FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090924 3 COMMITTEE NAME **OFFICE USE ONLY** Charter Schools Now PAC Date Received **ELECTRONICALLY FILED** 10/31/2022 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **ADDRESS** 3005 S Lamar Blvd, Ste D109 #250 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78704 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Rex NAME NICKNAME LAST **SUFFIX** Gore STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1304 W Oltorf St STREET **ADDRESS** (Residence or Business) Austin, TX 78704 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 694-7777 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/30/2022 10/29/2022 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/08/2022 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Charter Schools Nov	w PAC		00090924	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Kirk Watson Mayor	•	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Масачиса	A. Supported		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS,	I D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS	\$	158,625.25
EXPENDITURE TOTALS	3. TOTAL POLITICAL	EXPENDITURES OF \$100 OR LESS, UNLESS I	TEMIZED \$	686.29
	4. TOTAL POLITICA	L EXPENDITURES	\$	224,183.40
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LA G PERIOD	ST DAY \$	321,517.79
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS C REPORTING PERIOD	F THE \$	0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of true and correct and includes all ir under Title 15, Election Code.		
			_	
			Rex Gore	
			Rex Gore Campaign Treasure	er
AFFIX NOTA	ARY STAMP / SEAL ABOVE			er
			Campaign Treasure	
Sworn to and subscril	bed before me, by the said _	Signature of	Campaign Treasure	
Sworn to and subscril	bed before me, by the said _	Signature of	Campaign Treasure	

FORM GPAC ADDENDUM

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						1 490 0 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00090924	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brad Buckley State Representa	tive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Ben Bumgarner State Represer	ntative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		ben bumgamer State Represer	nauve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Angie Chen Button State Repre	sentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		1	<u> </u>			

FORM GPAC ADDENDUM

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						1 490 1 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00090924	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mark Dorazio State Representa	ative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Frederick Frazier State Repres	entative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Tredefick Trazici State Repres	critative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ryan Guillen State Representa	itive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC				00090924	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Caroline Harris	State Represent	tative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	1. Candidates	A. Supported	Will Hickman	State Board Of Ed	lucation	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		· · · · · · · · · · · · · · · · · · ·	stato Board O. La		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Lacey Hull Sta	ate Representative)	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		•	•				

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12	COMMITTEE NAME						13 Filer ID	(Ethics Comm	ission Filers)
	Charter Schools Now Pa	AC					00090924		
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		rted	Jamee Holly St	ate Representati	I ive		
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed					
		2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo	rted					
			B. Oppos	ed					
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
	COMMITTEE	1. Candidates		rted	Jeff Leach Stat	Representative			
	ACTIVITY	(Identify by name or, if applicable, classify by party.)			Jen Leden Jid	. representative	•		
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed					
		2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo	rted					
			B. Oppos	ed					
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Suppo	rted	Oscar Longoria	State Represen	tative		
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed					
		2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo	rted					
			B. Oppos	ed					
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
		Assisted							

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00090924	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		John Lujan State Representa	ive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Morgan Meyer State Represe	ntative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Mongan Meyer State Represe	mauve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Matt Shaheen State Represer	ntative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00090924	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Kronda Thimesch State Repres	sentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Tony Tinderholt State Represer	ntative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Tony findemon State Represen	nauve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Grant Moody Bexar County Co	mmissioner	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
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FORM GPAC ADDENDUM

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COMMITTEE NAME					
				13 Filer ID	(Ethics Commission Filers)
Charter Schools Now Pa	AC			00090924	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Adam Hinojosa State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Janie Lopez State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Luis Villarreal Jr. State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

PURPUSE					Page 10 of 50
2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Charter Schools Now F	PAC			00090924	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Morgan LaManti	ia State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

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		EE NAME chools Now PAC	18 Filer ID 00090924	(Ethics Commission Filers)
19 SC	HEDULI	E SUBTOTALS		CURTOTAL AMOUNT
NA	ME OF	SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 158,625.25
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 224,183.40
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 104.13

	MONEI	ARY POLITICAL CO	NIRIBUTION	15		SCHEDULE A1
	The Instruc	ction Guide explains how to	complete this for	m.	ı	Total pages Schedule A1: Sch: 1/5 Rpt: 12/50
2	FILER NAME Charter Scho	ools Now PAC			ı	Filer ID (Ethics Commission Filers) 00090924
4	Date 10/07/2022	Barrett, Michael 6 Contributor address; City; State; 21210 Kings River Point	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$10,000.00
8	Principal occu Executive	Humble, TX 77346 Dation / Job title (See Instructions)	9	Employer (See Instructions	 5)	
	Date 10/02/2022	Boynes, Frances Contributor address; City; State; 3950 Riverfalls San Antonio, TX 78259	out-of-state PAC (ID#:			Amount of Contribution (\$) \$100.00
	Principal occup Superintende	pation / Job title (See Instructions) ent		Employer (See Instructions) George Gervin Youth Ce		er
	Date 10/06/2022	Full name of contributor Bradley, Katherine B. Contributor address; City; State; 2211 30th St NW Washington, DC 20008	out-of-state PAC (ID#:			Amount of Contribution (\$) \$10,000.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions CityBridge Foundation	<u> </u> 5)	
	Date 10/27/2022	Full name of contributor Brown, Onjaleke Contributor address; City; State; 1705 Cattail Creek Dr DeSoto, TX 75115	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$25.00
	Principal occup Superintende	oation / Job title (See Instructions) ent		Employer (See Instructions St Anthony School	5)	
	Date 10/06/2022	Full name of contributor Coleman, Starlee Contributor address; City; State; 2707 La Mesa Drive Austin, TX 78704	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$519.52
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions TPCSA	5)	

