Donation to Literacy Dinner
		Donation to Literacy Diffici
ļ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
-		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Accounting/Banking

Fees Food/Bayerage Eypense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 20/43 Rpt: 24/47	Walker, Robert
4	Date	5 Payee name
	12/11/2023	Lake Conroe Area Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	PO Box 737
		Montgomery, TX 77356
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation to Children arty
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	12/22/2023	Lake Conroe Area Republican Women
<del></del>	Amount (\$)	Payee address; City; State; Zip Code
	\$500,00	PO Box 737
		Montgomery, TX 77356
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation to "In God We Trust" mission
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H 
	Date	Payee name
	09/29/2023	Lone Star Cowboy Church
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	21627 Eva St
		Montgomery, TX 77356
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donaidi to Fandrasei
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbl.

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 21/43 Rpt: 25/47	Walker, Robert
4	Date	5 Payee name
	11/14/2023	Lowe's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$216.14	1920 Westview Blvd
		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Supplies for Friendsgiving Supporter Appreciation Event
_	Carrelate ONLY & Junet	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	11/30/2023	MC Veteran Memorial
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	300 W. Davis Suite 110
		Conroe, TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Candidate/Officeholder Ilving expense Condition to Fundraiser
		Bollation to Fundiaise
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/28/2023	MEALS ON WHEELS
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,035.29	111 S 2nd St
		Conroe, TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXTENDITORE	Candidate/Officeholder/Political Committee
		Sponsor of Fundraiser
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Ordered to some order	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Evnense

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 22/43 Rpt: 26/47	2 FILER NAME 3 Filer ID Walker, Robert
4	Date	5 Payee name
•	10/23/2023	MISD Education Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,656.33	20774 Eva Street
		Montgomery, TX 77356
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation to Fundraiser
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/17/2023	Magnolia Republican Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	18640 FM 1488, Suite A294
		Magnolia, TX 77354
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation to Fundraiser
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/24/2023	Mascot Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	204 W Rogers St
		Willis, TX 77378
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation to Willis High School Athletics
	Complete CMLV if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	•
$\vdash$		<del>.</del>
L.		

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER Out or present not listed about

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 23/43 Rpt: 27/47	Walker, Robert
4	Date	5 Payee name
	09/27/2023	Meals on Wheels
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,552.80	11.1 S 2nd St
		Conroe, TX 77301
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee
		Candidate/Officeholder/Political Committee Contribution to fundraiser
		Contributor to fundaci
_	Complete ONLY if sline at	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	<b>-</b>
	Date	Payee name
	10/08/2023	Meals on Wheels
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,035.29	111 S 2nd St
	Ψ.,0001.20	
		Conroe, TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation to Fundraise
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/08/2023	Meals on Wheels
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	111 S 2nd St
	\$75.00	1,11 5 2110 51
		Carres TV 77901
_		Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Onicenoider/Political Committee Donation to Fundraiser
		Donation to Fundacion
<u> </u>	Complete ONB V if alive -+	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	3
	1	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment  The Instruction Gulde explains how to complete this form.				
1	Total pages Schedule F1;	2 FILER NAME 3 Filer ID			
	Sch: 24/43 Rpt: 28/47	Walker, Robert			
4		5 Payee name			
	07/13/2023	Mock, Junior			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$420.00	26395 Highway 105 West			
		Mandanana TV 77050			
_		Montgomery, TX 77356			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check If travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Lunch for Employees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oi	Candidate/Officeholder name Office sought Office held			
	D-t-				
	Date 12/07/2023	Payee name  Montgomery County Employee Committee			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$50.00	510 TX-75			
	,				
		Willis, TX 77378			
<del> </del>	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
		Candidate/Officeholder/Political Committee			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	H			
	Date	Payee name			
	07/21/2023	Montgomery County Food Bank			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$100.00	1 Food For Life Way			
		Conroe, TX 77385			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Contributions/Donations Made by  Candidate/Officeholder/Political Committee			
		Donation to Fundraiser			
L					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H			
l		•			

