	URPOSE COM FINANCE REP					ORM SPAC HEET PG 1
	de explains how to complete t	his form.	1 Filer ID (Ethics Comm	nission Filers)	2 Total pages f	iled:
3 COMMITTEE NAME					OFFICE	USEONLY
Comaitte to	Elect Trey Du	tion Wall	ierCounty J	udge	Date Received	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUIT			ZIP CODE	Waller Co.	Elections
	Vo B	0x 64	0		JAN 1	7 2024
Change of Address	Post ft	TV	77484			
	Walle	er Iv			RECE	IVED
5 CAMPAIGN	MS/MRS/MR FI	RST			Date Hand-delivere	d or Date Postmarked
TREASURER NAME		isa		N	Receipt #	Amount \$
		IST		SUFFIX	Date Processed	
	V	uhon			Date Imaged	
6 CAMPAIGN TREASURER STREETADDRESS (Residence or Business)		$\times$ 64	0.8.13	clo	ZIP CODE e Waller County El sed to the public or e to an inclement w	<mark>1 January 16, 2024</mark> eather day. All
	Wal	ler (r	ίιτο	T rep con	orts stamped Janua sidered TIMELY.	ary 17, 2024 are
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX,	APT / SUM	fo	STATE	ZIP CODE	
Change of Address	Wal	ler Th	c 7748	4		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU (281) 7770	imber ) - 299				
9 REPORT TYPE	January 15	8th	h day before election day before election noff		Exceeded Modified Re Dissolution Report (At 10th day after campaig	· •
10 PERIOD COVERED	Month Day	Year			Month Day	Year
	7/1/	23	THROUGH	(	2/3(	123
11 ELECTION	ELECTION DATE Month Day Year		_			
		Primary	Runoff	Oth	er scription	
					<u></u>	
Forme provided by Toyce Fabi		GO TO PA	GE 2			11 and 2 Sections Prove 1

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SPECIFIC-F PURPOSE		POSE COMI ) TOTALS	MITTEE REPORT:	FORM SPAC COVER SHEET PG 2
12 COMMITTEE NAMI Committee to E 14 COMMITTEE		Trey Duber 1	Walter County Judge CANDIDATE/OFFICEHOLDER NAME	13 Filer ID (Ethics Commission Filers)
PURPOSE (Attach lists on plain pap complete this report if necessary.)	er to		OFFICE SOUGHT (candidate) / OFFICE HELD (office	Dukon III
SUPPORT (Candidate or Measu	re)		BALLOT IDENTIFICATION/#	ry Judge
OPPOSE (Candidate or Measu		MEASURE		ELECTION DATE onth Day Year
(Officeholder)				
15 CONTRIBUTION TOTALS	1.	PLEDGES, LOANS, O	POLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR DE ELECTRONICALLY)	\$
	2.		ES, LOANS, OR GUARANTEES OF LOANS)	\$48,200
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED F	POLITICAL EXPENDITURES	\$
	4.	TOTAL POLITICAL E		\$25200.94 DAY \$25,760.97
CONTRIBUTION BALANCE OUTSTANDING	5. 6.	OF THE REPORTING F		DAY \$ 25,760.97
LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		THE \$	
CAR Notan Com	IBETT . y Public, m. Expir tary ID '	J DUHON III , State of Texes es 12-03-2025  2542580-5 Please co	alty of perjury, that the accompanying red to be reported by me under Title 16 Signature of Campaign omplete either option below:	Election Code.
Sworn to and subscrib			Cisa Duhon	, this the7
day of January	, 20_	$\frac{29}{2}$ , to certify which	ch, witness my hand and seal of office.	25
Signature of efficer admir	nistering	oath Printed na	ame of officer administering oath	Title of officer administering oath
(2) Unsworn Declaratio				
My name is		<u> </u>	, and my date of birth is	
My address is		(street)	(city) '(city) ', on the day of(month	(state) (zip code)(country) , 20 ) (year)
			Signature of Camp	paign Treasurer (Declarant)

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	ORM SPAC HEET PG 3
17 COMMITTEE NAME Delacitee to Elect Trey Dubon Waller Co. Judge 18 Filer ID (Ethics Con Delacitee to Elect Trey Dubon Waller Co. Judge	nmission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$48,200
2. SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1747
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5. SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$
7. SCHEDULE E: LOANS	\$
8. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$25761
9. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
11. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

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Th	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1:
2 FILER NAME	ee to Elect Trey Duhon Waller Cou	Inty Judge	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#) Oliver Salgado		7 Amount of contribution (\$)
08/24/2023	City; 3103 Lakes of Katy Ln, Katy TX 7	Slate; Zip Code 77493	1,500.00
8 Principal occi	pation / Job title (See Instructions) 9	Employer (See Instruct	ons)
Date	Full name of contributor out-of-state PAC (ID IDS Engineering Group PAC	)#:)	Amount of contribution (\$)
08/23/2023	* * * * * * * * * * * * * * * * * * * *	State; Zip Code Ston TX 77040	1,000.00
Principal occu	bation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 07/26/2023	Full name of contributor out-of-state PAC (ID)	ŧ	Amount of contribution (\$)
0/120/2023	Contributor address; City; s 11550 W Interstate 10 Ste 395, San Antonio TX	State: Zip Code X 78230	1,500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructk	DNS)
Date	Full name of contributor out-of-state PAC (IDs		Amount of contribution (\$)
08/23/2023	Allen Boone Humphries Robinson LLP Contributor eddress; City; s 3200 Southwest Frwy Ste 2600, Housto	State; Zip Code	2,500.00
Principal occup	ation / Job tille (See Instructions)	Employer (See Instruction	ns)

	ARY POLITICAL CONTRIBU		SCHEDULE A1
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME ( Commit	tee to Elect Trey Duhon Waller C	ounty Judge	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IDS:) Spencer C Clark		7 Amount of contribution (\$)
08/23/2023		State; Zip Code TX 77080	200.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC Aguirre & Fields LP PAC		Amount of contribution (\$)
08/07/2023		State; Zip Code and, TX 77478	1,500.00
Principal occuj	bation / Job tille (See Instructions)	Employer (See Instruct	ions)
Date 07/26/2023	Full name of contributor out-of-state PAC DEC PAC Contributor address; City; 1 Greenway Plaza Ste 525, Houston,	(ID#:) State; Zip Code TX 77046	Amount of contribution (\$) 2,500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC Cobb Fendley PAC	(ID#:)	Amount of contribution (\$)
08/02/2023	Contributor address; City: 13430 Northwest Freeway Suite 1100 Houst	State; Zip Code on, Texas 77040	1,500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
	ATTACH ADDITIONAL COPIES OF If contributor is out-of-state PAC, please see Instruc	F THIS SCHEDULE AS NE ction guide for additional re	EDED porting requirements.