	MONEI	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 13/50	
2	FILER NAME Charter Scho	ools Now PAC		3	Filer ID (Ethics Commissi 00090924	on Filers)
4	Date 10/12/2022	 5 Full name of contributor out-of-state PAC (ID#:_Cottrill, Jeff 6 Contributor address; City; State; Zip Code 260 Wincliff Drive)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu Superintend	Buda, TX 78610 pation / Job title (See Instructions) ent	Employer (See Instructions IDEA Schools	5)		
	Date 10/06/2022	Full name of contributor out-of-state PAC (ID#:_ Dunn, David Contributor address; City; State; Zip Code 3205 Gilbert St. Austin, TX 78703)		Amount of Contribution (\$)	\$519.52
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions D2 Strategies	5)		
	Date 10/16/2022	Full name of contributor out-of-state PAC (ID#:_ Dworkin, James D. Contributor address; City; State; Zip Code 6601 Bevington Rd.)		Amount of Contribution (\$)	\$104.15
		Dallas, TX 75248 pation / Job title (See Instructions)	Employer (See Instructions			
	Date 10/10/2022	Full name of contributor out-of-state PAC (ID#:_ Greenawalt, Andrew A. Contributor address; City; State; Zip Code 7815 Escala Drive Austin, TX 78735-1547	Trinity Basin Preparator	y Ir	Amount of Contribution (\$)	\$5,000.00
	Principal occu Board Chair	pation / Job title (See Instructions)	Employer (See Instructions Austin Achieve	5)		
	Date 10/25/2022	Full name of contributor out-of-state PAC (ID#:_ Gregg, Mark E. Contributor address; City; State; Zip Code 5847 San Felipe, Ste 2900 Houston, TX 77057			Amount of Contribution (\$)	\$25,000.00
	Principal occu Founder & C	pation / Job title (See Instructions) EO	Employer (See Instructions KiwiEnergy	s)		

	MONET	ARY POLITICAL CONTRIBU	IIION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	m.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 14/50		
2	FILER NAME Charter Scho	ools Now PAC		3	Filer ID (Ethics Commission 00090924	on Filers)	
4	Date 09/30/2022	5 Full name of contributor out-of-state PAC (ID#:) Hock, Stacy 6 Contributor address; City; State; Zip Code 3331 Westlake Dr				Amount of Contribution (\$)	\$5,000.00
8	Principal occu Founder & C	Austin, TX 78746 pation / Job title (See Instructions) EO	9	Employer (See Instructions Retired	<u> </u> s)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/14/2022 Hoffer, Joseph Contributor address; City; State; Zip Code 66 Champion Cliff San Antonio, TX 78258					Amount of Contribution (\$)	\$519.52
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Schulman, Lopez, Ho					Adelstein LLP	
	Date Full name of contributor out-of-state PAC (ID#:) 10/28/2022 Luna, Nadia Contributor address; City; State; Zip Code 1301 Goldilocks Lane				•	Amount of Contribution (\$)	\$100.00
	•	Manchaca, TX 78652 pation / Job title (See Instructions) er Engagement		Employer (See Instructions	<u> </u> S)		
	VP of Member Engagement Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00	
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Cardenas Development).	
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2022 Mitchell, Julia Contributor address; City; State; Zip Code 1249 Strickland Dr Austin, TX 78748					Amount of Contribution (\$)	\$10.00
Principal occupation / Job title (See Instructions) Senior Director of Donor Relations TPCSA TPCSA							
			•				

	MONEI	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 4/5 Rpt: 15/50			
2	FILER NAME Charter Scho	ools Now PAC		3 Filer ID (Ethics Commission Filers) 00090924		
4	Date 09/30/2022			7 Amount of Contribution (\$) \$250.00		
8	Principal occu President	Bee Cave, TX 78738 pation / Job title (See Instructions)	Employer (See Instructions InSite Education Facility			
	Date 10/17/2022	Full name of contributor out-of-state PAC (ID#:_ Seay, Dudley Contributor address; City; State; Zip Code PO Box 286 Byers, TX 76357		Amount of Contribution (\$) \$519.52		
	Principal occu Consulting	pation / Job title (See Instructions)	Employer (See Instructions Leadership4School, LLC			
	Date 10/04/2022	Full name of contributor out-of-state PAC (ID#:_ Weekley, David Contributor address; City; State; Zip Code 2 Longbow Lane Houston, TX 77024		Amount of Contribution (\$) \$100,000.00		
	Principal occu Home Builde	pation / Job title (See Instructions)	Employer (See Instructions David Weekley Homes	I S)		
	Date Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$) \$519.52		
	Principal occu President & 0	pation / Job title (See Instructions)	Employer (See Instructions Coldwater Ventures			
	Date 10/20/2022	Full name of contributor out-of-state PAC (ID#:_ Whitmire, Tyler Contributor address; City; State; Zip Code 1322 F St. Sacramento, CA 95814)	Amount of Contribution (\$) \$50.00		
	Principal occu Partner	pation / Job title (See Instructions)	Employer (See Instructions Public School Allies	· (s)		

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDUI	E A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 5/5 Rpt: 16/50	
2	FILER NAME Charter Schools Now PAC	3 Filer ID (Ethics Commission 00090924	on Filers)
4	_	7 Amount of Contribution (\$)	\$62.23
8	Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instruction Retired	ons)	
	Date Full name of contributor out-of-state PAC (ID#:) 10/07/2022 Wright, Julia Contributor address; City; State; Zip Code 14207 Spring Knoll Ln Rosharon, TX 77583	Amount of Contribution (\$)	\$26.27
	Principal occupation / Job title (See Instructions) Superintendent Employer (See Instruction MeyerPark	Dons)	

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 (Ethics Commission Filers)
Sch: 1/33 Rpt: 17/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/18/2022	Adam Hinojosa Campaign
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO Box 18301
Expenditure from corporate funds	Corpus Christi, TX 78480
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
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/18/2022	Angie Chen Button Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	PO Box 832748
Expenditure from corporate funds	Richardson, TX 75083
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
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2022	Arena LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,879.00	1260 Stringham Ave #350
Expenditure from corporate funds	Salt Lake City, UT 84106
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Direct Mail (Design, Printing, Mailing Service, Postage)
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Hickman, Will State Board Of Education District State Board Of Education