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.				
L Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
Sch: 25/43 Rpt: 29/47	Walker, Robert				
1 Date	5 Payee name				
11/14/2023	Montgomery County Republican Party				
5 Amount (\$) \$1,250,00	7 Payee address; City; State; Zip Code 921 W Austin Street				
	Conroe, TX 77301				
B PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Fees  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Filling Fee for 2024 Primary				
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H				
Date	Payee name				
10/17/2023	Montgomery County Women's Shelter				
Amount (\$)	Payee address; City; State; Zip Code				
\$514.93 1401 Airport Rd					
	Conroe, TX 77301				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Contributions/Donations Made By  Contributions/Donations Made By				
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.  Check If travel outside of Texas, Complete Schedule T.				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
Date	Payee name				
12/27/2023	Montgomery County				
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 9055 Airport Rd				
	Conroe, TX 77303				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees for 2024 Venue				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H				

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Fees
Food/Beverage Expense
Glft/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	d Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 26/43 Rpt; 30/47	Walker, Robert
4	Date	5 Payee name
	09/29/2023	Moore Guns & Ammo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,123.64	13000 Shepard Hill Rd
		Willis, TX 77318
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Auction Items for Fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	08/09/2023	Morgan Luttrell Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 1245
		Magnolia, TX 77353
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	09/26/2023	North Shore Republican Women
_	Amount (\$)	Payee address; City; State; Zip Code
	\$610.00	P.O. Box 1993
		Montgomery, TX 77356
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	2/11 2/11 2/12	Candidate/Officeholder/Political Committee
		Donation to Fundraiser
		1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
AdvertIsing Expense Event Expense Loan Repayment/Relimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	
_	Sch: 27/43 Rpt: 31/47	Walker, Robert
,	· · · · · · · · · · · · · · · · · · ·	<u>_</u>
4	Date	5 Payee name
	09/01/2023	Party City
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$67.12	1306 W Davis St
		Conroe, TX 77301
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder llving expense Supplies for Willis Homecoming Parade
		Supplies for While Floring Parade
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	12/07/2023	Party City
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.69	1306 W Davis St
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas, Complete Schedule T.
	LXITENDITORE	Check if Austin, TX, officeholder living expense
		Conroe Parade Float Decor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/10/2023	Philip Cash Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 2099
		Willis, TX 77378
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation to Fundraiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID		
	Sch: 28/43 Rpt: 32/47	Walker, Robert			
4	Date	5 Payee name			
	08/07/2023	Rand Henderson Campaign			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,000.00	PO Box 1678			
	, ,				
		Conroe, TX 77305			
8	PURPOSE		Description		
0	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense		
			Donation to Fundraiser		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
	experiorare to benefit C/O				
	Date	Payee name			
	08/12/2023	Ransom's Steakhouse			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$204.16	300 C B Stewart Dr			
		Montgomery, TX 77356			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas, Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Political Meeting				
			Tollibod Meeting		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O				
_	Date	Payee name			
	10/19/2023	Restaurant Depot			
	Amount (\$) \$476.55	Payee address; City; State; Zip Code 23815 Tombali Pkwy			
	φ470.55	23013 TOTIDAR FRWY			
		Tombali, TX 77375			
_					
	PURPOSE OF	, , ,	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense		
			Supplies for Friendsgiving supporter Appreciation		
			Event		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O	4			

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
Total pages Schedule F1:	·
Sch: 29/43 Rpt: 33/47	Walker, Robert
Date	5 Payee name
08/28/2023	Robert's Rarehouse
Amount (\$) \$351.82	7 Payee address; City; State; Zip Code 13080 TX-105 #116
φουυ	13090 1V-102 #110
	Conroe, TX 77304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense 2 Signs for Next Fundraiser Auction
	2 Signs for Next Fundraiser Adelient
Complete CAll V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
07/10/2023	Rowdy Hayden Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	PO Box 529
***************************************	Splendora, TX 77362
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel cutside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Donation to Fundraiser
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/10/2023	Rowdy Hayden Campaign
,	
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 529
	Splendora, TX 77362
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Donation to Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialitate to benefit 5.5	

