FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / **FIRST** MS/MRS/MR МІ OFFICE USE ONLY **OFFICEHOLDER** Charles "CB" NAME **NICKNAME** LAST **SUFFIX** Team Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE OFFICEHOLDER PO Box 470123 **MAILING** Receipt # Amount **ADDRESS** X Change of Address Fort Worth, TX 76147 Date Processed Date Imaged **CAMPAIGN** MS/MRS/MR **FIRST** МІ **TREASURER** NAME Bill NICKNAME LAST **SUFFIX** Tinsley **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY; STATE: ZIP CODE **TREASURER ADDRESS** 6421 Camp Bowie Blvd., Suite 302, Fort Worth, TX 76116 (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 737-5000 PHONE REPORT **TYPE** 15th day after campaign treasurer January 15 30th day before election Runoff appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) **PERIOD** Month Day Year Month Day Year **COVERED** 01/18/2019 **THROUGH** 03/25/2019 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 05/04/2019 χ General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) None Tarrant **Tarrant Regional Water District Board GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

						2 of 23			
13 C / OH NAME	Team, Charles "CB"			14 Filer ID					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may	cepted or political expenditury have been made without red to report this information	the candidate's or officel	holder's ki	nowledge or			
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME			18	nee essayo			
	SPECIFIC	COMMITTEE ADDRES	is						
		COMMITTEE CAMPAIC	GN TREASURER NAME						
		COMMITTEE CAMPAIC	GN TREASURER ADDRES	SS					
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF ARANTEES OF LOANS)	OF \$50 OR LESS (OTHER T), UNLESS ITEMIZED	THAN PLEDGES,	\$	0.00			
		TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)							
EXPENDITURE TOTALS	3. TOTAL POLITICA	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED							
	4. TOTAL POLITIC	AL EXPENDITURES			\$	6,574.83			
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE		MAINTAINED AS OF THE L	AST DAY OF THE	\$	17,145.70			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	14.00			
17 AFFADAVIT	CLIFTON ELLI Notary Public STATE OF TEXA My Comm. Exp. Aug. 28	S true sunde	rear, or affirm, under penalty and correct and includes a er Title 15, Election Code.	ty of perjury, that the acco all information required to f Candidate or Officehold	be report	g report is ed by me			
AFFIX NO	TARY STAMP / SEAL ABO	OVE							
Sworn to and subso	cribed before me, by the sa	ertify which, witness my h	nand and seal of office.	, this the	- 2	day			
Signature of office	cet atiministering	Printed name of off	ficer administering	Title of officer	admihiste	ring oath			

SUBTOTALS - C/OH

FORM C/OH

		CC	OVER SI	HEET PG 3 3 of 23
18 FILER NA		19 Filer ID		
Team, C	harles "CB"			
	LE SUBTOTALS SCHEDULE		SUBT	OTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	®	\$	23,050.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	609.86
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. X	SCHEDULE E: LOANS		\$	14.00
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	5,918.30
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	(e)	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	656.53
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 4/23 FILER NAME Filer ID Team, Charles "CB" Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/25/2019 \$500.00 Adams, Victoria Ann 6 Contributor address; City; State; Zip Code 2330 Medford Court Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Homemaker Homemaker Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/06/2019 Barbolla, Craig \$500.00 Contributor address; City; State; Zip Code 4950 Riverbend Court Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) **Employer (See Instructions) Mcdonald Sanders** Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 03/23/2019 Burnett, James \$200.00 Contributor address; City; State; Zip Code 417 Carter Coppell, TX 75016 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/20/2019 Cummings, Dana \$100.00 Contributor address; City; State; Zip Code 404 Crestwood Drive fort worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Broker **Township** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ 02/27/2019 \$250.00 Ellis, William T Contributor address; City; State; Zip Code 6932 Shadow Creek Court Fort Worth, TX 76132 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Owner Ellis & Tinsley, Inc.