SCHEDULE F1

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

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/Officenoider/Politica	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_				
Sch: 2/33 Rpt: 18/50	Charter Schools Now PAC 00090924					
4 Date	5 Payee name					
10/15/2022	Arena LLC					
6 Amount (\$)	7 Payee address; City; State; Zip Code	_				
\$4,120.00	1260 Stringham Ave #350					
Expenditure from corporate funds	Salt Lake City, UT 84106					
8 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					
	Direct Mail (Design, Printing, Mailing Service, Postage)					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
experialitate to beliefit 6/01	Watson, Kirk Mayor None					
Date	Payee name					
10/15/2022	Arena LLC					
Amount (\$)	Payee address; City; State; Zip Code	_				
\$3,599.00	1260 Stringham Ave #350					
, , , , , , , , , , , , , , , , , , , ,						
Expenditure from corporate funds	Salt Lake City, UT 84106					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Advertising Expense					
EXI ENDITORE	Check if Austin, TX, officeholder living expense					
	Direct Mail (Design, Printing, Mailing Service, Postage): in-kind to Angie Chen Button Campaign					
		_				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
experialitate to beliefit 6/01	'					
Date	Payee name					
10/15/2022	Arena LLC					
Amount (\$)	Payee address; City; State; Zip Code	_				
\$3,554.00	1260 Stringham Ave #350					
40,0000						
Expenditure from corporate funds	Salt Lake City, UT 84106					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_				
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	Direct Mail (Design, Printing, Mailing Service,					
	Postage): in-kind to Ben Bumgarner Campaign					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
expenditure to benefit C/O	expenditure to benefit C/OH					
		_				

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/Officenoider/Politica	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 3/33 Rpt: 19/50	Charter Schools Now PAC 00090924	
4 Date	5 Payee name	
10/15/2022	Arena LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$4,336.00	1260 Stringham Ave #350	
Expenditure from corporate funds	Salt Lake City, UT 84106	
8 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	
	Direct Mail (Design, Printing, Mailing Service, Postage): in-kind to Caroline Harris Campaign	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/Ol		
Date	Payee name	
10/15/2022	Arena LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$4,256.00	1260 Stringham Ave #350	
Expenditure from corporate funds	Salt Lake City, UT 84106	
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	
	Direct Mail (Design, Printing, Mailing Service, Postage): in-kind to Grant Moody Campaign	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O	1	
Date	Payee name	
10/15/2022	Arena LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$4,196.00	1260 Stringham Ave #350	
Expenditure from corporate funds	Salt Lake City, UT 84106	
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 Direct Mail (Design, Printing, Mailing Service,	
	Postage): in-kind to John Lujan Campaign	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O	o	
		_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations I 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	al Committee Legal Services Salaries/Wages/Contr	,
	The Instruction Guide explains how to complete th	is form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/33 Rpt: 20/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	
10/15/2022	Arena LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$3,789.00	1260 Stringham Ave #350	
Expenditure from corporate funds	Salt Lake City, UT 84106	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
OF		Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		ect Mail (Design, Printing, Mailing Service,
	Pos	stage): in-kind to Lacey Hull Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
10/21/2022	Arena LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$8,771.00	1260 Stringham Ave #350	
Ψ0,771.00	1200 Stringham Ave #330	
Expenditure from corporate funds	Salt Lake City, UT 84106	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE	I — I —	Check if Austin, TX, officeholder living expense
		ect Mail (Design, Printing, Mailing Service,
	Pos	stage)
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	^H Hickman, Will State Board Of E	ducation District State Board Of Education
Date	Device serve	
	Payee name	
10/21/2022	Arena LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,599.00	1260 Stringham Ave #350	
Expenditure from corporate funds	Salt Lake City, UT 84106	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
OF		Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		ect Mail (Design, Printing, Mailing Service,
	Pos	stage): in-kind to Angie Chen Button Campaign
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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7	
1 Total pages Schedule F1: Sch: 5/33 Rpt: 21/50	2 FILER NAME Charter Schools Now PAC 3 Filer ID (Ethics Commission Filers) 00090924
4 Date	5 Payee name
10/21/2022	Arena LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,554.00	1260 Stringham Ave #350
Expenditure from corporate funds	Salt Lake City, UT 84106
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Direct Mail (Design, Printing, Mailing Service,
	Postage): in-kind to Ben Bumgarner Campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/21/2022	Arena LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4,196.00	1260 Stringham Ave #350
Expenditure from corporate funds	Salt Lake City, UT 84106
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Direct Mail (Design, Printing, Mailing Service,
	Postage): in-kind to John Lujan Campaign
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/21/2022	Arena LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4,196.00	1260 Stringham Ave #350
Expenditure from corporate funds	Salt Lake City, UT 84106
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LAFLINDITUKE	Check if Austin, TX, officeholder living expense
	Direct Mail (Design, Printing, Mailing Service,
	Postage): in-kind to John Lujan Campaign
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 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

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 6/33 Rpt: 22/50	Charter Schools Now PAC	00090924			
4 Date	5 Payee name				
10/21/2022	Arena LLC				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$3,789.00	1260 Stringham Ave #350				
Expenditure from corporate funds	Salt Lake City, UT 84106				
8 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 Direct Mail (Design, Printing, Mailing Service,			
		Postage): in-kind to Lacey Hull Campaign			
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	laht Office held			
expenditure to benefit C/O		ight Office netd			
·					
Date	Payee name				
10/27/2022	Arena LLC				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$2,000.00	1260 Stringham Ave #350				
Expenditure from corporate funds	Salt Lake City, UT 84106				
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.			
EXPENDITURE		Check if Austin, TX, officeholder living expense			
		Digital Ads: In-kind contribution for Jamee Jolly			
		Campaign			
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight Office held			
expenditure to benefit C/O	1				
Date	Payee name				
10/27/2022	Arena LLC				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$2,000.00	1260 Stringham Ave #350				
Expenditure from corporate funds	Salt Lake City, UT 84106				
·	·	(n) = 1 · ·			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense			
		Digital Ads			
Complete ONLY if direct	Candidate/Officeholder name Office sou	I Ight Office held			
expenditure to benefit C/O		presentative District 108 State Representative District			
		·			