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Dinastions Made By-

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries Wages Contract Labor

Candidate/ Credit Card Pa	/Officeholder/Politica rayment	_	jai Services le Instruction Guide ex		-	te this form.	O) HER (enter a category	not listed above)
1 Total pages	Schedule F1:	2 FILER NAME		•	<u> </u>		3 Filer ID	
	3 Rpt: 34/47	Walker, Rober	t					
4 Date		5 Payee name						
10/21/2023	3	Rudy's Country	y Store					
6 Amount (\$)		7 Payee address;	City;	State; Zip Co	de			
	\$233,37	14545 Hwy 10	5 W Unit E					
		Conroe, TX 77	'304					
8 PURPO	SE	(a) Category (See C	Categories listed at the top o	of this schedule)	(b)	Description		
OF EXPENDIT	TURE	Food/Beverage	e Expense			_	outside of Texas. Complete Sch , TX, officeholder living expense	
						Political Meet		
							J	
	NLY if direct	Candidate/Officeh	nolder name	Office sou	ght		Office held	
expenditure	e to benefit C/O							
Date		Payee name						
07/03/2023	3	Sam's Club						
Amount (\$)		Payee address;		State; Zip Co	de	<del></del> .		
	\$109.60	2000 Westview	<i>N</i> Blvd					
,								
		Conroe, TX 77						
PURPO OF	SE		Categories listed at the top o	of this schedule)	(b)	Description  Check if travel	outside of Texas, Complete Sch	hadula T
EXPENDI	TURE	Food/Beverag	e Expense	!		hI	n, TX, officeholder living expense	
Supplies for Senior Center								
		<u> </u>						
	ONLY if direct to benefit C/O	Candidate/Officel	nolder name	Office sou	ight		Office held	
-								
Date	0	Payee name						
09/09/202		Sam's Club		71. 71. O				
Amount (\$)	\$220.34	Payee address; 2000 Westviev		State; Zip Co	ode			
	<b>ቅ</b> ረረህ, <b>3</b> 4	ZUUU Westvier	N DIVU					
		Conroe, TX 77	7304					
PURPO		(a) Category (See (	Categories listed at the top of	of this schedule)	(b)	Description		
OF EXPENDI		Food/Beverag				I	outside of Texas. Complete Sc	
	• • •						n, TX, officeholder Ilving expens derson Fire Departme	
						1 000 101 7 0.5	totoon in a separation	
	ONLY if direct	Candidate/Officel	holder name	Office sou	J Jght		Office held	
expenditure	e to benefit C/O	4						

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID
_	Sch: 31/43 Rpt: 35/47	Walker, Robert
4	Date	5 Payee name
	09/11/2023	Sam's Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$860.31	2000 Westview Blvd
		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Food for Montgomery County Food Bank
		1 ddd for Montgomery County i ood bank
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
	Date	Police verse
	11/14/2023	Payee name Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$648.72	2000 Westview Blvd
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food for Friendsgiving Supporter Appreciation Event
		1 ood for 1 Heridagiving Supporter Appreciation Event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Dougo years
	12/06/2023	Payee name Sam's Club
-		
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.05	2000 Westview Blvd
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food for Senior Center
		1 dod for Schiol Center
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District

OTHER (enter a category not listed above)

L	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID			
	Sch: 32/43 Rpt: 36/47	Walker, Robert					
4	Date	5 Payee name		•			
	10/20/2023	Sam's Club					
6	Amount (\$)	7 Payee address; City; State; Zip Co	de				
	\$146.35	2000 Westview Blvd					
		Conroe, TX 77304					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description			
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.			
	EAFENDITURE	1		Check if Austin, TX, officeholder living expense			
				Supplies for Friendsgiving supporter Appreciation Event			
Ļ	Complete ONLY if all a - 1	Condidate Office holder news					
a	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sou H	ដូកវេ	Office held			
dash	· · · · · · · · · · · · · · · · · · ·			274-14-14			
	Date	Payee name					
L	07/02/2023	Southern Heritage Consulting LLC					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$250.00 PO Box 558						
L		Pinehurst, TX 77362					
Γ	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description			
Check if travel of the Consulting Expense				Check if Austle TV officeholder living avrence			
			L	Check if Austin, TX, officeholder living expense  Campaign Mgmt			
1			ļ `				
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sou	L aht	Office held			
	expenditure to benefit C/OI		· · · · ·	emechen			
H	Date	Payee name					
	08/01/2023	Payee name Southern Heritage Consulting LLC					
_			do				
	Amount (\$) \$250.00	Payee address; City; State; Zip Co	ae				
	\$250,00	PO Box 558					
		Bin shows 17/ 77000					
		Pinehurst, TX 77362					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(p) i	Description			
	EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
			L	Campaign Account Mgmt			
				, 5			
-	Complete ONLY if direct	Candidate/Officeholder name Office sou	l aht	Office held			
	expenditure to benefit C/OI		-a^	22			
$\vdash$							
1							