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	e to Elect Trey Duhon Waller Cou	inty Judge	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#) HALFF Associates State PAC		7 Amount of contribution (\$)
08/10/2023	6 Contributor address; City; 1201 N. Bowser Rd, Richardson	state; Zip Code n TX 75081	1,000.00
3 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC Home PAC - GHBA	(ID#:)	Amount of contribution (\$)
08/08/2023	••••••	State; Zip Code Ston TX 77064	3,000.00
Principal occuț	Dation / Job title (See Instructions)	Employer (See Instruct	lions)
Date 08/21/2023	Lyle & Vickie Henkel	(ID#:) State; Zip Code Ilage TX 77040	Amount of contribution (\$) 1,500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	lions)
Date	Full name of contributor out-of-state PAC Tim Phelan	(ID#:)	Amount of contribution (\$)
08/18/2023	Contributor address; City: PO Box 1274, Waller	State; Zip Code TX 77484	500.00
Principal occup	nation / Job tille (See instructions)	Employer (See Instruct	lions)

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	ARY POLITICAL CONTRIBUT		SCHEDULE A1
If the reque	sted information is not applicable, DO NOT inclu	ide this page in the i	report.
Thie	Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedure A1:
<sup>2</sup> FILER NAME Committe	e to Elect Trey Duhon Waller Cour	nty Judge	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IDs:) EHRA Engineering PAC		7 Amount of contribution (\$)
08/16/2023	© Contributor address; City; S 10011 Meadowglen Lane, Housto	-	2,500.00
8 Principal occu	pation / Job title (See Instructions) 3	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID)	r)	Amount of contribution (\$)
08/24/2023	Yvette & Mark Dessens           Contributor address;         City;         s		1,500.00
	14019 Barryknoll Ln, Houston TX	77079	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (IDs	·)	Amount of contribution (\$)
08/23/2023	Telfryn & Elizabeth John		
	Contributor address; City; s 15430 Woodland Orchard Ln, Cypress	Rate: Zip Code TX 77433	500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID# Martin & Victoria Cristofaro	·	Amount of contribution (\$)
08/24/2023		Nate; Zip Code	1 500 00
	17923 Windy Canyon Ln, Houstor	n TX 77084	1,500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ma)
	ATTACH ADDITIONAL COPIES OF T If contributor is out-of-state PAC, please see Instructio	HIS SCHEDULE AS NE n guide for additional re	EDED porting requirements.

	ARY POLITICAL CONTRIBU		SCHEDULE A1
If the reque	sted information is not applicable, DO NOT in	clude this page in the	report.
Тле	Instruction Guide explains how to complete this	s form.	1 Total pages Schemule A1:
2 FILER NAME Committe	e to Elect Trey Duhon Waller Co	unty Judge	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC Mark A. Gehringer	C (ID#:)	7 Amount of contribution (\$)
08/17/2023	B Contributor address; City; 5714 Ashley Spring Ct, Katy T	State; Zip Code X 77494	2,500.00
8 Principal occu	1 upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date		(IDA:)	Amount of contribution (\$)
08/22/2023	Jay & Cadence Morris Contributor address: City: 16210 Rolling View Trl, Cypres	State; Zip Code S TX 77433	2,500.00
Principal occup	pation / Job tille (See Instructions)	Employer (See Instruct	lions)
<sup>Date</sup> 08/28/2023	Full name of contributor out-of-state PAC Paul Kwan Contributor address; City; 13423 Amber Queen Lane, Houston	; (ID#) State; Zip Code TX 77041	Amount of contribution (\$)
Principal occup	I	Employer (See Instruc	ilons)
Date	Full name of contributor out-of-state PAC Rana & Youssef Laham	; (ID#:)	Amount of contribution (\$)
08/23/2023	Contributor address: City: 23230 Sumners Creek Ct, Katy	State; Zip Code 7 TX 77494	500.00
Principal occup	pallon / Job tille (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES ( if contributor is out-of-state PAC, please see instru		

	Instruction Guide explains how to complete this	I form.	1 Total pages Schedre A1:
2 FILER NAME	to Elect Trey Duhon Waller Cou	Inty Judge	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IDM:) David A. Hamilton		7 Amount of contribution (\$)
08/17/2023	6 Contributor address; City; 12315 Woodthorpe Ln, Housto	State: Zip Code n TX 77024	500.00
8 Principal occi	pation / Job title (See Instructions)	9 Emptoyer (See Instruc	l xions)
Date	Full name of contributor out-of-state PAC Russell & Rachael Walker	; (ID#;)	Amount of contribution (\$)
08/24/2023	Contributor address; City;	State; Zip Code	500.00
Principal occu	10934 Britoak Lane, Houston	Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
08/22/2023	Sean Bowman Contributor address; City: 616 York St, Houston TX 77041		250.00
Principal occup	Dation / Job title (See Instructions)	Emptoyer (See Instruc	lions)
Date	Full name of contributor out-of-state PAC Perdue Brandon Fielder Collins & Mo	· · · · · · · · · · · · · · · · · · ·	Amount of contribution (\$)
08/11/2023	Contributor address; City; 1235 North Loop W Ste 600, Housto	State; Zip Code	1,000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ilons)

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	Instruction Guide explains how to complete this for		1 Total pages Scherüle A1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	e to Elect Trey Duhon Waller Cou	nty Judge	
4 Date	5 Full name of contributor out-of-state PAC (III Larry Janak	D#:)	7 Amount of contribution (\$)
08/24/2023	6 Contributor address; City; 19215 Cohen Green Lane, Houston T		500.00
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (IC Bonnie Moss		Amount of contribution (\$)
08/24/2023	Contributor address; City: 12418 Westella Dr, Houston TX 7	· · ·	500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 08/29/2023	Political Action Committee of Pac	State; Zip Code	Amount of contribution (\$) 1,500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor Out-of-state PAC (ID Comcast Corp & NBCUniversal PAC	*	Amount of contribution (\$)
08/08/2023	Contributor address; City;	State; Zip Code	1,500.00
Principal occup	1701 JFK Blvd, Phildelphia PA 15 Billion / Job tille (See Instructions)	Employer (See Instruction	ons)
	ATTACH ADDITIONAL COPIES OF 1		

1	TARY POLITICAL CONTRIBU		SCHEDULE A1
Thi	instruction Guide explains how to complete thi	s form.	1 Total pages Scheptile A1:
2 FILER NAME Committe	ee to Elect Trey Duhon Waller Co		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IDs:)		7 Amount of contribution (\$)
09/19/2023	TNP Political Action Committee         6 Contributor address;       City;         5237 N Riverside Dr Ste 100, Fort V		1,500.00
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC Omar N. Escobar Jr	C (ID#:)	Amount of contribution (\$)
10/13/2023	Contributor address; City: 16910 Roberts Hill Dr, Cypress		1,000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	lions)
Date 09/14/2023	Alan McKee	(ID#:) State; Zip Code TX 77/33	Amount of contribution (\$) 2,500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor eut-of-state PAC Ranney & Linda McDonough	(10#:)	Amount of contribution (\$)
10/17/2023	Contributor address: City; 3 Pin Oak Estate Dr, Bellaire T)	State; Zip Code K 77401	1,500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
والمراجع والمراجع والمراجع والمراجع والمراجع	ATTACH ADDITIONAL COPIES O If contributor is out-of-state PAC, please see Instru	F THIS SCHEDULE AS NE	EDED porting requirements.