	MONET	ARY POLITICA	AL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explain	s how to complete this	form.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/23	
2	FILER NAME				3	Filer ID	
	Team, Charl				L		
4	Date 03/25/2019		or out-of-state PAC (ID# Association of Realtors FO	R PAC	7	Amount of Contribution (\$)	\$5,000.00
		6 Contributor address; 2650 Parkview Driv	City; State; Zip Code				
		Fort Worth, TX 761	02				
8	Principal occu	pation / Job title (See Instr	ructions)	9 Employer (See Instructions	;)		
	Date	Full name of contribut	or out-of-state PAC (ID#	:		Amount of Contribution (\$)	
	02/09/2019	Hardeman, Joy					\$500.00
		Contributor address;					
		3215 Exposition Blv	/d, A13				
		Austin, TX 78703			L		
		pation / Job title (See Instr	ructions)	Employer (See Instructions	()		
	Sales			Austin Subaru			
	Date	Full name of contribut	or out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	02/08/2019	Huff, Grant					\$4,000.00
		Contributor address;	City; State; Zip Code				
		777 Main St #1100					
		5-4 Modb TV 704	00				
		Fort Worth, TX 7610		T	Ĺ		
		pation / Job title (See Instr	ructions)	Employer (See Instructions	5)		
	Real Estate	Broker		Transwestern			<u>. </u>
	Date	Full name of contribut	or out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	03/10/2019	Leavens, Alelaide					\$150.00
		Contributor address;	City; State; Zip Code				
		3839 South Hills Ci	rcle				
		5	00				
	Deinainal ann	Fort Worth, TX 7610		Fundamen (Con Instructions	Γ		
	Retired	pation / Job title (See Instr	uctions)	Employer (See Instructions)		
_	Relieu			Retired			
	Date	Full name of contribute	or out-of-state PAC (ID#)		Amount of Contribution (\$)	
	03/22/2019	Lombardi, Steven					\$100.00
		Contributor address;	City; State; Zip Code				
		3800 Lenox Dr					
		Fort Morth TV 761/	07				
	Dringing! occur	Fort Worth, TX 7610		Employer (See Instructions	Γ		
	-	pation / Job title (See Instr	ucuons)	Employer (See Instructions)		
	Banker			Legacy Texas			
							_

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/6 Rpt: 6/23 FILER NAME Filer ID 2 Team, Charles "CB" 5 Full name of contributor 7 Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/07/2019 Luskey, Stephen \$5,000.00 6 Contributor address; City; State; Zip Code 1120 Shady Oaks Lane Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Partner **Brazos Midstream** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 03/08/2019 \$1,000.00 McGlothlin, Sandra Contributor address; City; State; Zip Code 5301 Sun Valley Drive Fort Worth, TX 76119 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Owner **Empire Texas Equities** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/08/2019 \$200.00 McKeever, Kent Contributor address; City; State; Zip Code 2312 Mistletoe Drive Fort Worth, TX 76110 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Real Estate Broker Ellis & Tinsley, Inc. Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$50.00 03/23/2019 Page, Melissa Contributor address; City; State; Zip Code 1201 Latona St, Unit B Philadelphia, PA 19147 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Owner Mi Casita ut-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$250.00 03/14/2019 SJ Boswell Development Limited Partnership Contributor address; City; State; Zip Code 7201 Hawkins View Street 101 Fort Worth, TX 76132 Principal occupation / Job title (See Instructions) **Employer (See Instructions)**