#### SCHEDULE F1

Solicitation/Fundraising Expense

Transportation Equipment & Related Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

Travel in District Travel Out of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 33/43 Rpt: 37/47 Walker, Robert 4 Date Payee name 08/07/2023 Southern Heritage Consulting LLC State; Zip Code 6 Amount (\$) Payee address; City; \$1,500.00 PO Box 558 Pinehurst, TX 77362 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Finance Report Prep Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/02/2023 Southern Heritage Consulting LLC Amount (\$) Payee address; City; State; Zip Code \$350.00 PO Box 558 Pinehurst, TX 77362 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Account Mgmt Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 10/02/2023 Southern Heritage Consulting LLC Amount (\$) Payee address; City; State; Zip Code \$350.00 PO Box 558 Pinehurst, TX 77362 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign and Finance Mgmt Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 34/43 Rpt: 38/47	Walker, Robert
4	Date	5 Payee name
	11/02/2023	Southern Heritage Consulting LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	PO Box 558
	i	
		Pinehurst, TX 77362
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Mgmt
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/02/2023	Southern Heritage Consulting LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$350,00	PO Box 558
	φουισο	1 0 000 330
		Disaburat TV 77909
		Pinehurst, TX 77362
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxes Complete Schedule T
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Mgmt
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
-	Date	Payee name
	08/28/2023	TEXANS UNITED FOR FREEDOM
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,176.17	11510 Farm to Market Rd 1488 bldg e
	, , , , , , ,	
		Magnolia, TX 77354
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check If travel outside of Texas, Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Donation to Fundraiser
_		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
		this Commission Various Various state type

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services The Instruction Guide ex		/ages	/Contract Labor	OTHER (enter a c	ategory not listed above)
1	Total pages Schedule F1:	2 FILER NAME	-			Ī	3 Filer ID	
	Sch: 35/43 Rpt: 39/47	Walker, Rol	bert					
4	Date	5 Payee name						
	09/13/2023	Tammy Mc	Rae Campaign					1
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	de			
	\$500.00	P.O. Box 3:	Į.					
		Conroe, TX	77305					
8	PURPOSE OF		ee Categories listed at the top of		(b)	Description		
	EXPENDITURE		ns/Donations Made By Officeholder/Political (			<b>□</b>	outside of Texas. Comp , TX, officeholder living	1
		Candidate/	Difficentialer/Political C	Jomnikee		Campaign do		expense
						eapa.g de		
9	Complete ONLY if direct	Candidate/Off	ceholder name	Office sou	L		Office he	ld
•	expenditure to benefit C/O		Scriolog, Tarric	Onice sou	gin		Office He	iu.
	Data		<u> </u>	<u> </u>			<del></del>	
	Date	Payee name						
	10/12/2023	The Gallery	Collection	······································				
	Amount (\$)	Payee addre	-	State; Zip Co	ode			
	\$306.57	65 Challen	ger Road					
	·							
		Ridgefield F	Park, NJ 07660					
	PURPOSE	(a) Category (S	ee Categories listed at the top of	fthis schedule)	(b)	Description		
	OF EXPENDITURE	Printing Exp	oense				outside of Texas, Comp	
					ļ		, TX, afficeholder living ards for Constitu	· ·
						Cilibilitas Ca	ards for Corisiit	iciira :
	Complete ONLY if direct	Candidata/Off	iceholder name	Office	l cylot		Office he	Ld
	Complete ONLY if direct expenditure to benefit C/OI		icentituel name	Office sou	igrit		Office ne	iu
	Date	Payee name						
	11/09/2023	The Home	Depot					
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode			
	\$1,281.47	1341 W Da	vis St					
		Conroe, TX	77304					
	PURPOSE	(a) Category (s	ee Categories listed at the top o	f this schedule)	(b)	Description		
	OF EVDENDITUDE	Event Expe		· · · · · · · · · · · · · · · · · · ·		Check if travel	outside of Texas. Comp	
	EXPENDITURE	<u>'</u>				_	, TX, officeholder living	
							Friendsgiving S	upporter Appreciation
						Event		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office sou	ıght		Office he	eld
	expenditure to benefit C/O	·						