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	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 (Ethics Commission Filers)
Sch: 7/33 Rpt: 23/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/27/2022	Arena LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8,771.00	1260 Stringham Ave #350
Expenditure from corporate funds	Salt Lake City, UT 84106
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Direct Mail (Design, Printing, Mailing Service, Postage)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/01	Hickman, Will State Board Of Education District State Board Of Education
Date	Payee name
10/27/2022	Arena LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,879.00	1260 Stringham Ave #350
Expenditure from corporate funds	Salt Lake City, UT 84106
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 Direct Mail (Design, Printing, Mailing Service,
	Postage)
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	·
Date 10/18/2022	Payee name Pon Pumgarnar Campaign
	Ben Bumgarner Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	5150 Kensington Ct.
Expenditure from corporate funds	Flower Mound, TX 75022
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee
	Campaign Continuution
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 Event Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica			ards/Memorials Expen ervices		rinting Expe alaries/Wag			Travel Out of Dis OTHER (enter a	strict category not listed above)	
	Credit Card Payment		The In	struction Guide e	xplains hov	v to com	plet	te this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 8/33 Rpt: 24/50		Charter Schools I	Now PAC					00090924		
4	Date	5	Payee name								
	10/06/2022		Best Western Plu	S							
6	Amount (\$)	7	Payee address;	City;	State; Z	zip Code	9				
	\$347.92		333 Roland Ave.								
_	T Expenditure from										
L	corporate funds		San Antonio, TX	78210							
8	PURPOSE OF	(a)	Category (See Categ	ories listed at the top	of this schedul	le) (b) <u> </u>	Description			
	EXPENDITURE		Travel In District				ļ	Check if travel outsid Check if Austin, TX, o			
								Staff Lodging for		ехрепас	
								3 3	J		
9	Complete ONLY if direct		Candidate/Officehold	er name	Offic	ce sough	nt		Office he	eld	_
	expenditure to benefit C/OI	-									
	Date		Payee name								
	10/18/2022		Caroline Harris C	ampaign							
	Amount (\$)		Payee address;	City;	State; Z	Zip Code)				
	\$5,000.00		PO Box 70								
_	T Expenditure from										
L	corporate funds		Round Rock, TX	78680							
	PURPOSE OF	(a)	Category (See Categ			le) (b) (Description			
	EXPENDITURE		Contributions/Dor Candidate/Office			.	ļ	Check if travel outsid Check if Austin, TX, o			
			Candidate/Officer	ioidei/Foillicai	Committee		L	Campaign Contri		о.,роп.,во	
	Complete ONLY if direct		Candidate/Officehold	er name	Offic	ce sough	nt		Office he	eld	_
	expenditure to benefit C/O	1									
	Date		Payee name								
	10/14/2022		Carr Marketing, In	nc							
	Amount (\$)		Payee address;	City;	State; Z	Zip Code	9				
	\$876.30		131 Honeycomb	Ct							
	T Expenditure from										
L	corporate funds		Encinitas, CA 920)24							
_	PURPOSE OF	(a)	Category (See Categ		of this schedul	le) (t	o)	Description	_		
	EXPENDITURE		Advertising Exper	nse			ļ	Check if travel outsid Check if Austin, TX, o			
							Ļ	Texting Service	omeendidel livilig	слренос	
								. g ==:::: g			
	Complete ONLY if direct		Candidate/Officehold	er name	Offic	ce sough	nt		Office he	eld	_
	expenditure to benefit C/O	۱ ۱	Watson, Kirk		May	yor			None		
											_

SCHEDULE F1

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

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	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 (Ethics Commission Filers)
Sch: 9/33 Rpt: 25/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/14/2022	Carr Marketing, Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,340.10	131 Honeycomb Ct
Expenditure from corporate funds	Encinitas, CA 92024
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
	Texting Service
	TOATING CETVICE
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	<u> </u>
Date	Payee name
10/14/2022	Carr Marketing, Inc
Amount (\$)	Payee address; City; State; Zip Code
\$1,171.50	131 Honeycomb Ct
- Cynanditura fram	
Expenditure from corporate funds	Encinitas, CA 92024
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Texting Service: in-kind to Angie Chen Button
	Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
10/14/2022	Carr Marketing, Inc
Amount (\$)	Payee address; City; State; Zip Code
\$1,039.05	131 Honeycomb Ct
Expenditure from corporate funds	Encinitas, CA 92024
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVDENDITURE	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Texting Service: in-kind to Ben Bumgarner
	Campaign
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 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 Salaries (Contract Labor

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 10/33 Rpt: 26/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	
10/14/2022	Carr Marketing, Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	е
\$2,409.30	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
8 PURPOSE OF	,	Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Texting Service: in-kind to Caroline Harris Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI		
Date	Payee name	
10/14/2022	Carr Marketing, Inc	
	-	
Amount (\$)	Payee address; City; State; Zip Code	9
\$296.85	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Texting Service: in-kind to Jamee Jolly Campaign
		Texting Service. In-kind to same somy Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI	•	it Office field
Date	Payee name	
10/14/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Zip Code	e
\$1,580.40	131 Honeycomb Ct	
Expenditure from		
corporate funds	Encinitas, CA 92024	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Texting Service: in-kind to John Lujan Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 F	iler ID (Ethics Commission Filers)
Sch: 11/33 Rpt: 27/50	Charter Schools Now PAC	C	00090924
4 Date	5 Payee name		
10/14/2022	Carr Marketing, Inc		
6 Amount (\$)	7 Payee address; City; State; Zip Co	de	
\$1,494.30	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
8 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.
EXPENDITORE		ш	ficeholder living expense
		rexting Service: II	n-kind to Lacey Hull Campaign
O Commission ONLL V if disease	Condidate/Officeholder name	n.la.t	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt	Office held
Date	Payee name		
10/14/2022	Carr Marketing, Inc		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$282.90	131 Honeycomb Ct		
Expenditure from			
corporate funds	Encinitas, CA 92024		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Advertising Expense	ш	of Texas. Complete Schedule T. fficeholder living expense
		Texting Service	institute. Itting expenses
		G	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
expenditure to benefit C/O	H Meyer, Morgan State Re	oresentative District 10	08 State Representative District
Date	Payee name		
10/14/2022	Carr Marketing, Inc		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$866.10	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF	Advertising Expense		of Texas. Complete Schedule T.
EXPENDITURE			fficeholder living expense
		Texting Service: ii	n-kind to Oscar Longoria Campaign
Occupator Children	Overdidate/Office haldening	-1-4	Off: -
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnı	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 12/33 Rpt: 28/50	Charter Schools Now PAC		00090924
4 Date	5 Payee name		
10/14/2022	Carr Marketing, Inc		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$1,534.20	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
			Texting Service: in-kind to Tony Tinderholt Campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
·			
Date 10/20/2022	Payee name		
	Carr Marketing, Inc	- d -	
Amount (\$) \$874.72	Payee address; City; State; Zip Co 131 Honeycomb Ct	oae	
φ014.12	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
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
			Message Phone Calls: in-kind to Angie Chen Button
			Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
Date	Payee name		
10/20/2022	Carr Marketing, Inc		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$1,518.72	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
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
			Message Phone Calls: in-kind to Caroline Harris
			Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight	Office held
expenditure to benefit 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 13/33 Rpt: 29/50	Charter Schools Now PAC		00090924
4 Date	5 Payee name		-
10/20/2022	Carr Marketing, Inc		
6 Amount (\$)	7 Payee address; City; State; Zip Co	de	
\$1,018.64	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
8 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 Message Phone Calls: in-kind to John Lujan
			Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
expenditure to benefit C/O		9	Since hold
Date	Payee name		
10/20/2022	Carr Marketing, Inc		
	<u> </u>	do	
Amount (\$)	Payee address; City; State; Zip Co	ue	
\$983.64	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
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 Message Phone Calls: in-kind to Lacey Hull
			Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
expenditure to benefit C/O		0	
Date	Payee name		
10/20/2022	Carr Marketing, Inc		
	-	do	
Amount (\$) \$685.16	Payee address; City; State; Zip Co 131 Honeycomb Ct	ue	
Ψ003.10	131 Honeycomb Ct		
Expenditure from corporate funds	Encinitas, CA 92024		
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 Message Phone Calls: in-kind to Oscar Longoria
			Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
expenditure to benefit C/O		grit	Office Held

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

Credit Card F dyment	The Instruction Guide explains how	to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/33 Rpt: 30/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	
10/27/2022	Carr Marketing, Inc	
6 Amount (\$)	7 Payee address; City; State; Zi) Code
\$525.60	131 Honeycomb Ct	
Expenditure from		
corporate funds	Encinitas, CA 92024	
8 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
		Texting Service
9 Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held
expenditure to benefit C/OI	H Buckley, Brad State	Representative District 54 State Representative District 54
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Zi) Code
\$490.80	131 Honeycomb Ct	
	•	
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Texting Service
Complete ONLY if direct		sought Office held
expenditure to benefit C/OI	¹ Chen Button, Angie State	Representative District 112 State Representative District
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Zi) Code
\$1,109.55	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
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.
LAFENDITORE		Check if Austin, TX, officeholder living expense
		Texting Service
Complete ONLY if direct	Candidate/Officeholder name Office	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	1	sought Office held Representative District 122 None
	Dorazio, Mark State	representative District 122 None

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 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)

The Instruction Guide explains how to complete this fo

EXPENDITURE CATEGORIES FOR BOX 8(a)

	ine instruction Guide explains now t	to complete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 15/33 Rpt: 31/50 4 Date	Charter Schools Now PAC 5 Pavee name	00090924
10/27/2022	5 Payee name Carr Marketing, Inc	
6 Amount (\$)	7 Payee address; City; State; Zip) Code
\$552.45	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
Complete ONLY if direct expenditure to benefit C/OF		sought Office held Representative District 61 None
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Zip) Code
\$746.85	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
Complete ONLY if direct		sought Office held
expenditure to benefit C/OI	^H Guillen, Ryan State	Representative District 31 State Representative District 31
Date 10/27/2022	Payee name Carr Marketing, Inc	
Amount (\$) \$725.40	Payee address; City; State; Zip 131 Honeycomb Ct) Code
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	_1	sought Office held Representative District 52 None

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 16/33 Rpt: 32/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	·
10/27/2022	Carr Marketing, Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$3,308.85	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
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
		Texting Service
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held
expenditure to benefit C/O	1	oard Of Education District State Board Of Education
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Zip C	Pada
\$689.40	131 Honeycomb Ct	Soute
φυσο. υ	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if Austin TX officeholder living expense.
		Check if Austin, TX, officeholder living expense Texting Service
		Toxing Service
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI		epresentative District 138 State Representative District
Date		
10/27/2022	Payee name Carr Marketing, Inc	
	<u> </u>	
Amount (\$)	Payee address; City; State; Zip C	code
\$558.30	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
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.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Texting Service
Complete ONLY if direct	Condidate/Officeholder name Office of	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Jolly, Jamee State R	ought Office held epresentative District 70 None
	Jolly, Jamee State K	epresentative district 70 None

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)

The Instruction Guide explains how to co

	i ne instruction Guide explains now	to complete this form.
1 Total pages Schedule F1: Sch: 17/33 Rpt: 33/50	2 FILER NAME Charter Schools Now PAC	3 Filer ID (Ethics Commission Filers) 00090924
4 Date	5 Payee name	I
10/27/2022	Carr Marketing, Inc	
6 Amount (\$)	7 Payee address; City; State; Z	p Code
\$521.10	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
9 Complete ONLY if direct	1	e sought Office held
expenditure to benefit C/OI	¹ Leach, Jeff Stat	e Representative District 67 State Representative District 67
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$) \$387.75	Payee address; City; State; Z	p Code
\$387.75	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
Complete ONLY if direct		e sought Office held
expenditure to benefit C/OI	1 Longoria, Oscar Stat	e Representative District 35 State Representative District 35
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Z	p Code
\$710.10	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule	´ l <u>—</u>
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e sought Office held
experience to benefit C/Of	[¬] Lujan, John Stat	e Representative District 118 State Representative District

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

Credit Card F dyment	The Instruction Guide explains how	to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/33 Rpt: 34/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	
10/27/2022	Carr Marketing, Inc	
6 Amount (\$)	7 Payee address; City; State; Z	p Code
\$560.55	131 Honeycomb Ct	
Expenditure from		
corporate funds	Encinitas, CA 92024	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Texting Service
9 Complete ONLY if direct		e sought Office held
expenditure to benefit C/OI	H Meyer, Morgan Stat	e Representative District 108 State Representative District
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Z	ip Code
\$564.00	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Texting Service
Complete ONLY if direct		e sought Office held
expenditure to benefit C/OI	H Shaheen, Matt Stat	e Representative District 66 State Representative District 66
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State; Z	ip Code
\$1,017.30	131 Honeycomb Ct	
Expenditure from corporate funds	Encinitas, CA 92024	
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.
L/II LIIDI. G.I.L		Check if Austin, TX, officeholder living expense
		Texting Service
Complete ONLY if direct	Candidate/Officeholder name Offic	e sought Office held
expenditure to benefit C/OI	_1	e Representative District 65 None
		Tropiosofitativo District os Trons

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

ense Travel in Di ense Travel Out ges/Contract Labor OTHER (er

	The Instruction Guide explains	how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 19/33 Rpt: 35/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	·
10/27/2022	Carr Marketing, Inc	
6 Amount (\$)	7 Payee address; City; State:	Zip Code
\$784.50	131 Honeycomb Ct	
	-	
Expenditure from corporate funds	Encinitas, CA 92024	
8 PURPOSE	(a) Category (See Categories listed at the top of this sch	edule) (b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
-		Check if Austin, TX, officeholder living expense Texting Service
		Texting Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought Office held
experience to benefit eye	Tinderholt, Tony	State Representative District 94 State Representative District 94
Date	Payee name	
10/27/2022	Carr Marketing, Inc	
Amount (\$)	Payee address; City; State:	Zip Code
\$396.90	131 Honeycomb Ct	
,		
Expenditure from corporate funds	Encinitas, CA 92024	
PURPOSE	(a) Category (See Categories listed at the top of this sch	edule) (b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Texting Service
Consider CNIV's disease	Open in the Coff on the University	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/O	1	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O		Office sought Office held Mayor None
expenditure to benefit C/OI	H Watson, Kirk	
expenditure to benefit C/O	H Watson, Kirk Payee name Carr Marketing, Inc	
expenditure to benefit C/Ol Date 10/27/2022	H Watson, Kirk Payee name Carr Marketing, Inc	Mayor None
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$)	Payee name Carr Marketing, Inc Payee address; City; State	Mayor None
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$)	Payee name Carr Marketing, Inc Payee address; City; State	Mayor None
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct	Mayor None Zip Code
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE OF	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T.
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024 (a) Category (See Categories listed at the top of this sch	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE OF	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024 (a) Category (See Categories listed at the top of this sch	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T.
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE OF EXPENDITURE	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024 (a) Category (See Categories listed at the top of this sch Advertising Expense	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024 (a) Category (See Categories listed at the top of this sch Advertising Expense	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE OF EXPENDITURE	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024 (a) Category (See Categories listed at the top of this sch Advertising Expense	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024 (a) Category (See Categories listed at the top of this sch Advertising Expense	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service
expenditure to benefit C/Ol Date 10/27/2022 Amount (\$) \$6,862.34 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Carr Marketing, Inc Payee address; City; State 131 Honeycomb Ct Encinitas, CA 92024 (a) Category (See Categories listed at the top of this sch Advertising Expense	Alayor None Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service

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	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 (Ethics Commission Filers)
Sch: 20/33 Rpt: 36/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/06/2022	Charter Schools Now
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$19,072.96	3005 S Lamar Blvd, Ste D-447
Expenditure from corporate funds	Austin, TX 78704
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Staff Time Reimbursement to CSN
	Stail Time Reimbulsement to Colv
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	<u> </u>
Date	Payee name
10/18/2022	Dr. Brad Buckley Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	1321 Pershing Drive
Expenditure from corporate funds	Killeen, TX 76549
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/28/2022	Facebook
Amount (\$)	Payee address; City; State; Zip Code
\$80.70	1 Hacker Way
Expenditure from corporate funds	Menlo Park, CA 94022
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Social Media Advertising
_	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H Bumgarner, Ben State Representative District 63 None

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/33 Rpt: 37/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	
10/28/2022	Facebook	
6 Amount (\$)	7 Payee address; City; State; Zip C	rode
\$525.40	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
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
		Social Media Advertising
9 Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/OI		epresentative District 112 State Representative District
5.		
Date	Payee name	
10/28/2022	Facebook	
Amount (\$)	Payee address; City; State; Zip C	ode
\$278.58	1 Hacker Way	
— Formanditure from		
Expenditure from corporate funds	Menlo Park, CA 94022	
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.
EXPENDITURE	٠	Check if Austin, TX, officeholder living expense
		Social Media Advertising
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OI	Harris, Caroline State Ro	epresentative District 52 None
Date	Payee name	
10/28/2022	Facebook	
Amount (\$)	Payee address; City; State; Zip C	rode
\$1,131.67	1 Hacker Way	
	•	
Expenditure from corporate funds	Menlo Park, CA 94022	
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.
EXPENDITORE	- ,	Check if Austin, TX, officeholder living expense
		Social Media Advertising
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OI	¹ Hickman, Will State Bo	pard Of Education District State Board Of Education

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

Credit Card Payment	The Instruction Guide explains how	to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 22/33 Rpt: 38/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	·
10/28/2022	Facebook	
6 Amount (\$)	7 Payee address; City; State; Zip) Code
\$649.20	1 Hacker Way	
- Evpanditura from		
Expenditure from corporate funds	Menlo Park, CA 94022	
8 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 Social Media Advertising
		Social integral Advertising
9 Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held
expenditure to benefit C/OI		Representative District 138 State Representative District
Date		<u> </u>
10/28/2022	Payee name Facebook	
		Code
Amount (\$)	Payee address; City; State; Zip) Code
\$235.46	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
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 Social Media Advertising
		Social Media / Averasing
Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held
expenditure to benefit C/OI	_	Representative District 70 None
Date	-	<u>'</u>
10/28/2022	Payee name Facebook	
		Code
Amount (\$) \$720.23	Payee address; City; State; Zip	Code
Φ120.23	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
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
		Social Media Advertising
Complete ONLY if direct	Condidate/Officeholder name Office	e sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	1	e sought Office held Representative District 35 State Representative District 35
	Longoria, Oscar State	Representative district 33 State Representative district 33