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1				
F	The Instru	ction Guide explains how to complete th	his fo	rm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/23	
2	FILER NAME Team, Charl	es "CB"			3	Filer ID	
4	Date 03/12/2019	 Full name of contributor out-of-state PAC SJ Thornhill Partnership Contributor address; City; State; Zip Code 7201 Hawkins View Street 101 Fort Worth, TX 76132 	(ID#:)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)	9	9 Employer (See Instructions)		
	Date 02/20/2019	Full name of contributor out-of-state PAC Sands, Mike Contributor address; City; State; Zip Code 4740 Dexter Ave Fort Worth, TX 76107	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 03/13/2019	Full name of contributor out-of-state PAC Stocker Jr, Edward Contributor address; City; State; Zip Code 4816 Lafayette Ave Fort Worth, TX 76107	(ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu Partner	pation / Job title (See Instructions)		Employer (See Instructions Marsh/Wortham Insuran	-	e	<u>-</u>
	Date 03/25/2019	Full name of contributor out-of-state PAC Tatum, Stephen Contributor address; City; State; Zip Code 600 W. 6th Street, Suite 300 Fort Worth, TX 76102	(ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Cantey Hanger)		
	Date 02/07/2019	Full name of contributor out-of-state PAC Team, Craig Contributor address; City; State; Zip Code 3311 Cockrell Ave Fort Worth, TX 76109				Amount of Contribution (\$)	\$250.00
	Principal occu Oil & Gas	pation / Job title (See Instructions)		Employer (See Instructions KPI Land Resources)		
						1	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/6 Rpt: 8/23 Filer ID FILER NAME Team, Charles "CB" Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 03/25/2019 Tinsley, William \$250.00 6 Contributor address; City; State; Zip Code 6421 Camp Bowie, Blvd Suite 302 Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Broker Ellis & Tinsley, inc. Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 03/08/2019 \$100.00 Tucker, Melissa Contributor address; City; State; Zip Code 3700 W 7th Street Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Attorney Pappas Law Group Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 03/18/2019 \$1,000.00 Uloth, Ann Contributor address; City; State; Zip Code 400 Cedar Elm Court Irving, TX 75063 Principal occupation / Job title (See Instructions) **Employer (See Instructions) Fidelity** Financial Planner Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$500.00 02/10/2019 Vaughn, Billy Contributor address; City; State; Zip Code 4502 Long Island Lane Arlington, TX 76107 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 02/08/2019 Vaughn, Taylor Contributor address; City; State; Zip Code 2108 Morgan Drive Flower Flower Mound, TX 75028 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired

	MONET	^A	RY POLITICAL CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	cti	on Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/23	
2	FILER NAME Team, Charl	es	"CB"		3	Filer ID	
4	Date 03/06/2019	ļ	Full name of contributor out-of-state PAC (ID#:_ Vaughn, Taylor Contributor address; City; State; Zip Code 2108 Morgan Drive Flower)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu Retired	pat	Flower Mound, TX 75028 ion / Job title (See Instructions)	Employer (See Instructions Retired	<u>L</u> ;)		
	Date 02/07/2019		Full name of contributor out-of-state PAC (ID#:_ Vic Tinsley Family Partnership Contributor address; City; State; Zip Code 6421 Camp Bowie, Blvd Suite 302 Fort Worth, TX 76116)		Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pat	ion / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 02/18/2019	••••	Full name of contributor out-of-state PAC (ID#:_Watt Jr, W.R. Contributor address; City; State; Zip Code 5321 Benbridge Drive Fort Worth, TX 76107			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pat	ion / Job title (See Instructions)	Employer (See Instructions)		
						6	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	The Instru	ection Guide explains how to complete this f	orm.	1	Total pages Schedule A2: Sch: 1/1 Rpt: 10/23				
2	FILER NAME	<u> </u>		3	Filer ID				
	Team, Char	rles "CB"							
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5	Date 03/04/2019	6 Full name of contributor out-of-state PAC (ID#:	8	Amount of contribution (\$) In-kind contribution description \$500.00 Logo & Design Questions Assistance					
		Fort Worth, TX 76107			Check if travel outside of Texas. Complete Schedule T.				
10	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON						
12	! Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FC	OR JUDICIAL) (See instructions)				
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's	spouse (if any) (FOR JUDICIAL)				
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
	Date 03/25/2019	Full name of contributor out-of-state PAC (ID#:)		Amount of contribution (\$) In-kind contribution description \$54.93 Food & Beverage for Event				
		Fort Worth, TX 76109			Check if travel outside of Texas. Complete Schedule T.				
	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Cantey Hanger	-JU					
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FC	R JUDICIAL) (See instructions)				
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's	spouse (if any) (FOR JUDICIAL)				
	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
	Date 03/25/2019	Full name of contributor out-of-state PAC (ID#:			Amount of contribution (\$) In-kind contribution description \$54.93 Food & Beverage for Event				
		Fort Worth, TX 76107			Check if travel outside of Texas. Complete Schedule T.				
	Principal occu Consultant	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON- Self Employed	JU	DICIAL) (See instructions)				
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title ((FO	R JUDICIAL) (See instructions)				
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's :	spouse (if any) (FOR JUDICIAL)				
	If contributor i	s a child, law firm of parent(s) (if any) (FOR JUDICIAL)	-						