### SCHEDULE F1

Advertising Expense

Event Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/aanking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	1
	Sch: 36/43 Rpt: 40/47	Walker, Robert
4	Date	5 Payee name
	07/07/2023	The UPS Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.15	502 W Montgomery St
	·	
		Willis, TX 77378
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Printing of CFR
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/07/2023	The UPS Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.91	18640 FM 1488
	Ψ±.0×	
		Magnolia, TX 77354
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Printing for Lake Conroe Area Republican Women
		ad
	o Li ovivit P	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/30/2023	Traylor, Travis
	Amount (\$)	Payee address; City; State; Zip Code
	\$235.85	10121 LONGMIRE RD
	·	
		Caprae TV 77304
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Catering for Employee Family Funeral Reception
		Cutching for Employee Furnity Furneral Neception
	Consulate ONLY 3 dies :	Condidate/Office holder name Office angulation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	1	
_	11 11 - 7 - 5	thing Commission Warden Votes the state to up

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Political	- Git/Awards/Memorials Expense Printing Expense Travel Out of District   Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)			
	Credit Card Payment  The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID			
	Sch: 37/43 Rpt: 41/47	Walker, Robert			
4	Date	5 Payee name			
	08/24/2023	Vernon's Kuntry BBQ			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$58.00	5901 W Davis St			
		Conroe, TX 77304			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Political Meeting			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O	1			
	Date	Payee name			
	08/07/2023	Vince Santini Campaign			
	Amount (\$)	Payee address; City; State; Zip Code			
١	\$1,000.00	PO Box 558			
		Pinehurst, TX 77352			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
	EXI ENDITORE	Candidate/Officeholder/Political Committee			
	Donation to Fundraiser				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	Complete <u>ONLY</u> if direct Candidate/Officeholder пате Office sought Office held expenditure to benefit C/OH				
<u> </u>					
	Date 11/13/2023	Payee name			
		Wal-Mart			
	Amount (\$)	Payee address; City; State; Zip Code			
ļ	\$163.10	1407 N Loop 336 W			
		Conroe, TX 77304			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Food for Friendsgiving Supporter Appreciation Ever			
		Toda for Managywing Capporter Appreciation Eve.			
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
$\vdash$					
L					

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

OTHER (enter a category not listed above)

		The Instruction Guide explains how to complete this form,			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID			
	Sch: 38/43 Rpt: 42/47	Walker, Robert			
4	Date	5 Payee name			
	12/06/2023	Wal-Mart			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
u	\$346.18	1407 N Loop 336 W			
	, , , ,	1407 N Loup 330 W			
		· · · · · · · · · · · · · · · · · · ·			
		Conroe, TX 77304			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense  Conroe Parade Float Decor			
		Collide Palade Float Decol			
_	Olate ONING E				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	.,				
	Date	Payee name			
	08/07/2023	Wayne Mack Campaign			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.00	PO Box 2234			
		Conroe, TX 77305			
_					
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas, Complete Schedule T.			
	EXPENDITURE	Candidate/Officeholder/Political Committee			
		Donation to Fundraiser			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH				
	Date	Payee name			
	08/09/2023	Wayne Mack Campaign			
<u> </u>					
	Amount (\$)	Payee address; City; State; Zip Code			
	\$3,000.00	PO Box 2234			
		Conroe, TX 77305			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
	Party 22 Mars 1 Part 2 Part	Candidate/Officeholder/Political Committee			
		Donation to Fundraiser			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Reintal Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category and the content of the conten