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ሳ <b>ኪ</b>	e Instruction Guide explains how to complete this for	n. 1 Total pages Schedule A1:
	to Elect Trey Duhon Waller County	
4 Date	5 Full name of contributor out-of-state PAC (ID#) Cody & Courtney Bathe	
10/26/2023	Contributor address; City: Sta 5514 Drumlin Field Way, Richmon	ate: Zip Code d TX 77407 500.00
8 Principal occ	(pation / Joh title (See Jasta at	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
08/14/2023	Contributor address; City; Sta PO Box 690287, San Antonio TX 7	
Principat occup	ation / Joh title (Constants at a	Employer (See Instructions)
Date	Samantha Harn	Amount of contribution (\$)
	Contributor address; City: Stail 16246 Evergreen Lake Ln, Cypress	1,000.00 <b>1</b> ,000.00
Principal occup	ation / Job title (See Instructions) E	mployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
0/03/2023	Contributor address; City: Stat 4315 Whickham Dr, Fulshear TX 77	<sup>re; Zip Code</sup> 1,500.00
Principal occup	Non Lieb Min 10 A Start	nployer (See Instructions)
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	Sted information is not applicable, DO NOT in	-	SCHEDULE A1
	Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Committe	e to Elect Trey Duhon Waller Co	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor out-of-state PAG Timothy & Anne Buscha	7 Amount of contribution (\$)	
08/23/2023	6 Contributor address; City: 13214 Lake Mist Ct, Cypress T		500.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instru	ctions)
Date	Full name of contributor out-of-state PAC	; (iD#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job Illie (See Instructions)	tions)	
Date	Full name of contributor out-of-state PAC	Amount of contribution (\$)	
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	lions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occups	ation / Job tille (See Instructions)	Employer (See Instruct	lons)
	ATTACH ADDITIONAL COPIES OF If contributor is out-of-state PAC, please see Instruc	THIS SCHEDULE AS NE tion guide for additional re	EDED porting requirements.

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	MONETARY (IN-KIND) POLITIC RIBUTIONS	AL		SCHEDULE A2	
If the requ	ested information is not applicable, DO NOT includ	e this page	in the report.		
ТІ	he Instruction Guide explains how to complete this for	n	1 Total pages 9ched	luje A2:	
<sup>2</sup> FILER NAM	e to Elect Trey Duhon Waller Count	y Judge	3 Filer ID (Ethics Co	ommission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$		
5 Date	<sup>6</sup> Full name of contributor □out-of-state PAC (ID# Jim Russ/EHRA Engineering PAC	)	8 Amount of Contribution \$ 436.75	9 In-kind contribution description breakfast cost	
08/24/2023	7 Contributor address;         City;         State;           10011 Meadowglen Ln, Houston T>	Zip Code 77042	Check if travel outsi	    de of Texas. Complete Schedule T	
10 Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	۰ <u>۰</u> ۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JL	JDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	w firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	L			
Date 08/24/2023	Full name of contributor out-of-state PAC (ID# Allen Boone Humphries Robinson L Contributor address; City; State;	LP Zip Code	Amount of Contribution \$ 436.74	In-kind contribution description breakfast cost	
	3200 Southwest Frwy Ste 2600, Houston TX 7702	•	Check if travel outsid	i ] de of Texas. Complete Schedule T	
Principat occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	yer (FOR NON-JUDICIAL) (See Instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	L			
<u> </u>					
	ATTACH ADDITIONAL COPIES OF T If contributor is out-of-state PAC, please see Instruction	HIS SCHEDU	LEAS NEEDED additional reporting	g requirements.	

	MONETARY (IN-KIND) POLITIC RIBUTIONS	AL		SCHEDULE A2	
If the requ	ested information is not applicable, <b>DO NOT includ</b>	le this page	in the report.		
	he Instruction Guide explains how to complete this for	n.	1 Total pages Sched	$\Psi^2_2$	
<sup>2</sup> FILER NAM	ee to Elect Trey Duhon Waller Count	y Judge	3 Filer ID (Ethics Co	mmission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$		
5 Date 08/24/2023	6 Full name of contributor       □ out-of-state PAC (ID#:         Costello Inc. PAC         7 Contributor address;       City;       State;	8 Amount of Contribution \$ 436.75	9 In-kind contribution description breakfast cost		
	2107 CityWest Boulevard 3rd floor, Houston, TX 7	77042	Check if travel outsi	de of Texas. Complete Schedule T.	
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICI)	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	itor's job title (FOR JU	DICIAL) (See Instructions)	
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>			
Date 08/24/2023	Full name of contributor out-of-state PAC (ID# Ranney McDonough Contributor address; City; State;	) Zip Code	Amount of Contribution \$ 436.74	In-kind contribution description breakfast cost	
	3 Pin Oak Estate Dr, Bellaire TX 77	•	Check if travel outsid	de of Texas. Complete Schedule T.	
Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICI		
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JU	DICIAL) (See Instructions)	
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>			
	······································				
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	ATTACH ADDITIONAL COPIES OF T If contributor is out-of-state PAC, please see Instructi			requirements.	

## SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)			
1 Total pages Sphedule F1	2 FILER NAME Committee to Elect Trey Duhon Walle	r County Judge	3 Filer 1D (Ethics Commission Filers)			
4 Date 07/21/2023	5 Payee name J.W. Marriott					
6 Amount (\$) 637.93	7 Payee address; 110 E. 2nd Street, Austin, Texa	City; s 78701	State; Zip Code			
8 PURPOSE	(a) Category (See Categories listed at the top of this so Travel out of district	hedule) (b) Description NACO Confer	ence			
OF						
	(C) Check if travel outside of Texas. Complete Sch	edule T. Check if Aust	in, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held			
Date	Payee name					
07/21/2023	Hempstead Simply Storage					
Amount (\$) 65.00	Payee address; 1110 Austin St, Hempstead, Te	City; xas 77445	State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch Rental expense		mpaign files and materials			
	Check if travel outside of Texas. Complete Sche	dule T. Check if Austi	n, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held			
Date	Payee name					
07/24/2023	Moonshine Grill					
Amount (\$) 115.63	Payee address; 303 Red River Street, Austin, Te	City; Exas 78701	State; Zip Code			
	Category (See Categories listed at the top of this sch	edule) Description				
PURPOSE OF EXPENDITURE	Food/Beverage	NACO Confere	ence			
	Check if travel outside of Texas. Complete Sche	dule T. Check if Austi	n, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held			
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NEE	EDED			

## SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment	•	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing Ex Salaries/V	kpense Vages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense
1 Total pages Schedule F1	2 FILER NAME Committee to Elect Trey Duhon Waller County Judge				3 Filer ID (Ethic	s Commission Filters)
4 Date 07/24/2023	5 Payee na J.W. Ma				·····	<u> </u>
6 Amount (\$) 141.06	7 Payee ac 110 E. 2	<sup>Idress;</sup> nd Street, Austin, Tex	as 787	City; 01	State;	Zip Code
8	(a) Categor	y (See Categories listed at the top of this	schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/B	everage		NACO Confere	ence	
	(C)	Check if travel outside of Texas. Complete S	chedule T.	Check if Austin	1, TX, officeholder livin	g expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held
Date	Payee na	me				
07/24/2023	Austin C	onvention Center				
Arriount (\$) 6.00	Payee ad 500 E C	<sup>Idress;</sup> esar Chavez St, Austi	n, TX 7	City; 8701	State;	Zip Code
PURPOSE OF EXPENDITURE	1	(See Categories listed at the top of this s everage	schedule)	Description	ence	
		Check if travel outside of Texas. Complete S	chedule T	Check if Austin	, TX, officeholder living	) expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held
Date	Payee na	Ime				
07/25/2023	J.W. Ma	rriott				
Amount (\$) 115.63	Payee ad 110 E. 21	dress; nd Street, Austin, Tex	as 7870	City;	State;	Zip Code
· · · · · · · · · · · · · · · · · · ·	Category	(See Categories listed at the top of this s	chedule)	Description		
PURPOSE OF EXPENDITURE	Travel o	ut of district		NACO Confere	nce	
		Check if travel outside of Texas. Complete S	chedule T.	Check if Austin	, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name	<u> </u>	Office sought		Office held
	AT	ACH ADDITIONAL COPIES	OF THIS	SCHEDULE AS NEE	DED	

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consutting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment		Loan Repayment/Reinbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1			3 Filer ID (Ethics Commission Filers)
4 Date 07/25/2023	5 Payee name Starbucks		
6 Amount (\$) 21.00	7 Payee address; 1390 S Cooper St, Arlington, T2	city; X 76013	State, Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Food/Beverage	(b) Description	eting
	(C) Check if travel outside of Texas. Complete Sch	edule T. Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
07/31/2023	Prosperity Bank		
Amount (\$) 10.00	Payee address; 1250 Austin St, Hempstead, TX	City; ( 77445	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch Banking	edule) Description Service fee	
· · · · · · · · · · · · · · · · · · ·	Check if travel outside of Texas. Complete Sche	edule T Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/07/2023	The Republic		
Amount (\$)	Payee address;	City;	State; Zip Code
299.86	701 University Dr E, College Sta	ation, TX 77840	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Food/Beverage	Description Dinner with VG	Young staff
CAL ENDITORE	Check If travel outside of Texas, Complete Scher	dule T. Chack if Austin	, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF	F THIS SCHEDULE AS NEE	DED

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Over Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor	Solicitation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a catego	ment & Related Expense
1 Total pages Schedule F1:	2 FILER N	IAME e to Elect Trey Duhon Wal	ler Count	y Judge	3 Filer ID (Ethics	Commission Filers)
4 Date 08/07/2023	5 Payee na Waller (	<sup>ame</sup> County Crimestoppers				
6 Amount (\$)	7 Payee a 100 She	<sup>ddress;</sup> eriff R Glenn Smith Dr,	Hemps	city: stead, TX 77445	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Catego Donatio	гу (See Categories listed at the top of this DN	schedule)	(b) Description	_	
	(C)	Check if travel outside of Texas. Complete S	chedule T	Check if Austia	n, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		date / Officeholder name		Office sought		Office held
Date	Payee na	ame		1-1-1-1		
08/08/2023	Hempst	ead Simply Storage				811-1932.
Amount (\$) 10.00	Payee a 1110 At	<sup>ddress,</sup> Jstin St, Hempstead TX	X 77445	City; 5	State;	Zip Code
PURPOSE OF EXPENDITURE		y (See Categories listed at the top of this s Expense	ichedule)	Description Storage fees for a August thru Dece		nd materials from
		Check if travel outside of Texas, Complete S	chedule T	Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O		late / Officeholder name		Office sought		Office held
Date	Payee n	ame				
08/15/2023	Friends	of the NRA				
Amount (\$) 2,560.00	Payee a 22892 N	<sup>ddress;</sup> Iack Washington Ln, H	lempste	city; ead, TX 77445	State;	Zip Code
PURPOSE OF EXPENDITURE	Category Donatio	y (See Categories listed at the top of this s $\mathbf{N}$		Description Annual Fundra	iser	
		Check if travel outside of Texas, Complete S	chedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O		date / Officeholder name		Office sought		Office held
	AT	TACH ADDITIONAL COPIES	OF THIS	SCHEDULE AS NEE	DED	

## SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credk Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing E: Salaries/V	kpense Vages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense		
1 Total pages Schedule F1.		IAME e to Elect Trey Duhon Wal	ller Coun	ty Judge	3 Filer ID (Ethic	s Commission Filers)		
4 Date 08/23/2023	1 .	5 Payee name Vic & Anthony's						
6 Amount (\$) 245.68	7 Payee a 1510 Te	<sup>ddress,</sup> exas Ave, Houston, TX	77002	City;	State;	Zip Code		
8 PURPOSE OF EXPENDITURE		ry (See Categories listed at the top of this everage	schedute)	(b) Description Meeting re: H(	GAC			
	(C)	Check if travel outside of Texas. Complete S	Schedule T.	Check if Aust	in, TX, officeholder livin	g expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		late / Officeholder name		Office sought		Office held		
Date	Payee na	ame						
08/21/2023	Carbett	"Trey" J. Duhon III						
Amount (\$) 556.00	Payee as PO Box	ddress; 640, Waller Texas 77	484	City	State;	Zip Code		
PURPOSE OF EXPENDITURE	8 C	Y (See Categories listed at the top of this s JISEMENT	schedule)	Description For accrued p	ersonal fund	expenses		
		Check if travel outside of Texas. Complete S	chedule T	Check If Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held		
Date	Payee n	ame						
08/28/2023	Prairie \	/iew Volunteer Firefigh	nters As	sociation				
Amount (\$)	Payee ad 502 Ellei	n Powell, Prairie View,	, TX 77	<sup>City;</sup> 446	State;	Zip Code		
PURPOSE OF EXPENDITURE	<sup>Category</sup> Donatio	r (See Categories listed at the top of this s	chedule)	Description Annual Fundra	iser	— — — — — — — — — — — — — — — — — — —		
		Check if travel outside of Texas. Complete Se	thedule T.	Check if Austi	n, TX, officeholder living	expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held		
	AT	TACH ADDITIONAL COPIES	OF THIS	SCHEDULE AS NEE	DED			