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to co	omplete this f	orm.	1	ges Schedule E: 2 Rpt: 11/23
2	FiLER NAME Team, Charles "	'CB"			3 Filer ID	
4	TOTAL OF UN	NITEMIZED LOANS				\$
5	Date of loan 01/29/2019	7 Name of lender Team, Charles (Mr.)	out-of-state PA	C (ID#:		9 Loan Amount (\$) \$5.00
6	Is lender a financial institution?	8 Lender address; City; 4019 Bunting Avenue	State;	Zip Code		10 Interest Rate
	No	Fort Worth, TX 76107				11 Maturity Date
12	Principal occupation Principal & Vice	on / Job title (See Instructions) President		13 Employer (See Instruction Ellis & Tinsley, Inc.	s)	·
14	Description of Coll X None	lateral		15 Check if personal funds w	ere deposited	into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor		Ž.		19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address; City;	State;	Zip Code		
20	Principal occupation	on		21 Employer (See Instruction	s)	
	Date of loan 01/29/2019	Name of lender Team, Charles (Mr.)	out-of-state PA	C (ID#:)	Loan Amount (\$) \$4.00
	Is lender a financial institution?	Lender address; City; 4019 Bunting Avenue	State;	Zip Code		Interest Rate
	No	Fort Worth, TX 76107				Maturity Date
		on / Job title (See Instructions)		Employer (See Instruction	s)	
	Principal & Vice			Ellis & Tinsley, Inc.		
	Description of Coll X None	ateral		Check if personal funds w	ere deposited	into political account (See Instructions)
	GUARANTOR INFORMATION	Name of guarantor				Amount Guaranteed (\$)
	X not applicable	Guarantor address; City;	State;	Zip Code		
-	Principal occupation	n		Employer (See Instruction:	s)	

LOANS				SCHEDULE E
The Instruction	on Guide explains how to complete this 1	form.		ges Schedule E: 2 Rpt: 12/23
2 FILER NAME Team, Charles	"CB"			
4 TOTAL OF U	NITEMIZED LOANS		\$	
5 Date of loan 02/06/2019	7 Name of lender out-of-state PA Team, Charles (Mr.)	AC (ID#:)	9 Loan Amount (\$) \$5.00
6 Is lender a financial institution?	8 Lender address; City; State; 4019 Bunting Avenue	Zip Code		10 Interest Rate
No	Fort Worth, TX 76107			11 Maturity Date
12 Principal occupati Principal & Vice	on / Job title (See Instructions) President	13 Employer (See Instructions Ellis & Tinsley, Inc.	;)	
14 Description of Co X None	llateral	15 Check if personal funds we	re deposited	l into political account (See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City; State;	Zip Code		
20 Principal occupati	on	21 Employer (See Instructions)	l
		1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

		Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Calaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Transportation Travel in District Travel Out of D					
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID		_
Γ.	Sch: 1/9 Rpt: 13/23		Team, Chai									
4	Date	5	Payee name	·								
	03/05/2019		FW Hi-Tech	Signs								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode			· · · · · · · · · · · · · · · · · · ·		
	\$5,168.94		3141 Joyce	Drive								
			Fort Worth,	TX 76116								
8	PURPOSE	(a)	Category (Se	ee Categories listed at the top	p of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense							mplete Schedule T.	
								Sign Printing		officeholder livin	ng expense	
								Sign Filling	OL I	istaliation		
<u>_</u>	Complete ONII V if direct	Ļ	Condidate (Off	anhalder some		fine c-	lah.			O# !-	andd	_
9	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offi	ceholder name	Of	fice sou	ignt			Office h	neia	
	Date		Payee name									
	02/28/2019		Facebook									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				·	\neg
	\$52.62		-	ifornia Avenue		•						
			Palo Alto, C	A 94304								
	PURPOSE	(a)	Category (Se	ee Categories listed at the top	of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense							mplete Schedule T.	
								Social Media		officeholder livin	g expense	
						:		Social Media	Au	verusing		
	Complete ONE V if direct	Ц	Condidate/Offi	ceholder name	06	fine eer	na ba			Office b	- Indiana in the second in the	
	Complete ONLY if direct expenditure to benefit C/OH		Januldate/Oni	cenoider name	Off	fice sou	ignt			Office h	leid	
												_
	Date		Payee name									
	02/28/2019		Frost Bank									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					
	\$8.00		205 Main St	treet								- 1
			PO Box 398	3								
			Frost, MN 5	6033								
	PURPOSE	(a)	Category (%)	ee Categories listed at the top	n of this school	tule)	(b)	Description				\dashv
	OF		Fees	ce eategories iisted at the top	5 01 0113 301100	2010)	``		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE							_		officeholder livin	g expense	
								Monthly Servi	ice	Fee		
											·	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	fice sou	ight			Office h	eld	
	expenditure to benefit C/O	1				_						
	-											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Consulting Expense Polling Expense Travel Out of District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 2/9 Rpt: 14/23 Team, Charles "CB" Date 4 Payee name 03/18/2019 Garcia Davidson, Donna Payee address; 6 Amount (\$) City; State; Zip Code \$90.00 **Capitol Station** PO Box 1213 Austin, TX 78711 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas: Complete Schedule T. **Legal Services EXPENDITURE** Check if Austin, TX, officeholder living expense Attorney Questions - Ethics Compliance Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/06/2019 Harland Clarke Payee address; State; Zip Code Amount (\$) City; \$64.45 15955 La Cantera Parkway San Antonio, TX 78256 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Check Printing** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/06/2019 Harland Clarke Amount (\$) Payee address; City; State; Zip Code \$24.00 15955 La Cantera Parkway San Antonio, TX 78256 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Check Printing** Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense OTHER (enter a category not listed above) **Legal Services** Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/9 Rpt: 15/23 Team, Charles "CB" Date 4 Payee name 02/06/2019 Harland Clarke Amount (\$) Payee address; City; State; Zip Code \$11.94 15955 La Cantera Parkway San Antonio, TX 78256 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Check Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2019 **PayPal** Amount (\$) Payee address; City; State; Zip Code \$0.45 2211 North First Street San Jose, CA 95131 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2019 PayPal Amount (\$) Payee address; City; State; Zip Code \$0.42 2211 North First Street San Jose, CA 95131 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense
Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 4/9 Rpt: 16/23 Team, Charles "CB" Date 4 Payee name 02/06/2019 **PayPal** Payee address; 6 Amount (\$) City; State; Zip Code \$0.45 2211 North First Street San Jose, CA 95131 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/07/2019 **PayPal** Payee address; Amount (\$) City; State; Zip Code \$7.55 2211 North First Street San Jose, CA 95131 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/07/2019 **PayPal** Amount (\$) Payee address; City; State; Zip Code \$145.30 2211 North First Street San Jose, CA 95131 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

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		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Salaries/	Expens Wages	e //Contract Labor	Tr	avel out of District avel Out of District THER (enter a category not listed a	above)
1	Total pages Schedule F1:	2 FILER NAM	≣				3 Fi	ler ID	
	Sch: 5/9 Rpt: 17/23	Team, Cha	rles "CB"						
4	Date	5 Payee name				71			
	02/08/2019	PayPal							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode			>	
	\$14.80	2211 North	First Street						
	U	•							
		San Jose,	CA 95131						
8	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Fees						of Texas. Complete Schedule T	
						PayPal Trans		ceholder living expense	
						r ayr ar rrans			
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sor	ught			Office held	
	expenditure to benefit C/O		icentities name	Office soil	ugni			Office field	
	Date	Payee name						· <u>-</u> .	
	02/08/2019	PayPal							
П	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$6.10	2211 North	First Street						
		San Jose, (CA 95131						
	PURPOSE OF	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	EXPENDITURE	Fees						of Texas. Complete Schedule T. ceholder living expense	
						PayPal Trans			
						,			
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	Jaht			Office held	
	expenditure to benefit C/OI								4
=	Date	Dayso name							
	02/09/2019	Payee name PayPal							
_			oo: City:	State: Zin C	odo			<u> </u>	
	Amount (\$) \$14.80	Payee addre	ss; City; First Street	State; Zip Co	oue				
	Φ14.00	2211 1401111	First Street						
		San Jose, (CA 95131						
Г	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Fees				_		of Texas. Complete Schedule T.	
	EXI ENDITORE							ceholder living expense	
						PayPal Trans	idC[[0]	1 FEE	
		0 111 177		000				O(C -	
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ught			Office held	
								<u> </u>	