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 FILER ID
	Sch: 39/43 Rpt: 43/47	Walker, Robert
4	Date	5 Payee name
	10/20/2023	Wayne Mack Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	PO Box 2234
		Conroe, TX 77305
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Bonagon to Fanatasi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	08/23/2023	West Conroe Baptist Church
	Amount (\$)	Payee address; City; State; Zip Code
	\$256.25	1855 Longmire Rd
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-l
	Date	Payee name
	08/07/2023	Will Metcalf Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 454
		Conroe, TX 77305
<u> </u>	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Bondaon to Fundado
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form,		
1	Total pages Schedule F1: Sch: 40/43 Rpt: 44/47	2 FILER NAME Walker, Robert	3 Filer ID		
4	Date 08/01/2023	Payee name     Willis BassKat Booster Club			
6	Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 204 W Rogers St Willis, TX 77378			
8	PURPOSE OF EXPENDITURE		Description  Check if travel outside of Texas. Complete Schedule T.  Check If Austin, TX, officeholder living expense  Donation to Booster Club		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date 09/22/2023	Payee name Willis ISD Softball Booster Club			
	Amount (\$) \$750.00	Payee address; City; State; Zip Code 10005 TX-75 Willis, TX 77378			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description  Check if travel outside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder fiving expense  Donation to Fundraiser		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
	Date 07/20/2023	Payee name Willis ISD			
	Amount (\$) \$259.97	Payee address; City; State; Zip Code 204 W Rogers St			
		Willis, TX 77378			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Willis ISD Tshirt Sponsor		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverag
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Glft/Awards/Memorials Expense
Legal Services Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form,		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID		
	Sch: 41/43 Rpt: 45/47	Walker, Robert		
4	Date	5 Payee name		
	08/24/2023	Willis WildKat Footbali		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$155.63	204 W Rogers St		
	,			
		Willis, TX 77378		
8	PURPOSE	1		
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas, Complete Schedule T.		
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense		
		Donation to Booster Club		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	experience to perion of			
	Date	Payee name		
	07/20/2023	Woodforest National Bank		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$3.00	18535 FM 1488 #110		
		Magnolia, TX 77355		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Banking Fees		
		, and the second se		
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
H	Date Payee name			
	08/20/2023	Woodforest National Bank		
┝┈	Amount (\$)	Payee address; City; State; Zip Code		
	\$3.00	18535 FM 1488 #110		
		Magnolia, TX 77355		
<u> </u>	PURPOSE			
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check If travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Paper Statement Fee		
l	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
<u> </u>	s.pondica.o to sonone oro	•		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Glit/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manes/Contract Lahor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to com	plet	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 42/43 Rpt: 46/47	Walker, Robert		1
4	Date	5 Payee name		
	09/20/2023	Woodforest National Bank		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$3.00	18535 FM 1488 #110		
		Magnolia, TX 77355		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	p) I	Description
	OF EXPENDITURE	Fees	[	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Į	Check if Austin, TX, officeholder living expense
			ı	Banking Fees
_	Consolete ONLY & direct	Candidate/Officeholder name Office sough	la t	Office held
9	Complete ONLY if direct expenditure to benefit C/O		nt	Office neig
_				
	Date 10/20/2023	Payee name Woodforest National Bank		
				44. Pp. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19
	Amount (\$)	Payee address; City; State; Zip Code	le	
ŀ	\$3,00	18535 FM 1488 #110		
		Magnolia, TX 77355		
	PURPOSE OF	, , , , , , , , , , , , , , , , , ,	(b) [	Description
	EXPENDITURE	Fees	ļ	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Banking Fees
		į		
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OH			
	Date	Payee name		
	11/20/2023	Woodforest National Bank		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$3.00	18535 FM 1488 #110		
		Magnolia, TX 77355		
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees	Ì	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Banking Fees
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O		ji IL	Onice neta
_				
L				

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	By - Glit/Awards/Memorials Expense Printing Expense Travel Out of District  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: Sch: 43/43 Rpt: 47/47	2 FILER NAME 3 Filer ID	
4	Date 12/20/2023	5 Payee name Woodforest National Bank	
6	Amount (\$) \$3.00	7 Payee address; City; State; Zip Code 18535 FM 1488 #110 Magnolia, TX 77355	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Banking Fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held  OH	