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Conations Made By Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense       Loan Repayment/Reimbursement         Fees       Office Overhead/Rental Expense         Food/Beverage Expense       Polling Expense         Gift/Awards/Memorials Expense       Printing Expense         Legal Services       Salaries/Wages/Contract Labor         The Instruction Guide explains how to complete this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expen Travel In District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER N Committe	AME e to Elect Trey Duhon Wali	ler Coun	ty Judge	3 Filer ID (Ethic	s Commission Filers)
4 Date 08/31/2023	5 Payee na Bob's S	ame teakhouse & Chops				
6 Amount (\$) 360.52	7 Payee av 301 Lav	<sup>ddress;</sup> aca St, Austin, TX 787	<b>'</b> 01	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE		y (See Categories listed at the top of this everage	schedule)	(b) Description TAC Legislativ	e Conferenc	e e
	(c)	Check if travel outside of Texas. Complete Se	chedule T	Check if Austi	n, TX, officeholder living	) expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		late / Officeholder name		Office sought		Office held
Date	Payee na	ame				
08/31/2023	Prosper	ity Bank				
Amount (\$) 50.00	Payee ad 1250 Au	odress; Istin St, Hempstead T)	X 7744	City; 5	State;	Zip Code
PURPOSE OF EXPENDITURE	Category Bankin	/ (See Categories listed at the top of this s	chedule)	Description Service fees for /	August thru Dec	ember 2023
		Check if travel outside of Texas. Complete So	chedule T	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OI		ate / Officeholder name		Office sought	27	Office held
Date	Payee n	ame		en e		
09/06/2023	Carbett	"Trey" J. Duhon III				
Amount (\$) 3,500.00	Payee ad PO Box	<sup>ddress;</sup> 640, Waller, Texas 77	484	City;	State;	Zip Code
PURPOSE OF EXPENDITURE		See Categories listed at the top of this series of the	chedule)	Description Reimbursemer paid from perse		expenses
		Check if travel outside of Texas. Complete Sc	:hedule T.	Check if Austin	1, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O		late / Officeholder name		Office sought	52 (S. 107	Office held
	AT	TACH ADDITIONAL COPIES	OF THIS	SCHEDULE AS NEE	DED	

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor	Travel In District Travel Out Of Dis	uipment & Related Expense	
1 Total pages Soffedule F1	2 FILER N	AME e to Elect Trey Duhon Wall	ler Count	ty Judge	3 Filer ID (Eth	ics Commission Filers)	
4 Date 09/08/2023	5 Payee na	5 Payee name Classic Events Cafe					
6 Amount (\$)	7 Payee ac 615 US-	<sup>idress;</sup> 290 BUS, Hempstead	, TX 77	City; 2445	State;	Zip Code	
8 PURPOSE OF EXPENDITURE		y (See Categories listed at the top of this everage	schedule)	(b) Description Lunch with sta	ff		
	(C)	Check If travel outside of Texas. Complete So	chedule T.	Check if Austin	n, TX, officeholder liv	ing expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held	
Date	Payee na	me					
09/08/2023	Hempste	ead FFA					
Amount (\$) 1,000.00	Payee ad 801 Don	oho St, Hempstead, T	X 7744	City; 5	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category Donatic	(See Categories listed at the top of this so	chedule)	Description	-,t,		
		Check if travel outside of Texas. Complete Sc	hedule T	Check if Austin	, TX, officeholder livi	ng expense	
Complete ONLY if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held	
Date	Payee na	ime					
09/11/2023	Hilton Au	ustin					
Amount (\$)	Payee ad 500 E 4tl	<sup>dress;</sup> n St, Austin, TX 78701	<u>_</u>	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category Food/Be	(See Categories listed at the top of this sc Verage	·	Description TAC meeting			
		Check if travel outside of Texas. Complete Sci	hedule T	Check if Austin	TX, officeholder livir	ig expense	
Complete ONLY if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held	
	AT	ACH ADDITIONAL COPIES	OF THIS S	SCHEDULE AS NEE	DED		

## SCHEDULE F1

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

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ov Polling Ex Printing E SatariesA	xpense Vages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense	
1 Total pages Schedule F1		to Elect Trey Duhon Wall	ler Coun	ity Judge	3 Filer ID (Ethic	s Commission Filers)	
4 Date 09/11/2023	5 Payee nar San Fran	ncisco Bakery & Cafe			I <u> </u>	<u> </u>	
6 Amount (\$) 21.29	7 Payee ad 2900 W	<sup>dress,</sup> Anderson Ln., Austin,	TX 78	City; 757	State;	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category Food/Be	(See Categories listed at the top of this : VCTAGE	achedule)	(b) Description	· · · · ·		
	(c)	Check if travel outside of Texas. Complete So	hedule T.	Check if Austi	n, TX, officeholder livin	g expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		te / Officeholder name		Office sought	,,	Office held	
Date	Payee nar	ne					
09/13/2023	Carbett "	Trey" J. Duhon III					
Amount (\$)	Payee add PO Box 6	<sup>Iress;</sup> 640, Waller, Texas 77	484	City,	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category Reimbur	See Categories listed at the top of this so Sement	hedule)	Description Reimbursement f Fundraiser	or donation ma	de at Family Ties	
	c	heck if travel outside of Texas. Complete Sci	hedule T.	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF		e / Officeholder name		Office sought		Office held	
Date	Payee nar	ne					
09/15/2023	Classic E	vents Cafe					
Amount (\$) 24.99	Payee add 615 US-2	<sup>ress;</sup> 90 Bus, Hempstead, T	ΓX 774	City; 45	State	Zip Code	
PURPOSE OF EXPENDITURE	Category ( Food/Bev	See Categories listed at the top of this sci /erage		Description Staff lunch			
	C	neck if travel outside of Texas. Complete Sch	edule T	Check if Austin,	TX, officeholder living	expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		e / Officeholder name		Office sought		Office held	
	ATTA	CHADDITIONAL COPIES C	OF THIS S	SCHEDULE AS NEEL	DED		

Forms provided by Texas Ethics Commission

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8	i(a	)
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Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Loan Rep Office Ove Poiling Ex Printing E Salaries/V	xpense Vages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense
1 Total pages Scherdule F1	2 FILER N	AME e to Elect Trey Duhon Wa	ller Coun	ty Judge	3 Filer ID (Ethic	s Commission Filers)
4 Date 09/18/2023	5 Payee na					
6 Amount (\$) 27.06	7 Payee ad 1601 La	<sup>ddress;</sup> ke Robbins Dr, The W	/oodlan	City: ds, TX 77380	State;	Zip Code
8 PURPOSE OF EXPENDITURE	Food/B	y (See Categories isted at the top of this everage	schedule)	(b) Description		
	(c)	Check if travel outside of Texas. Complete 5	Schedule T.	Check if Austi	n, TX, officeholder living	) expense
9 Complete ONLY if direct expenditure to benefit C/O		late / Officeholder name		Office sought		Office held
Date	Payee na	me				
09/18/2023	Chic-Fil-	A				
Amount (\$) 19.16	Payee ac 390 N. I	<sup>Idress;</sup> 45, Ennis TX 75119		City;	State;	Zip Code
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this s everage	schedule)	Description TAHSR meetir	ng	
		Check if travel outside of Texas. Complete S	chedule T.	Check if Austir	n, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held
Date	Payee na	ıme				
09/21/2023	Classic I	Events Cafe				
Amount (\$) 81.57	Payee ad 615 US-2	<sup>Idress;</sup> 290 Bus, Hempstead,	TX 774	City: 45	State	Zip Code
	Category	(See Categories listed at the top of this s	chedule)	Description	<u> </u>	
PURPOSE OF EXPENDITURE	Food/Be	verage		Staff lunch		
		Check if travel outside of Texas Complete Si	chedule T	Check if Austin	, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held
······································	AΠ	ACHADDITIONAL COPIES	OF THIS :	SCHEDULE AS NEE	DED	