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)		
L	Credit Card Payment		The Instruction Guide e	xplains how to	compl	ete this form.		
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID
	Sch: 6/9 Rpt: 18/23	Team, Cha	rles "CB"					
4	Date	5 Payee name	••••••••••••••••••••••••••••••••••••••				-	
	03/06/2019	PayPal						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip (Code	<u> </u>		
ľ	\$14.80	1	First Street	Otato, Lip	0000			
	421.00							
		San Jose,	CA 05121					
Ļ	8488885				14.5			
8	PURPOSE OF		See Categories listed at the top	of this schedule)	(a)	Description Check if travel	outsic	le of Texas. Complete Schedule T
	EXPENDITURE	Fees				=		officeholder living expense
					1	PayPal Trans	sact	ion Fee
						-		
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office s	ought			Office held
	expenditure to benefit C/OI	Н			-			
_	Date	Payee name	<u> </u>					······································
	03/08/2019	PayPal	•					
H	Amount (\$)	Payee addre	ess; City;	State; Zip (^ode			
	\$3.20		First Street	State, Zip	Code			
	φ3.20	2211 NOILI	i riist Street					
		0 1	04.05404					
L		San Jose,	CA 95131					
	PURPOSE OF	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description		
	EXPENDITURE	Fees						le of Texas. Complete Schedule T. officeholder living expense
						PayPal Trans		
	Complete ONLY if direct	L Candidate/Of	ficeholder name	Office s	ouaht			Office held
	expenditure to benefit C/O				J			
H	Date	Dayso name						
	03/10/2019	Payee name PayPal	;					
\vdash			Cit ::	Chata: 7:- :	2 a cl -			
	Amount (\$)	Payee addre	•	State; Zip (ode			
	\$4.65	2211 North	First Street					
		San Jose,	CA 95131					
	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE	Fees						le of Texas. Complete Schedule T.
						PayPal Trans		officeholder living expense
						i ayr ar mans	Juul	ion i oo
\vdash	Complete ONLY if direct	Candidate/Off	ficeholder name	Office s	nuaht			Office held
	expenditure to benefit C/O		ncentiuel name	Office S	ougnit			Office field
\vdash	·							
								<u>.</u>
-	rmo provided by Toyoc E	thian Campaign		thice etate to				Version V/1 1 20f9020

SCHEDULE F1

Advertising Expense Accounting/Banking Candidate/Officeholder/Political Committee Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Consulting Expense Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 7/9 Rpt: 19/23 Team, Charles "CB" Date 4 Payee name 03/20/2019 **PayPal** Payee address; 6 Amount (\$) City; State; Zip Code \$3.20 2211 North First Street San Jose, CA 95131 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2019 **PayPal** Payee address; State; Zip Code Amount (\$) City; \$3.20 2211 North First Street San Jose, CA 95131 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 03/23/2019 **PayPal** Amount (\$) Payee address; State; Zip Code City; \$1.75 2211 North First Street San Jose, CA 95131 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Transaction Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held