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Indeed, the street of the street of

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 Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide e	xplains how to complete this	s form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 23/33 Rpt: 39/50	Charter Schools Now PAC		00090924	
4 Date	5 Payee name		•	
10/28/2022	Facebook			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
\$874.35	1 Hacker Way			
Expenditure from				
corporate funds	Menlo Park, CA 94022			
8 PURPOSE	(a) Category (See Categories listed at the top of	of this schedule) (b) Desc	cription	
OF EXPENDITURE	Advertising Expense		heck if travel outside of Texas. Comp	
			heck if Austin, TX, officeholder living all Media Advertising	expense
			ar wedia / avertising	
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office he	d
expenditure to benefit C/OI			tive District 118 State Re	
Date	Payee name			
10/28/2022	Facebook			
Amount (\$)	Payee address; City;	State; Zip Code		
\$143.06	1 Hacker Way	μ		
Expenditure from corporate funds	Menlo Park, CA 94022			
PURPOSE OF	(a) Category (See Categories listed at the top of		•	
EXPENDITURE	Advertising Expense		heck if travel outside of Texas. Comp heck if Austin, TX, officeholder living	
		-	al Media Advertising	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office he	d
expenditure to benefit C/OI	^H Meyer, Morgan	State Representa	tive District 108 State Re	epresentative District
Date	Payee name			
10/28/2022	Facebook			
Amount (\$)	Payee address; City;	State; Zip Code		
\$789.85	1 Hacker Way			
- Funanditura from				
Expenditure from corporate funds	Menlo Park, CA 94022			
PURPOSE	(a) Category (See Categories listed at the top of	of this schedule) (b) Desc	cription	
OF EXPENDITURE	Advertising Expense		heck if travel outside of Texas. Comp	
			heck if Austin, TX, officeholder living all Media Advertising	expense
		3001	ai wedia Advertising	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office sought	Office he	ld
expenditure to benefit C/OI		Mayor	None	· -
	·			

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 (Ethics Commission Filers)							
Sch: 24/33 Rpt: 40/50	Charter Schools Now PAC 00090924							
4 Date	5 Payee name							
10/18/2022	Frazier for Texas							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$2,500.00	4100 Eldorado Pkwy Ste 100 PMB 241							
Expenditure from	McKinney, TX 75070							
corporate funds	Wickliney, 1A 75070							
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							
	Campaign Contribution							
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
10/10/2022	Impact Advertising, LLC							
Amount (\$)	Payee address; City; State; Zip Code							
` '								
\$6,000.00	3685 S. 500 W.							
- Cynanditura fram								
Expenditure from corporate funds	Salt Lake City, UT 84115							
PURPOSE								
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	Video Production, Online Ads: in-kind to Oscar							
	Longoria Campaign							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
10/11/2022	Impact Advertising, LLC							
Amount (\$)	Payee address; City; State; Zip Code							
\$3,612.00	3685 S. 500 W.							
Expenditure from corporate funds	Salt Lake City, UT 84115							
-								
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 Direct Mail: in-kind to Oscar Longoria Campaign							
	Direct Mail. III-Kinu to Oscar Longona Campaign							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/O	1							

SCHEDULE F1

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

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	al 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 (Ethics Commission Filers)
Sch: 25/33 Rpt: 41/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/18/2022	Jamee Jolly Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,000.00	PO Box 260927
Expenditure from corporate funds	Plano, TX 75026
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 Campaign Contribution
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
10/18/2022	Janie Lopez for Texas House
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 2073
— Formanditure from	
Expenditure from corporate funds	San Benito, TX 78586
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
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
10/18/2022	John Lujan for State Representative
Amount (\$)	Payee address; City; State; Zip Code
\$10,000.00	20003 FM 1937
Expenditure from corporate funds	San Antonio, TX 78221
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
	0 " 1 1 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
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

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 (Ethics Commission Filers)
Sch: 26/33 Rpt: 42/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/18/2022	Kronda Thimesch Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code PO Box 118978
\$2,500.00	PO BOX 118978
Expenditure from corporate funds	Carrollton, TX 75011
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/18/2022	Lacey Hull for Texas
	,
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 19231
Expenditure from corporate funds	Houston, TX 77224
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/18/2022	Luis Villarreal Jr. Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 1
— Foresanditure Cons	
Expenditure from corporate funds	Harlingen, TX 78550
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONII V Station	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 27/33 Rpt: 43/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/18/2022	Morgan LaMantia Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	1324 E. Madison
Expenditure from corporate funds	Brownsville, TX 78520
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/18/2022	Morgan Meyer Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	3838 Oak Lawn Avenue Ste 400
40,000.00	Soos San Lamin World Sto 100
Expenditure from corporate funds	Dallas, TX 75219
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/06/2022	RightSide Compliance LLC
Amount (\$)	Payee address; City; State; Zip Code
\$1,512.50	PO Box 341027
+1,012.00	. 6 26/16 :202
Expenditure from corporate funds	Austin, TX 78734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
D. LIBITORE	Candidate/Officeholder/Political Committee
	Compliance Consulting
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 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

Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 28/33 Rpt: 44/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	
10/10/2022	SchoolForward LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$400.00	6 KnobHill	
Expenditure from corporate funds	Park City, UT 84098	
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
		Graphic Design
		orapino 2 co.g
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field
Date	Payee name	
09/30/2022	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$4.70	510 Townsend St	
Expenditure from		
corporate funds	San Francisco, CA 94103	
PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description
EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
		orealt cara merchant rees
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field
Date	Payee name	
10/04/2022	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$228.85	510 Townsend St	
Expenditure from		
corporate funds	San Francisco, CA 94103	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
experialitie to belieff 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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 29/33 Rpt: 45/50	Charter Schools Now PAC	00090924
4 Date	5 Payee name	•
10/05/2022	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$3.60	510 Townsend St	
— Foresedit ve from		
Expenditure from corporate funds	San Francisco, CA 94103	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Merchant Fees
		Credit Card Merchant Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	Office held
expenditure to benefit C/OI		agrit Office field
Date	Davis and	
10/11/2022	Payee name Stripe	
Amount (\$)	Payee address; City; State; Zip Co	nda
\$46.32	510 Townsend St	oue.
Ψ+0.52	310 Townsend St	
Expenditure from corporate funds	San Francisco, CA 94103	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght Office held
expenditure to benefit C/OI	1	
Date	Payee name	
10/12/2022	Stripe	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$4.48	510 Townsend St	
Expenditure from corporate funds	San Francisco, CA 94103	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
LXI LINDITORE		Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	 aht Office held
expenditure to benefit C/OI		Agric Office field

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/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 30/33 Rpt: 46/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/13/2022	Stripe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$220.30	510 Townsend St
Expenditure from corporate funds	San Francisco, CA 94103
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Credit Card Merchant Fees
	Creat Cara Werchart rees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/14/2022	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$36.96	510 Townsend St
Expenditure from corporate funds	San Francisco, CA 94103
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Credit Card Merchant Fees
	Cleur Card Welchart Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
10/18/2022	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$23.16	510 Townsend St
Expenditure from corporate funds	San Francisco, CA 94103
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Credit Card Merchant Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)	
L	Sch: 31/33 Rpt: 47/50		Charter Sch	ools Now PAC					L	00090924		
4	Date	5	Payee name									
	10/19/2022		Stripe									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode					
	\$28.04		510 Townse	end St								
	Expenditure from corporate funds		San Francis	sco, CA 94103								
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Accounting/		top or time cont	oudioj		_ ·	outsi	de of Texas. Comp	olete Schedule T.	
	EXPENDITORE							—		officeholder living	expense	
								Credit Card M	/ler	cnant Fees		
<u> </u>							<u> </u>					
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	C	Office sou	ıght			Office he	eld	
	Date		Payee name									
	10/24/2022		Stripe									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					
	\$2.50		510 Townse	end St								
	Expenditure from corporate funds		San Francis	sco, CA 94103								
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Accounting/		•	-		□		de of Texas. Comp		
	_//									officeholder living	expense	
								Credit Card M	/ICI(chant Fees		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	C	Office sou	<u>l</u> ıght			Office he	eld	
L		_										_
	Date		Payee name									
	10/26/2022		Stripe									
	Amount (\$)		Payee addres		State;	Zip Co	ode					
	\$0.63		510 Townse	end St								
	Expenditure from corporate funds		San Francis	sco, CA 94103								
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Accounting/	Banking (ш		de of Texas. Comp		
								Credit Card M		officeholder living	expense	
								Sicult Card IV	,,,,,,,	onant i ces		
\vdash	Complete ONLY if direct	Ц	`andidate/Offi	ceholder name		Office sou	labt			Office he	ald.	_
	expenditure to benefit C/O		Januiuale/OIII	condider Hairie	C	7111CG 20U	agrit			Office He	Ju	

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 Salaries (Contract Labor,

Credit Card Payment	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	<u> </u>	_						
Sch: 32/33 Rpt: 48/50	Charter Schools Now PAC 00090924							
4 Date	5 Payee name							
10/04/2022	The Gober Group PLLC							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$747.50	PO Box 341016							
Expenditure from corporate funds	Austin, TX 78734							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	Legal Services							
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-						
expenditure to benefit C/OI								
		=						
Date	Payee name							
10/18/2022	The Matt Shaheen Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$2,500.00	3917 Malton Dr.							
Expenditure from corporate funds	Plano, TX 75025							
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							
	Campaign Contribution							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI	7							
Date	Payee name							
10/06/2022	The Westin							
Amount (\$)	Payee address; City; State; Zip Code	_						
\$302.62	9821 Colonnade Blvd.							
Expenditure from corporate funds	San Antonio, TX 78230							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_						
OF	Travel In District Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Check if Austin, TX, officeholder living expense							
	Staff Lodging for Meeting							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI	₹							
		_						

SCHEDULE F1

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

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.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 33/33 Rpt: 49/50	Charter Schools Now PAC 00090924
4 Date	5 Payee name
10/18/2022	Tony Tinderholt for Texas House
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	PO Box 172713
Expenditure from	A 15 - 14 - 17 V 70000
corporate funds 8 PURPOSE	Arlington, TX 76003
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
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Data	
Date	Payee name
10/14/2022	VanillaGift.com
Amount (\$)	Payee address; City; State; Zip Code
\$505.95	PO Box 826
Expenditure from corporate funds	Forston, GA 31808
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Thank You Gift
	Thank fou Gilt
Commission ONII V if dispost	Condidate/Officeholder neme
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date	Davida marea
	Payee name Will Hickman Compaign
10/18/2022	Will Hickman Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	14053 Memorial Drive, #322
Expenditure from	
corporate funds	Houston, TX 77079
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 Campaign Contribution
	Campaign Contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	U

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 50/50 2 FILER NAME Filer ID (Ethics Commission Filers) Charter Schools Now PAC 00090924 8 Amount (\$) Date 5 Name of person from whom amount is received 09/30/2022 **CVS Pharmacy** \$54.13 6 Address of person from whom amount is received; City; State; Zip Code 2101 South Lamar Blvd., Unit B Austin, TX 78704 Purpose for which amount is received Check if political contribution returned to filer Credit: Volunteer Gifts Amount (\$) Name of person from whom amount is received Date 10/24/2022 **CVS Pharmacy** \$50.00 Address of person from whom amount is received; City; State; Zip Code 2101 South Lamar Blvd., Unit B Austin, TX 78704 Purpose for which amount is received Check if political contribution returned to filer Credit: Volunteer Gifts