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Ov Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor	Travet In District Travel Out Of Distri	pment & Related Expense
1 Total pages Schedule F1		AME to Elect Trey Duhon Wa	aller Coun	tv Judae	3 Filer ID (Ethic	s Commission Filers)
4 <sub>Date</sub> 09/18/2023	5 Payee na					
6 Amount (\$) 27.06	7 Payee ad 1601 La	ke Robbins Dr, The V	Voodlan	<sup>City;</sup> ds TX 77380	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Categor Food/Be	y (See Categories listed at the top of the SVETAGE	is schedule)	(b) Description		
	(c)	Check if travel outside of Texas. Complete	Schedule T	Check if Austi	n, TX, officeholder livin	g expense
9 Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought	· · · · ·	Office held
Date	Payee na	me		<u>.</u>	<u> </u>	
09/18/2023	Chic-Fil-	A				
Amount (\$) 19.16	Payee ad 390 N. I-	<sub>dress;</sub> 45, Ennis TX 75119		City,	State;	Zip Code
PURPOSE OF EXPENDITURE	Category Food/Be	(See Categories listed at the top of this EVERAGE	schedule)	Description TAHSR meetir	ng	
		Check if travel outside of Texas. Complete §	Schedule T	Check if Austin	, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH		ite / Officeholder name		Office sought		Office held
Date	Payee na	me		-		
09/25/2023	United A	irlines				
Amount (\$) 2,185.60	Payee add 233 So. V	<sup>tress;</sup> Vhacker Drive, Chica		City; 0606	State;	Zip Code
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this s ut of District		Description Airfare for DC to with McCaul, No		
		Check if travel outside of Texas. Complete S	chedule T	Check if Austin,	, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH		te / Officeholder name		Office sought		Office held
	ATT	ACH ADDITIONAL COPIES	OF THIS S	SCHEDULE AS NEEL	DED	

## SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travet in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1	2 FILER NAME Committee to Elect Trey Duhon Walle	er County Judge	3 Filer ID (Ethics Commission Filers)
4 Date 09/28/2023	5 Payee name Hill Country BBQ		· · · · · · · · · · · · · · · · · · ·
6 Amount (\$) 50.04	7 Payee address; 27004 Hwy 6, Hempstead TX 7	City; 7445	State; Zip Code
8	(a) Category (See Categories listed at the top of this so	thedule) (b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage	WCEDP meeti	ng
	(C) Check if travel outside of Texas. Complete Sch	edule T. Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
10/02/2023	Cracker Barrel		
Amount (\$) 16.85	Payee address; 1602 TX-351, Abilene, TX 7960	City; )1	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch Food/Beverage	Description	rence
	Check if travel outside of Texas. Complete Sch	edule T. Check if Austin	I, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Or	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
10/05/2023	Cracker Barrel		
Amount (\$) 18.48	Payee address; 1602 TX-351, Abilene, TX 7960	City; 1	State; Zip Code
	Category (See Categories listed at the top of this sch	edute) Description	· · · · · · · · · · · · · · · · · · ·
PURPOSE OF EXPENDITURE	Food/Beverage	Judicial Conference	ence
	Check if travel outside of Texas. Complete Sche	dule T. Check if Austin,	, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NEE	DED

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment	Fees Food/ By Gift/A al Committee Legal	Expense Beverage Expense wards/Memorials Expense Services Instruction Guide explain:	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor	Solic#ation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a catego	ment & Related Expense
1 Total pages Schedule F1		lect Trey Duhon Wall	er Count	ly Judge	3 Filer ID (Ethics	Commission Filers)
4 <sub>Date</sub> 10/16/2023	5 Payee name Washington				<u> </u>	<u> </u>
<sup>6</sup> Amount (\$) 1,123.39	7 Payee address 775 12th St N	NW, Washington,	DC 200	City; 005	State;	Zip Code
8	(a) Category (See	Categories listed at the top of this s	schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Travel Out o	f District		Hotel for DC tr	ip for TAHSR	
	(C) Check if	travel outside of Texas. Complete Sc	hedule T.	Check if Austin	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/O		fficeholder name		Office sought		Office held
Date	Payee name					
10/16/2023	United Airline	es				
Amount (\$) 621.74	Payee address; 233 So. Wha	cker Drive, Chicag	go IL 6(	City; 0606	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Ca Travel Out c	itegories listed at the top of this sc f District	hedule)	Description Fees for changing	g flights and De	parting airport
	Checkift	ravel outside of Texas. Complete Sct	nedule T	Check if Austin	TX, officeholder living	expense
Complete <u>QNLY</u> if direct expenditure to benefit C/OF		ficeholder name	—— <b>.</b>	Office sought		Office held
Date	Payee name					
10/16/2023	Panera Bread	Ł				
Amount (\$) 43.51	Payee address; 601 13th St N	W, Washington, I	DC 200	City; 05	State;	Zip Code
·	Category (See Ca	tegories listed at the top of this sch	redule)	Description		
PURPOSE OF EXPENDITURE	Food/Bevera	ge	[	DC Trip		
	Check if t	avel outside of Texas. Complete Sch	edule T.	Check if Austin,	TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		fficeholder name		Office sought		Office held
	ATTACH	ADDITIONAL COPIES O	OF THIS S	CHEDULE AS NEEL	DED	

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made 8 Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ove Poiling Ex Printing E: Salarles/V	xpense Vages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense
1 Total pages Soredule F1	2 FILER N	AME to Elect Trey Duhon Wal	ler Coun	ty Judge	3 Filer ID (Ethic	s Commission Filers)
4 Date 10/17/2023	5 Payee na Longwoi	me th Cafeteria				
6 Amount (\$) 19.20	7 Payee ad 212 S Ca	dress, apitol St SW, Washing	gton, D(	City: C 20515	State;	Zip Code
8 PURPOSE OF EXPENDITURE		y (See Categories listed at the top of this Out of District	schedule)	(b) Description Lunch during (	Congressiona	al rep meetings
	(c)	Check if travel outside of Texas. Complete S	chedule T	Check if Austi	n, TX, officeholder living	g expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held
Date	Payee na	me				
10/17/2023	Proper 2	1				
Amount (\$) 90.00	Payee ad 1319 F S	<sup>dress,</sup> St NW, Washington, D	C 2000	City: )4	State	Zip Code
PURPOSE OF EXPENDITURE	Category Food/Be	(See Categories listed at the top of this s EVERAGE	chedule)	Description DC Trip		
		Check if travel outside of Texas. Complete So	chedule T,	Check if Austi	n, TX, officeholder living	] expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ite / Officeholder name		Office sought		Office held
Date	Payee na	me				
10/23/2023	Amazon					
Amount (\$) 166.66	Payee add 410 Terry	dress; / Ave N, Seattle 9810	9, WA	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	<sub>Category</sub> Event Ex	(See Categories listed at the top of this at PENSE	10111-01010-01	Description Halloween cost	tumes for offi	се
		Check if travel outside of Texas, Complete Sc	hedule T	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF		te / Officeholder name		Office sought		Office held
	ATT	ACHADDITIONAL COPIES	OF THIS :	SCHEDULE AS NEE	DED	

# SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politik Credit Card Payment	al Committee Legal Services	Office C bense Polling   nals Expense Printing	payment/Reimbursement werhead/Rental Expense Expense Wages/Contract Labor o complete this form.	Solicitation/Fundraisk Transportation Equip Travel In District Travel Out Of District Other (enter a categor	ment & Related Expense
1 Total pages Schedule F1	2 FILER NAME Committee to Elect Trey	Duhon Waller Cou	nty Judge	3 Filer ID (Ethics	Commission Filers)
4 Date 10/17/2023	5 Payee name Washington DC Met	iro	<u> </u>	·	
6 Amount (\$)	7 Payee address 300 7th Street SW, V	Nachington D (	City;	State;	Zip Code
14.00			2., 0.3.		
8	(a) Category (See Categories liste		(b) Description		
PURPOSE	Travel Out of Distric	et 👘	Metro fares		
EXPENDITURE				<u> </u>	
	(C) Check if travel outside o	fTexas. Complete Schedule T	Check if Austi	n, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder	name	Office sought	(	Office held
Date	Payee name				
10/26/2023	JW Marriott				
Amount (\$)	Payee address;	·	City;	State:	Zip Code
30.00	806 Main St, Housto	n, TX 77002			
	Category (See Categories listed	at the top of this schedule)	Description		·
PURPOSE	Travel		Parking for TA	G luncheon	
			U U		
	Check if travel outride of	Texas. Complete Schedule T.			·
Complete ONLY if direct	Candidate / Officeholder			h, TX, officeholder living e	
expenditure to benefit C/O		name	Office sought	C	office held
Date	Payee name				
10/30/2023	D Vine Wine Bar				
Amount (\$)	Payee address;		City:	State;	Zip Code
84.36	25202 Northwest Fwy	/ #100, Cypress	, TX 77429		
	Category (See Categories listed	at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage		Golf tournamen	t follow up	
	Check if travel outside of	Fexas. Complete Schedule T	Check if Austin,	, TX, officeholder living ex	(pense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder	name	Office sought		Office held
	ATTACHADDITION	AL COPIES OF THIS	SCHEDULE AS NEE	DED	

#### SCHEDULE F1

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

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made & Candidate/Officeholder/Politic Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Sopedule F1	2 FILER NAME Committee to Elect Trey Duhon Walle	er County Judge	3 Filer ID (Ethics Commission Filers)
4 Date 11/01/2023	5 Payee name San Bernard Electric Coop Gol	f Tournament	
6 Amount (\$) 250.00	7 Payee address; 29244 FM 1488, Waller, TX 774	City; 484	State; Zip Code
8	(a) Category (See Categories listed at the top of this so	chedule) (b) Description	
PURPOSE OF EXPENDITURE	Donation	Sponsorship fo tournament	or scholarship golf
	(C) Check if travel outside of Texas. Complete Sch	edule T. Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date	Payee name	<u>.</u>	
10/31/2023	Brookshire Brothers		
Amount (\$) 134.97	Payee address; 300 US-290 BUS, Hempstead,	City; TX 77445	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch Event expense	Description Halloween at c	courthouse
	Check if travel outside of Texas. Complete Sch	edule T. Check If Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
11/08/2023	Harland Clarke		
Amount (\$) 81.69	Payee address: 10931 Laureate Drive, San Anto	City: DNIO	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schu Banking expense	edule) Description Ordered new cl	hecks
	Check if travel outside of Texas. Complete Sche	dule T Check if Austin	, TX, officeholder living expense
Complete <u>QNLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NEE	DED

Forms provided by Texas Ethics Commission

#### SCHEDULE F1

EXPENDITURE	CATEGORIES	FOR	BOX	B(a)
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Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Loan Rep: Office Ove Polling Ex Printing E Salaries/V	xpense Vages/Confract Labor	Travel In District Travel Out Of Distri	pment & Related Expense
1 Total pages Spedule F1		AME e to Elect Trey Duhon Wa	ller Coun	tv Judae	3 Filer 1D (Ethic	s Commission Filers)
4 Date 11/03/2023	5 Payee na			, trage		
6 Amount (\$) 43.24	7 Payee ac 615 US	<sup>ddress;</sup> 290 Bus, Hemsptead,	, TX 774	City: 445	State,	Zip Code
8 PURPOSE OF EXPENDITURE	1	y (See Categories listed at the top of this everage	s schedule)	(b) Description Lunch with sta	ſf	
	(c)	Check if travel outside of Texas. Complete 5	Schedule T	Check if Austi	n, TX, officeholder livin	g expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held
Date	Payee na	me		-		
11/13/2023	Texas S	ecretary of State				
Amount (\$) 23.00	Payee ad 1400 Co	Idress; ngress Ave., Austin, <sup>-</sup>	TX 7870	City; )1	State;	Zip Code
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this s EXPENSE	schedule)	Description TAHSR record	l research	
		Check if travel outside of Texas. Complete S	chedule T	Check if Austin	n, TX, officeholder living	j expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held
Date	Payee na	ime				
10/10/2023	Carbett '	'Trey" J. Duhon III				
Amount (\$) 2,500.00	Payee ad PO Box 6	<sup>dress;</sup> 540, Hemsptead, Tex;	as 7748	City; 34	State;	Zip Code
PURPOSE OF EXPENDITURE	Category Reimbur	(See Categories listed at the top of this s Sement		Description Reimbursemen from personal fi		expenses
		Check if travel outside of Texas. Complete Se	chedule T	Check if Austin	, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name		Office sought		Office held
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#### SCHEDULE F1

EXPENDITU	ATEG	ORIES	FOR	вох	8(s
	 			DOA	Ule

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment	al Committee Legal Services	Loan F Office pense Polling vials Expense Printin	Repayment/Reimbursement Overhead/Rental Expense ) Expense g Expense suWages/Confract Labor to complete this form,	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F	2 FILER NAME	- <u> </u>		3 Filer ID (Ethics Commission Filers)
4 Date 11/03/2023	5 Payee name Waller County			<u>I</u>
6 Amount (\$) 200.00	7 Payee address; 425 FM 1488, Hemp	ostead, TX 7744	City; 45	State; Zip Code
8	(a) Category (See Categories list	ed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Rental Expense		Community ce PeeWee Footl	enter rental for Waller ball
	(C) Check if travel outside o	of Texas. Complete Schedule T	Check if Austr	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder	name	Office sought	Office held
Date	Payee name			
11/28/2023	Waller High School	1		
Amount (\$) 250.00	Payee address; 31213 Waller Spring	Creek Rd, Wa	<sup>City:</sup> Iler, TX 77484	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed Donation	1 at the top of this schedule)	Description Soccer tournal	ment sponsorship
	Check if travel outside of	Texas. Complete Schedule T	Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder	name	Office sought	Office held
Date	Payee name		<u> </u>	
12/04/2023	Costco			
Amount (\$) 454.90	Payee address; 26960 Northwest Fwy	y, Cypress, TX	City: 77433	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed Event Expense	at the top of this schedule)	Description Gifts for County	Christmas Luncheon
	Check if travel outside of	Texas. Complete Schedule T.	Check if Austin,	TX. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder	name	Office sought	Office held
	ATTACHADDITION	AL COPIES OF THIS	SCHEDULE AS NEED	DED

SCHEDULE F1

<b>EXPENDITURE CATEGORIES FOR BOX 8(a</b>
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Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office Ove Polling Ex Printing E Salarles/V	xpense Vages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense	
1 Total pages Schedule F1		· · · · · · · · · · · · · · · · · · ·	<u>.                                    </u>		3 Filer ID (Ethic	s Commission Filers)	
4 Date 12/04/2023	5 Payee name Target						
6 Amount (\$) 516.00	7 Payee a 6635 N	ddress, Grand Pkwy, Spring, <sup>-</sup>	TX 7738	City; 39	State;	Zip Code	
8	(a) Categor	y (See Categories listed at the top of this	schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Event E	Expense		Gift cards for County Christmas luncheon			
	(C)	Check If travel outside of Texas. Complete S	ichedule T.	Check if Austi	n, TX, officeholder living	g expense	
9 Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought	<u>.</u>	Office held	
Date	Payee na	me					
12/04/2023	Bloofin						
Amount (\$) 130.00	Payee ad 6615 N (	Grand Parkway West,	# 325,	City: Spring, TX 773	State: 89	Zip Code	
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this s everage	chedule)	Description Lunch with cor	nsultant		
		Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense				expense	
Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held	
Date	Payee na						
12/12/2023	Knights o	of Columbus					
Amount (\$)	Payee ad 22892 M	ack Washington Ln, H	empste	city; ad, TX 77445	State;	Zip Code	
	Category	(See Categories listed at the top of this so	hedule)	Description	,		
PURPOSE OF EXPENDITURE	Rental Expense			KC Hall rental for County Christmas luncheon			
	Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF		te / Officeholder name		Office sought		Office held	
	ATT	ACH ADDITIONAL COPIES	OF THIS S	CHEDULE AS NEEL	DED		

		DITURES MADE CONTRIBUTIONS	5		SCI	HEDULE F1
If the requested in	formation is	s not applicable, DO NOT i	nclude	this page in the re	eport.	
		EXPENDITURE CATE	_			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officehokder/Political Committee Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Vense Loan Repayment/Reimbursement Office Overhead/Rental Expense erage Expense Poling Expense ts/Memorials Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1					3 Filer ID (Ethi	cs Commission Filers)
4 Date 12/11/2023	5 Payee name Rail & Rye					
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 101 Railroad St, Navasota, TX 77868					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts Gift cards for staff			staff		
	(c)	Check if travel outside of Texas. Complete So	thedule T.	Check if Austi	n, TX, officeholder livin	g expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held
Date	Payee na	ime				
12/11/2023	Hobby L	obby				
Amount (\$) 74.29	Payee ac 26060 U	<sup>Idress,</sup> S-290, Cypress, TX 7	7429	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense			Description Christmas decorations for county annex		
	10	Check if travel outside of Texas. Complete Sci	hedule T	Check if Austin	TX officeholder living	l expense
Complete ONLY if direct Candidate / Officehol		ate / Officeholder name		Office sought		Office held
Date	Payee na	me	_			
12/08/2023	Carbett "	'Trey" J. Duhon III				
Amount (\$) 2,606.50	Payee ad PO Box 6	<sup>dress;</sup> 340, Waller, Texas 774	84	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category Loan Re	(See Categories listed at the top of this sch payment	iedule)	Description Loan repaymen	t for accrued	expenses
		Check if travel outside of Texas. Complete Sch	edule T	Check if Austin,	TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH		te / Officeholder name		Office sought		Office held

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## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment	F By G	vent Expense ecs ood/Beverage Expense iff/Awards/Memorials Expense egal Services The Instruction Guide explain	Office Ove Polling Exj Printing Ex Salaries/M	ipense /ages/Contract Labor	Travel in District Travel Out Of Distr	ipment & Related Expense	
1 Total pages Schedule F1	2 FILER NAM Committee t	nE o Elect Trey Duhon Wal	ler Count	ty Judge	3 Filer ID (Ethi	cs Commission Filers)	
4 <sub>Date</sub> 12/15/2023	5 Payee name The Roux				L,		
6 Amount (\$) 100.00	7 Payee addr 2643 Com	ess: mercial Center Blvd	Suite A	<sup>City;</sup> A300, Katy, TX	State; 77494	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category ( Gifts	See Categories listed at the top of this	schedule)	(b) Description Gift card for st	aff	0	
	( <b>c)</b> ch	eck if travel outside of Texas. Complete S	chedule T	Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		e / Officeholder name		Office sought		Office held	
Date	Payee name	7 <u>11</u>					
12/19/2023	Costco						
Amount (\$) 606.40	Payee addr 6960 Nort	ess, hwest Fwy, Cypress	, TX 77	City; 433	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (s Office ove	ee Categories listed at the top of this s Ərhead	chedule)	Description Laptop			
	Ch	eck if travel outside of Texas. Complete S	mplete Schedule T. Check if Austin, TX, officeholder living exper			g expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		/ Officeholder name		Office sought		Office held	
Date	Payee name	8					
12/22/2023	Longhorn	Steak					
Amount (\$) 188.43	Payee addro 29120 US	-290, Cypress, TX 7	7433	City;	State;	Zip Code	
PURPOSE	Category (See Categories listed at the top of this schedule) Food/Beverage			Description Christmas lunch with office staff			
EXPENDITURE							
		ck if travel outside of Texas. Complete Sc	hedule T.	Check if Austin, TX, officeholder living expense			
Complete <u>QNLY</u> if direct expenditure to benefit C/OF		/ Officeholder name		Office sought		Office held	
	ATTA	CHADDITIONAL COPIES	OF THIS S	SCHEDULE AS NEE	DED		