expenditure to benefit C/OH

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials E Legal Services The Instruction Guid		Wages	:/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FII FI		-			Filer ID	
	Sch: 8/9 Rpt: 20/23	Tear	n, Charles "CB"					
4	Date	5 Paye						
	03/23/2019	PayF	Pal					
6	Amount (\$)	7 Paye	e address; City;	State; Zip C	ode			
	\$6.10	2211	. North First Street					
L		San	Jose, CA 95131					
8	PURPOSE	(a) Cate	JOry (See Categories listed at the	top of this schedule)	(b)	Description		
	OF EXPENDITURE	Fees	•			<u></u>	de of Texas. Complete Schedule T.	
						PayPal Transact	officeholder living expense	
						i ayı ai mansadı	IOITT GG	
9	Complete ONLY if direct expenditure to benefit C/OI		late/Officeholder name	Office sou	ught		Office held	
	Date	Paye	e name					
	02/13/2019	Vista	Print					
Г	Amount (\$)	Paye	e address; City;	State; Zip Co	ode			
	\$102.75	_	ayden Avenue					
			-					
	A		ngton, MA 02421					
	PURPOSE OF		Ory (See Categories listed at the	top of this schedule)	(b)	Description	to of Tours Complete Cobadilla T	
	EXPENDITURE	Print	ing Expense				de of Texas. Complete Schedule T. officeholder living expense	
							s cards, bumper stickers and hat	
							,	
	Complete ONLY if direct expenditure to benefit C/Oh		late/Officeholder name	Office sou	ught		Office held	
Г	Date	Paye	e name				· · · · · · · · · · · · · · · · · · ·	
	02/27/2019	-	Print					
-	Amount (\$)		e address; City;	State; Zip Co	ode			
	\$85.13	-	ayden Avenue	Janes, Esp O				
	Ψ00.13	JJ 11	ayaan Avanuc					
		Lexir	ngton, MA 02421					
	PURPOSE		JOTY (See Categories listed at the	top of this schedule)	(b)	Description		
	OF EXPENDITURE	Print	ing Expense			니	de of Texas. Complete Schedule T.	
						Printing bumper	officeholder living expense	
						Filling bumper	SUCRCIS AND HAL	
L			1. (0")) ;		<u> </u>		Office health	
	Complete ONLY if direct expenditure to benefit C/OH		late/Officeholder name	Office sou	ught		Office held	
	Superiorder to belieff O/Of	,						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Office On Polling E Inse Printing I Salaries/	Expense Wages/Contract Labor	Travel in District Travel Out of Distri	ipment & Related Expense	
1	Total pages Schedule F1:	2 FILER NA	ME			3 Filer ID		
	Sch: 9/9 Rpt: 21/23	ľ	narles "CB"					
4	Date	5 Payee nar						
	02/27/2019	Vista Prir	nt					
6	Amount (\$) \$83.70	7 Payee address; City; State; Zip Code 95 Hayden Avenue						
		Lexingtor	ı, MA 02421					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Printing business cards						
9	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office so	ught	Office held	i	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

_								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Or Food/Beverage Expense Polling E Printing & Printing & Salaries/	payment/Reimbursement verhead/Rental Expense xpense Expense 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	omplete this form.					
1	Total pages Schedule G: Sch: 1/2 Rpt: 22/23	2 FILER NAME Team, Charles "CB"	3	Filer ID				
4	•	E 8	l.					
4	Date 01/29/2019	5 Payee name GoDaddy						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$37.63	7145 E 1st Street						
	X Reimbursement from political contributions intended	Scottsdale, AZ 85251						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense				
	EXPERIENCE.		Domain Name					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	01/29/2019	Shutterstock						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$31.40	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	X Reimbursement from political contributions intended	New York, NY 10118						
	PURPOSE	Category (See Categories listed at the top of this schedule)		Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE		Advertising Expense	Check if Austin, TX, officeholder living expense					
			Image Library Subscription					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	02/18/2019	Spinks Flight Center, Inc						
	Amount (\$)	Payee address; City; State; Zip Co	ode					
	\$263.50	450 Alsbury Court						
	Reimbursement from political contributions intended	Burleson, TX 76028						
	PURPOSE	Category (See Categories listed at the top of this schedule)		Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense					
		Flight to take pictures of district for advertising						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Accounting/Banking Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Consulting Expense Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District **Printing Expense** Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 2/2 Rpt: 23/23 Team, Charles "CB" Date Payee name 03/20/2019 Spinks Flight Center, Inc. Amount (\$) Payee address; City; State; Zip Code \$240.00 450 Alsbury Court Reimbursement from political contributions intended X Burleson, TX 76028 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Flight to take pictures of district for advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2019 WIX Amount (\$) Payee address; City; State; Zip Code \$84.00 40 West 27th Street Reimbursement from political contributions intended New York, NY 10001 PURPOSE Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website - 1 Year Cost Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH