

FORM C/OH  
COVER SHEET PG 1

Revised 1/1/2024

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

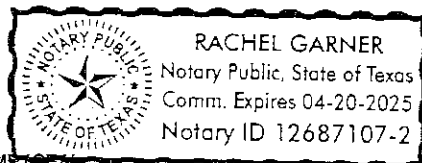
|                            |   |  |
|----------------------------|---|--|
| 15 C/OH NAME<br>Ryan Gable |   | 16 Filer ID (Ethics Commission Filers) |
| 17 CONTRIBUTION TOTALS     | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$                                     |
|                            | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 185,659.14                          |
| EXPENDITURE TOTALS         | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.  | \$ 15,034.22                           |
|                            | 4. TOTAL POLITICAL EXPENDITURES   | \$ 138,928.73                          |
| CONTRIBUTION BALANCE       | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  | \$ 501,688.76                          |
| OUTSTANDING LOAN TOTALS    | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$                                     |

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*R. Gable*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Ryan Gable this the 11 day of July

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

Rachel Garner Rachel Garner Notary Public  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_

My address is \_\_\_\_\_  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_  
(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

|  |  |   |
|--|--|---|
| <b>19 FILER NAME</b><br>Ryan Gable               |  | <b>20 Filer ID (Ethics Commission Filers)</b> |
| <b>21 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |  | <b>SUBTOTAL<br/>AMOUNT</b>                    |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ 185,659.14                                 |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$ 32,094.00                                  |
| 3.   | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS   | \$  |
| 4.   | <input type="checkbox"/> SCHEDULE E: LOANS   | \$  |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS              | \$ 138,928.73                                 |
| 6.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  | \$  |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS                        | \$  |
| 8.   | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD   | \$  |
| 9.   | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                                   | \$  |
| 10.  | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH                   | \$  |
| 11.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS                      | \$  |
| 12.  | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 10,000.00                                  |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

|  |   |  |
|--|---|--|
| The Instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:<br><b>46</b>            |
| 2 FILER NAME<br><b>Ryan Gable</b>  |   | 3 Filer ID (Ethics Commission Filers)              |
| 4 Date<br><b>01/21/24</b>  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Bob Smith</b><br>6 Contributor address; City; State; Zip Code<br><b>86 Murphy Farm Rd Huntsville, TX 77320</b>     | 7 Amount of contribution (\$)<br><b>\$1,100.00</b> |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)                      |
| Date<br><b>02/08/24</b>  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Eric Allum</b><br>Contributor address; City; State; Zip Code<br><b>17580 I-45 South The Woodlands, TX 77384</b>      | Amount of contribution (\$)<br><b>\$800.00</b>     |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                        |
| Date<br><b>02/16/24</b>  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Reynaldo Saludaes</b><br>Contributor address; City; State; Zip Code<br><b>5714 N Ossineke Dr Spring, TX 77386</b>    | Amount of contribution (\$)<br><b>\$600.00</b>     |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                        |
| Date<br><b>02/20/24</b>  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Casey Kosh</b><br>Contributor address; City; State; Zip Code<br><b>75 W Horizon Ridge Pl The Woodlands, TX 77381</b> | Amount of contribution (\$)<br><b>\$500.00</b>     |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                        |
|  |   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |  |

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| 2 FILER NAME<br>Ryan Gable  |  | 3 Filer ID (Ethics Commission Filers)              |
| 4 Date<br>02/21/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Jennifer Murray</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">6 Contributor address; City; State; Zip Code<br/><b>11226 Jones Rd W Houston, TX 77065</b></div>          | 7 Amount of contribution (\$)<br><b>\$2,500.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |  | 9 Employer (See Instructions)                      |
| Date<br>02/21/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Richard K Bird</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Contributor address; City; State; Zip Code<br/><b>11420 Watterson Ct, Ste 100 Louisville, KY 40299</b></div> | Amount of contribution (\$)<br><b>\$900.00</b>     |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                        |
| Date<br>02/21/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Darryl Wischnewsky</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Contributor address; City; State; Zip Code<br/><b>1005 Cowards Creek Dr Friendswood, TX 77546</b></div>  | Amount of contribution (\$)<br><b>\$1,500.00</b>   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                        |
| Date<br>02/21/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Jesus Rodriguez</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Contributor address; City; State; Zip Code<br/><b>10631 Harwin Dr, Ste 612 Houston, TX 77036</b></div>      | Amount of contribution (\$)<br><b>\$1,500.00</b>   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                        |
|   |  |  |
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| 2 FILER NAME<br>Ryan Gable   |  | 3 Filer ID (Ethics Commission Filers)           |
| 4 Date<br>02/23/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Phillip Stapp</b><br>6 Contributor address; City; State; Zip Code<br><b>9527 FM 379 Navasota, TX 77868</b>           | 7 Amount of contribution (\$) <b>\$2,500.00</b> |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)                   |
| Date<br>02/27/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Brent Hill</b><br>Contributor address; City; State; Zip Code<br><b>11246 Majestic Dr Montgomery, TX 77316</b>          | Amount of contribution (\$) <b>\$2,500.00</b>   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)                     |
| Date<br>02/28/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Donald R Miller</b><br>Contributor address; City; State; Zip Code<br><b>11300 S FM 1174 Bertram, TX 78605</b>          | Amount of contribution (\$) <b>\$10.00</b>      |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)                     |
| Date<br>02/28/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Margaret E Campbell</b><br>Contributor address; City; State; Zip Code<br><b>6 Coralvine Ct The Woodlands, TX 77380</b> | Amount of contribution (\$) <b>\$100.00</b>     |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)                     |
|  |  |   |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |  |   |

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| 2 FILER NAME<br>Ryan Gable   |  | 3 Filer ID (Ethics Commission Filers)     |
| 4 Date<br>03/04/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Trish Erwin<br>6 Contributor address; City; State; Zip Code<br>310 Davis Rd Culloden, WV 25510                   | 7 Amount of contribution (\$)<br>\$600.00 |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)             |
| Date<br>03/06/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Elizabeth M Grimm<br>Contributor address; City; State; Zip Code<br>19 E Shale Creek Circle The Woodlands, TX 77382 | Amount of contribution (\$)<br>\$100.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)               |
| Date<br>03/11/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>David Wood<br>Contributor address; City; State; Zip Code<br>11620 Kingford Dr Montgomery, TX 77316                 | Amount of contribution (\$)<br>\$1,400.00 |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)               |
| Date<br>03/12/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>John Moritz<br>Contributor address; City; State; Zip Code<br>3305 New Garden View Ln Houston, TX 77018             | Amount of contribution (\$)<br>\$100.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)               |
|  |  |   |
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| 2 FILER NAME<br><b>Ryan Gable</b>   |   | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br><b>03/12/24</b>   | 5 Full name of contributor<br><b>Danny Word</b><br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br>6 Contributor address; City; State; Zip Code<br><b>40515 Remington Ln Magnolia, TX 77354</b>       | 7 Amount of contribution (\$)<br><b>\$500.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                    |
| Date<br><b>03/12/24</b>   | Full name of contributor<br><b>Theo Badea</b><br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Contributor address; City; State; Zip Code<br><b>3815 Benders Landing Spring, TX 77386</b>           | Amount of contribution (\$)<br><b>\$500.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br><b>03/12/24</b>   | Full name of contributor<br><b>John Reed</b><br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Contributor address; City; State; Zip Code<br><b>32922 Westwood Square West Dr Magnolia, TX 77354</b> | Amount of contribution (\$)<br><b>\$500.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br><b>03/12/24</b>   | Full name of contributor<br><b>Shannon McClure</b><br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Contributor address; City; State; Zip Code<br><b>17407 Memorial Blosson Dr Spring, TX 77379</b> | Amount of contribution (\$)<br><b>\$500.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
|   |   |  |
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| 4 Date<br>03/12/24  | <div>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Matt Teal</b></div> <div>6 Contributor address; City; State; Zip Code<br/><b>29410 Commons Superior Huffman, TX 77336</b></div>            | 7 Amount of contribution (\$)<br><b>\$600.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |  | 9 Employer (See Instructions)                    |
| Date<br>03/12/24  | <div>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>David Abrahams</b></div> <div>Contributor address; City; State; Zip Code<br/><b>10323 Veterans Memorial Houston, TX 77038</b></div>          | Amount of contribution (\$)<br><b>\$1,500.00</b> |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                      |
| Date<br>03/12/24  | <div>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Heather Schindewolf</b></div> <div>Contributor address; City; State; Zip Code<br/><b>19321 Stuebner Airline Spring, TX 77379</b></div>       | Amount of contribution (\$)<br><b>\$1,500.00</b> |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                      |
| Date<br>03/12/24  | <div>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Ruth Vernier</b></div> <div>Contributor address; City; State; Zip Code<br/><b>2441 High Timber Dr, Ste 110 The Woodlands, TX 77380</b></div> | Amount of contribution (\$)<br><b>\$1,000.00</b> |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                      |
|   |  |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |  |  |

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| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)       |
| 4 Date<br>03/12/24  | <div style="text-align: center;">5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br/>Adam Dunn</div> <div style="text-align: center;">6 Contributor address; City; State; Zip Code<br/>11109 Beinhorn Rd Houston, TX 77024</div>       | 7 Amount of contribution (\$)<br>\$1,500.00 |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)               |
| Date<br>03/12/24  | <div style="text-align: center;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br/>Mark Miller</div> <div style="text-align: center;">Contributor address; City; State; Zip Code<br/>14719 Heritage Dr Magnolia, TX 77354</div>        | Amount of contribution (\$)<br>\$800.00     |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                 |
| Date<br>03/12/24  | <div style="text-align: center;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br/>Shannon Carnes</div> <div style="text-align: center;">Contributor address; City; State; Zip Code<br/>18206 Cameron Reach Ct Tomball, TX 77377</div> | Amount of contribution (\$)<br>\$800.00     |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                 |
| Date<br>03/12/24  | <div style="text-align: center;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br/>Paul Mason</div> <div style="text-align: center;">Contributor address; City; State; Zip Code<br/>1505 Aldine Bender Houston, TX 77032</div>         | Amount of contribution (\$)<br>\$2,500.00   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                 |
|   |   |   |
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| 4 Date<br>03/12/24   | 5 Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#:<br>Nick Roberts<br>6 Contributor address; City; State; Zip Code<br>6318 North Lazy Meadow Way Spring, TX 77386 | 7 Amount of contribution (\$)<br>\$2,500.00 |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)               |
| Date<br>03/12/24   | Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#:<br>Aven McBride<br>Contributor address; City; State; Zip Code<br>11602 Huffsmith Kuykendahl Rd Tomball, TX 77375 | Amount of contribution (\$)<br>\$5,000.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)                 |
| Date<br>03/13/24   | Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#:<br>ILA Local 28 PAC Fund<br>Contributor address; City; State; Zip Code<br>4100 Greenshadow Dr Pasadena, TX 77503 | Amount of contribution (\$)<br>\$1,500.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)                 |
| Date<br>03/13/24   | Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#:<br>John Marshall<br>Contributor address; City; State; Zip Code<br>3806 Oreana Ct Spring, TX 77386                | Amount of contribution (\$)<br>\$600.00     |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)                 |
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| 4 Date<br>03/13/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heather McGuire                  | 7 Amount of contribution (\$) \$500.00 |
| 6 Contributor address; City; State; Zip Code<br>4800 Bryant Irvin Ct Ft. Worth, TX 76107   |   |  |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)          |
| Date<br>03/13/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Eric Murray                        | Amount of contribution (\$) \$600.00   |
| Contributor address; City; State; Zip Code<br>13436 Sterling Park Ln Cypress, TX 77429   |   |  |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>03/13/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Frank Torres                       | Amount of contribution (\$) \$3,200.00 |
| Contributor address; City; State; Zip Code<br>27902 Robinson Park Dr Spring, TX 77386  |   |  |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>03/13/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Strategy Professional Services LLC | Amount of contribution (\$) \$800.00   |
| Contributor address; City; State; Zip Code<br>3911 Rolling Thicket Dr Spring, TX 77386   |   |  |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
|  |   |  |
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| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)    |
| 4 Date<br>03/13/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Chris & Cindy Delahoussave<br>6 Contributor address; City; State; Zip Code<br>18315 N Settlers Shore Dr Cypress, TX 77433 | 7 Amount of contribution (\$) \$1,500.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)            |
| Date<br>03/13/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Brad & Audrey Stapp<br>Contributor address; City; State; Zip Code<br>8527 Majestic Lake Ct Montgomery, TX 77316             | Amount of contribution (\$) \$5,000.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>03/14/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Carmine & Gabriella Falcone<br>Contributor address; City; State; Zip Code<br>38 Leeward Cove Dr The Woodlands, TX 77381     | Amount of contribution (\$) \$1,500.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>03/14/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Steve Anderson<br>Contributor address; City; State; Zip Code<br>710 S Frazier St Conroe, TX 77301                           | Amount of contribution (\$) \$500.00     |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
|  |   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |  |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

03/15/24

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Barry & Cindy Donoho

7 Amount of contribution (\$)

\$2,500.00

6 Contributor address;

City;

State;

Zip Code

175 Vue Point Pl The Woodlands, TX 77380

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date

03/15/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jacqueline Clifton

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

495 South High Street, Ste 50 Columbus, OH 43215

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

03/15/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lee Tillman

Amount of contribution (\$)

\$2,000.00

Contributor address;

City;

State;

Zip Code

43 North Palmiera Circle The Woodlands, TX 77382

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

03/18/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Shane Lagarce

Amount of contribution (\$)

\$700.00

Contributor address;

City;

State;

Zip Code

4213 Forest Ln Garland, TX 75042

Principal occupation / Job title (See instructions)

Employer (See instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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| The Instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:                |
| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)     |
| 4 Date<br>03/18/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Michael Sebastian<br>6 Contributor address; City; State; Zip Code<br>13115 Southwest Frwy Sugarland, TX 77478 | 7 Amount of contribution (\$)<br>\$500.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)             |
| Date<br>03/18/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Dan Butler<br>Contributor address; City; State; Zip Code<br>157 Sanderliung Ln Montgomery, TX 77316             | Amount of contribution (\$)<br>\$1,500.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)               |
| Date<br>03/18/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Brandon Martin<br>Contributor address; City; State; Zip Code<br>13714 Arcott Bend Tomball, TX 77377             | Amount of contribution (\$)<br>\$1,500.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)               |
| Date<br>03/18/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Brent Livers<br>Contributor address; City; State; Zip Code<br>1429 Talco Garden League City, TX 77573           | Amount of contribution (\$)<br>\$600.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)               |
|  |   |   |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |   |

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| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date<br>03/18/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kyle Bandy<br>6 Contributor address; City; State; Zip Code<br>103 Boarsmen Ct Montgomery, TX 77316         | 7 Amount of contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)          |
| Date<br>03/19/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Matthew Massoud<br>Contributor address; City; State; Zip Code<br>18238 Memorial Springs Ct Tomball, TX 77375 | Amount of contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>03/19/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ceaser Sanchez<br>Contributor address; City; State; Zip Code<br>5515 Fellowship Pine Circle Spring, TX 77379 | Amount of contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>03/19/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>PSE Outfitters<br>Contributor address; City; State; Zip Code<br>8331 FM 1960 Bypass Rd W Humble, TX 77338    | Amount of contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
|  |   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. |   |  |



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| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)     |
| 4 Date<br>03/19/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>James Blake</b>           | 7 Amount of contribution (\$)<br>\$600.00 |
| 6 Contributor address; City; State; Zip Code<br>4802 10 Sleep Ln Friendswood, TX 36303  |   |   |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)             |
| Date<br>03/20/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Kyle &amp; Tricia Brown</b> | Amount of contribution (\$)<br>\$2,500.00 |
| Contributor address; City; State; Zip Code<br>38 Thornblade Circle The Woodlands, TX 77389  |   |   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)               |
| Date<br>03/20/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Roberto Falcone</b>         | Amount of contribution (\$)<br>\$2,000.00 |
| Contributor address; City; State; Zip Code<br>26 Silver canyon Pl The Woodlands, TX 77381   |   |   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)               |
| Date<br>03/21/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Todd Graves</b>             | Amount of contribution (\$)<br>\$1,000.00 |
| Contributor address; City; State; Zip Code<br>9410 Deer Path Lane Magnolia, TX 77354  |   |   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)               |
|   |   |   |
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| 2 FILER NAME<br>Ryan Gable   |  | 3 Filer ID (Ethics Commission Filers)    |
| 4 Date<br>03/21/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>William Link<br>6 Contributor address; City; State; Zip Code<br>719 Sawdust Rd The Woodlands, TX 77380  | 7 Amount of contribution (\$) \$1,500.00 |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)            |
| Date<br>03/21/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Michael Atkins<br>Contributor address; City; State; Zip Code<br>31119 Blue Ridge Park Ln Spring, TX 77386 | Amount of contribution (\$) \$600.00     |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
| Date<br>03/25/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jeffery Bearden<br>Contributor address; City; State; Zip Code<br>11400 FM 2854 Rd Conroe, TX 77304        | Amount of contribution (\$) \$500.00     |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
| Date<br>03/25/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Michael Kossow<br>Contributor address; City; State; Zip Code<br>9203 Thomasville Dr Houston, TX 77064     | Amount of contribution (\$) \$2,500.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
|  |  |  |
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| 2 FILER NAME<br>Ryan Gable  |  | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br>03/26/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Michael Atkins</b><br>6 Contributor address; City; State; Zip Code<br><b>31119 Blue Ridge Park Ln Spring, TX 77386</b> | 7 Amount of contribution (\$)<br><b>\$100.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |  | 9 Employer (See Instructions)                    |
| Date<br>03/27/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Justin Ravari</b><br>Contributor address; City; State; Zip Code<br><b>9968 Cassoway Dr Conroe, TX 77385</b>              | Amount of contribution (\$)<br><b>\$5,000.00</b> |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                      |
| Date<br>03/27/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Dominguez Dykeman</b><br>Contributor address; City; State; Zip Code<br><b>6309 Skyline Dr, Ste B Houston, TX 77057</b>   | Amount of contribution (\$)<br><b>\$1,500.00</b> |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                      |
| Date<br>03/27/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Steven Fink</b><br>Contributor address; City; State; Zip Code<br><b>31565 Timber Grove Ln Spring, TX 77386</b>           | Amount of contribution (\$)<br><b>\$600.00</b>   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                      |
|   |  |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |  |  |

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| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date<br>03/27/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Danny Gurganus<br>6 Contributor address; City; State; Zip Code<br>PO Box 1835 Spring, TX 77383      | 7 Amount of contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)          |
| Date<br>03/27/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Jason Scott<br>Contributor address; City; State; Zip Code<br>PO Box 40786 Houston, TX 77240           | Amount of contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>03/27/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Denise Baker<br>Contributor address; City; State; Zip Code<br>PO Box 2162 Spring, TX 77383            | Amount of contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>03/27/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Darrell Hinkley<br>Contributor address; City; State; Zip Code<br>12000 White Oak Run Conroe, TX 77385 | Amount of contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
|  |   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. |   |  |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A1:                         |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)              |
| 4 Date<br>03/28/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Tewbellas LLC</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">6 Contributor address; City; State; Zip Code<br/>2907 Rayford Rd, Ste 101 Spring, TX 77386</div> | 7 Amount of contribution (\$)<br><b>\$1,500.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                      |
| Date<br>03/28/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Tad Roberts</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Contributor address; City; State; Zip Code<br/>24314 Pineglenn Terrace Dr Spring, TX 77389</div>     | Amount of contribution (\$)<br><b>\$2,500.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                        |
| Date<br>03/28/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Mike Eldridge</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Contributor address; City; State; Zip Code<br/>5907 Spring Cypress Rd Spring, TX 77379</div>       | Amount of contribution (\$)<br><b>\$2,850.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                        |
| Date<br>03/28/24  | <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Mike Eldridge</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Contributor address; City; State; Zip Code<br/>5907 Spring Cypress Rd Spring, TX 77379</div>       | Amount of contribution (\$)<br><b>\$2,850.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                        |
|   |   |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |  |

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1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

03/28/24

5 Full name of contributor

☐ out-of-state PAC (ID#:

Anthony Fletcher

7 Amount of contribution (\$)

\$300.00

6 Contributor address;

City;

State;

Zip Code

18414 Welcave Creek Dr Cypress, TX 77433

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/28/24

Full name of contributor

☐ out-of-state PAC (ID#:

Jack Pedigo

Amount of contribution (\$)

\$1,500.00

Contributor address;

City;

State;

Zip Code

16445 Air Center Blvd Houston, TX 77032

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/28/24

Full name of contributor

☐ out-of-state PAC (ID#:

Mike Eldridge

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

5907 Spring Cypress Rd Spring, TX 77379

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/29/24

Full name of contributor

☐ out-of-state PAC (ID#:

Steven Terrell

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

18715 Croftsmill Dr New Caney, TX 77357

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br>04/01/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>C &amp; S Executive LLC</b><br>6 Contributor address; City; State; Zip Code<br><b>507 Alana Ln Spring, TX 77386</b>                     | 7 Amount of contribution (\$)<br><b>\$500.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                    |
| Date<br>04/01/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Robert &amp; Lindsey Kasprzak</b><br>Contributor address; City; State; Zip Code<br><b>27 Grand Regency Circle The Woodlands, TX 77382</b> | Amount of contribution (\$)<br><b>\$1,500.00</b> |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br>04/01/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Kevin Keener</b><br>Contributor address; City; State; Zip Code<br><b>30011 Aldine Westfield Rd Spring, TX 77386</b>                       | Amount of contribution (\$)<br><b>\$500.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br>04/01/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Tewbellas LLC</b><br>Contributor address; City; State; Zip Code<br><b>2907 Rayford Rd, Ste 101 Spring, TX 77386</b>                       | Amount of contribution (\$)<br><b>\$1,500.00</b> |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
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| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)           |
| 4 Date<br>04/01/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Carmine &amp; Gabriella Falcone</b><br>6 Contributor address; City; State; Zip Code<br>38 Leeward Cove Dr The Woodlands, TX 77381 | 7 Amount of contribution (\$) <b>\$2,400.00</b> |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)                   |
| Date<br>04/02/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Mark Feanny</b><br>Contributor address; City; State; Zip Code<br>10 Panamint Court Spring, TX 77389                                 | Amount of contribution (\$) <b>\$2,500.00</b>   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                     |
| Date<br>04/02/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Dwight Vincent</b><br>Contributor address; City; State; Zip Code<br>741 Mountain View Dr Montgomery, TX 77356                       | Amount of contribution (\$) <b>\$800.00</b>     |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                     |
| Date<br>04/04/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Amy Milstead</b><br>Contributor address; City; State; Zip Code<br>1415 Spring Hills Dr Spring, TX 77386                             | Amount of contribution (\$) <b>\$500.00</b>     |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                     |
|  |   |   |
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| 2 FILER NAME<br><b>Ryan Gable</b>   |   | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br><b>04/04/24</b>   | <div style="border-bottom: 1px solid black; padding-bottom: 5px;">5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Frank Green</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">6 Contributor address; City; State; Zip Code<br/><b>15000 Mansion Views Dr Conroe, TX 77384</b></div>                    | 7 Amount of contribution (\$)<br><b>\$500.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                    |
| Date<br><b>04/04/24</b>   | <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Mike Eldridge</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contributor address; City; State; Zip Code<br/><b>5907 Spring Cypress Rd Spring, TX 77379</b></div>                      | Amount of contribution (\$)<br><b>\$600.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br><b>04/04/24</b>   | <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Carmine &amp; Gabriella Falcone</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contributor address; City; State; Zip Code<br/><b>38 Leeward Cove Dr The Woodlands, TX 77381</b></div> | Amount of contribution (\$)<br><b>\$800.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br><b>04/04/24</b>   | <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/><b>Mike Eldridge</b></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contributor address; City; State; Zip Code<br/><b>5907 Spring Cypress Rd Spring, TX 77379</b></div>                      | Amount of contribution (\$)<br><b>\$600.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
|   |   |  |
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| The instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:                  |
| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)       |
| 4 Date<br>04/05/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Matthew Beckerman<br>6 Contributor address; City; State; Zip Code<br>2424 Honea Eqty Magnolia, TX 77354 | 7 Amount of contribution (\$)<br>\$5,000.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)               |
| Date<br>04/05/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Zach Richmond<br>Contributor address; City; State; Zip Code<br>6 Wild Ginger Ct The Woodlands, TX 77380   | Amount of contribution (\$)<br>\$1,500.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                 |
| Date<br>04/05/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Farouk Shami<br>Contributor address; City; State; Zip Code<br>66 Windward Cove Spring, TX 77381           | Amount of contribution (\$)<br>\$1,500.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                 |
| Date<br>04/10/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Jim & Aryn Wheaton<br>Contributor address; City; State; Zip Code<br>1029 HWY 6 North Houston, TX 77079    | Amount of contribution (\$)<br>\$600.00     |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                 |
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| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |   |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/24

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Matt Beasley Campaign Fund

7 Amount of contribution (\$)

\$800.00

6 Contributor address;

City;

State;

Zip Code

402 Monarch Oak Dr Magnolia, TX 77354

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cline Wraps

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

15825 SH 249, Ste 4 Houston, TX 77086

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hutson Realty Partners, LLC

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

3500 Woods Estates Dr Conroe, TX 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alison &amp; Hilton Yee

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

19 Destiny Cove The Woodlands, TX 77381

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br>04/15/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Clint W. Brown</b><br>6 Contributor address; City; State; Zip Code<br><b>2806 New Strand Galveston, TX 77550</b>                          | 7 Amount of contribution (\$)<br><b>\$250.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                    |
| Date<br>04/15/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Linebarger, Goggan Blair &amp; Sampson, LLP</b><br>Contributor address; City; State; Zip Code<br><b>PO Box 17428 Austin, TX 78760</b>       | Amount of contribution (\$)<br><b>\$300.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br>04/15/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>The Blair Law Firm, P.C.</b><br>Contributor address; City; State; Zip Code<br><b>7 Grogans Park Dr, Building #3 The Woodlands, TX 77380</b> | Amount of contribution (\$)<br><b>\$300.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br>04/16/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Robert Walker Campaign</b><br>Contributor address; City; State; Zip Code<br><b>29567 Tudor Way Magnolia, TX 77355</b>                       | Amount of contribution (\$)<br><b>\$300.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
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| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br>04/17/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>David A. Hallenback, DDS, PLLC</b><br>6 Contributor address; City; State; Zip Code<br><b>138 W Greywing Circle Spring, TX 77382</b> | 7 Amount of contribution (\$)<br><b>\$100.00</b> |
| 8 Principal occupation / Job title (See instructions)   |   | 9 Employer (See instructions)                    |
| Date<br>04/17/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Curtis King</b><br>Contributor address; City; State; Zip Code<br><b>14214 Green Wing Circle Willis, TX 77318</b>                      | Amount of contribution (\$)<br><b>\$800.00</b>   |
| Principal occupation / Job title (See instructions)   |   | Employer (See instructions)                      |
| Date<br>04/17/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Michael Viotto</b><br>Contributor address; City; State; Zip Code<br><b>31103 Lost Creek Ct Tomball, TX 77375</b>                      | Amount of contribution (\$)<br><b>\$500.00</b>   |
| Principal occupation / Job title (See instructions)   |   | Employer (See instructions)                      |
| Date<br>04/22/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Danny Signorelli</b><br>Contributor address; City; State; Zip Code<br><b>1401 Woodlands Parkway The Woodlands, TX 77380</b>           | Amount of contribution (\$)<br><b>\$500.00</b>   |
| Principal occupation / Job title (See instructions)   |   | Employer (See instructions)                      |
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| 4 Date<br>04/22/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>David Buzzelli  | 7 Amount of contribution (\$) \$500.00 |
| 6 Contributor address; City; State; Zip Code<br>1901 Aldine Western Rd Houston, TX 77038   |  |  |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)          |
| Date<br>04/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Michael Calderaro | Amount of contribution (\$) \$1,500.00 |
| Contributor address; City; State; Zip Code<br>28733 Robinson Rd Conroe, TX 77385   |  |  |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)            |
| Date<br>04/25/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>B.D. Griffin      | Amount of contribution (\$) \$200.00   |
| Contributor address; City; State; Zip Code<br>PO Box 1361 Conroe, TX 77305   |  |  |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)            |
| Date<br>04/25/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Eric Culp         | Amount of contribution (\$) \$100.00   |
| Contributor address; City; State; Zip Code<br>466 Rayford Rd, Ste 107 Spring, TX 77386   |  |  |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)            |
|  |  |  |
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| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)       |
| 4 Date<br>04/25/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Carmine &amp; Gabriella Falcone</b><br>6 Contributor address; City; State; Zip Code<br>38 Leeward Cove Dr The Woodlands, TX 77381 | 7 Amount of contribution (\$)<br>\$1,000.00 |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)               |
| Date<br>04/25/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>John &amp; Andrea Blanchard</b><br>Contributor address; City; State; Zip Code<br>4148 Coleridge St Houston, TX 77005                | Amount of contribution (\$)<br>\$2,500.00   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                 |
| Date<br>04/25/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Ken E. Stockton</b><br>Contributor address; City; State; Zip Code<br>100 San Marino Way Horeshoe Bay, TX 78657                      | Amount of contribution (\$)<br>\$500.00     |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                 |
| Date<br>04/25/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Brian &amp; Jill Schweiker</b><br>Contributor address; City; State; Zip Code<br>5 S Doe Run Dr The Woodlands, TX 77380              | Amount of contribution (\$)<br>\$100.00     |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                 |
|   |   |   |
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| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date<br>04/25/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Cheryle A. Sanderson<br>6 Contributor address; City; State; Zip Code<br>3 Misty Point The Woodlands, TX 77380         | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)          |
| Date<br>04/25/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Brenda Dusenbury<br>Contributor address; City; State; Zip Code<br>28218 Wooded Mist Dr Spring, TX 77386                 | Amount of contribution (\$) \$200.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>04/25/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>William B. Smith<br>Contributor address; City; State; Zip Code<br>187 Bonnie Ridge Circle Shenandoah, TX 77384          | Amount of contribution (\$) \$100.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>04/25/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Carmine & Gabriella Falcone<br>Contributor address; City; State; Zip Code<br>38 Leeward Cove Dr The Woodlands, TX 77381 | Amount of contribution (\$) \$400.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
|  |   |  |
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**1** Total pages Schedule A1:**2** FILER NAME

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

04/25/24

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

Thomas Howard

**7** Amount of contribution (\$)

\$1,000.00

**6** Contributor address;

City;

State;

Zip Code

26 Red Sable Dr The Woodlands, TX 77380

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

04/25/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Randal E. Velarde

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

1409 Post Oak Blvd, NBR 2502 Houston, TX 77056

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/25/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mark Morter

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

6719 Montay Bay Dr Spring, TX 77389

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/27/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Adam &amp; Nicole Ochoa

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

25243 Piney Heights Ln Spring, TX 77389

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date<br>04/30/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Tomball Golf Carts, LLC<br>6 Contributor address; City; State; Zip Code<br>7115 Diamond Falls Ln Spring, TX 77389 | 7 Amount of contribution (\$) \$800.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)          |
| Date<br>04/30/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Cline Wraps<br>Contributor address; City; State; Zip Code<br>15825 SH 249, Ste 4 Houston, TX 77086                  | Amount of contribution (\$) \$800.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>04/30/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Marty Kuehn<br>Contributor address; City; State; Zip Code<br>7103 Woodlands Oak Magnolia, TX 77354                  | Amount of contribution (\$) \$200.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
| Date<br>04/30/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>David Whitehead<br>Contributor address; City; State; Zip Code<br>32403 Edgewater Dr Magnolia, TX 77354              | Amount of contribution (\$) \$800.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)            |
|  |   |  |
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| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br>05/01/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Kim Phillips</b><br>6 Contributor address; City; State; Zip Code<br>9950 Woodloch Forest Dr, Ste 1200 The Woodlands, TX 77380 | 7 Amount of contribution (\$)<br><b>\$800.00</b> |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)                    |
| Date<br>05/15/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Barry Blanton</b><br>Contributor address; City; State; Zip Code<br>138 E Capstone Circle The Woodlands, TX 77381                | Amount of contribution (\$)<br><b>\$300.00</b>   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                      |
| Date<br>05/16/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Rayford Plaza LLC</b><br>Contributor address; City; State; Zip Code<br>3910 Waterbend Cove Spring, TX 77386                     | Amount of contribution (\$)<br><b>\$800.00</b>   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                      |
| Date<br>05/16/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Craig &amp; Cindy Heiser</b><br>Contributor address; City; State; Zip Code<br>15 Bessdale Ct Spring, TX 77382                   | Amount of contribution (\$)<br><b>\$800.00</b>   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)                      |
|  |   |  |
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| 2 FILER NAME<br>Ryan Gable   |  | 3 Filer ID (Ethics Commission Filers)    |
| 4 Date<br>05/20/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Dan Crenshaw for Congress<br>6 Contributor address; City; State; Zip Code<br>5900 Memorial Dr, Ste 215 Houston, TX 77007 | 7 Amount of contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)            |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Benjamin Thomas<br>Contributor address; City; State; Zip Code<br>14907 Beechmore Dr Houston, TX 77095                      | Amount of contribution (\$) \$40.00      |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Joseph Barnett<br>Contributor address; City; State; Zip Code<br>35 Agate Stream Pl Spring, TX 77381                        | Amount of contribution (\$) \$10.00      |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Jason Cash<br>Contributor address; City; State; Zip Code<br>2009 Lost Pine Conroe, TX 77304                                | Amount of contribution (\$) \$20.00      |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
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| 4 Date<br>05/24/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>David Eason   | 7 Amount of contribution (\$) \$20.00 |
| 6 Contributor address; City; State; Zip Code<br>402 Trace Way Dr Montgomery, TX 77316  |  |                                       |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)         |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Joseph Hull     | Amount of contribution (\$) \$600.00  |
| Contributor address; City; State; Zip Code<br>722 Audra Ln Spring, TX 77386  |  |                                       |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)           |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Martin Uselton  | Amount of contribution (\$) \$50.00   |
| Contributor address; City; State; Zip Code<br>13231 Sonali Springs Dr Conroe, TX 77302   |  |                                       |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)           |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Garmine Falcone | Amount of contribution (\$) \$20.00   |
| Contributor address; City; State; Zip Code<br>38 Leeward Cove Dr Spring, TX 77381  |  |                                       |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)           |
|  |  |                                       |
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| 4 Date<br>05/24/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Mathew Beckerman<br>6 Contributor address; City; State; Zip Code<br>2424 Honea Egypt Magnolia, TX 77354 | 7 Amount of contribution (\$)<br>\$100.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)             |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Scott Steiner<br>Contributor address; City; State; Zip Code<br>13410 Pinnacle Place Houston, TX 77069     | Amount of contribution (\$)<br>\$100.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)               |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Matthew Bickley<br>Contributor address; City; State; Zip Code<br>13124 Sirius Ct Willis, TX 77318         | Amount of contribution (\$)<br>\$50.00    |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)               |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Brandt Miguez<br>Contributor address; City; State; Zip Code<br>22652 Malvicino Roman Forest, TX 77357     | Amount of contribution (\$)<br>\$10.00    |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)               |
|  |   |   |
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| The Instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:               |
| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)    |
| 4 Date<br>05/24/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Jacob Aguirre<br>6 Contributor address; City; State; Zip Code<br>31807 Kellan Grove Ct Fulshear, TX 77441 | 7 Amount of contribution (\$)<br>\$20.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)            |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Kenneth Melton<br>Contributor address; City; State; Zip Code<br>19311 Belmont Stakes Way Tomball, TX 77377  | Amount of contribution (\$)<br>\$20.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Nick Muhlbauer<br>Contributor address; City; State; Zip Code<br>27041 Star Gazer Way Spring, TX 77386       | Amount of contribution (\$)<br>\$120.00  |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Jesse Rodriguez<br>Contributor address; City; State; Zip Code<br>7228 Long Leaf Dr Katy, TX 77493           | Amount of contribution (\$)<br>\$20.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
|  |   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. |   |  |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

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|--|---|--|
| The Instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:               |
| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)    |
| 4 Date<br>05/24/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Troy Perkins<br>6 Contributor address; City; State; Zip Code<br>14168 Lake Point Willis, TX 77318   | 7 Amount of contribution (\$)<br>\$50.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)            |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Ray Aguila<br>Contributor address; City; State; Zip Code<br>100 Nugent Conroe, TX 77301               | Amount of contribution (\$)<br>\$40.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Chad Prejean<br>Contributor address; City; State; Zip Code<br>2307 Cory Crossing Ln Spring, TX 77386  | Amount of contribution (\$)<br>\$25.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Ricardo Villarreal<br>Contributor address; City; State; Zip Code<br>28267 Nancy Lane Conroe, TX 77385 | Amount of contribution (\$)<br>\$20.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
|  |   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. |   |  |



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

|   |   |   |
|---|---|---|
| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A1:                      |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)           |
| 4 Date<br>05/24/24  | 5 Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>James Toups</b>    | 7 Amount of contribution (\$)<br><b>\$20.00</b> |
| 6 Contributor address; City; State; Zip Code<br><b>2176 Gadwall Dr Conroe, TX 77389</b>   |   |   |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                   |
| Date<br>05/24/24  | Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Joseph Palafox</b>   | Amount of contribution (\$)<br><b>\$10.00</b>   |
| Contributor address; City; State; Zip Code<br><b>1747 Sunset Express Dr Alvin, TX 77511</b>   |   |   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                     |
| Date<br>05/24/24  | Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Stephen Sills</b>    | Amount of contribution (\$)<br><b>\$30.00</b>   |
| Contributor address; City; State; Zip Code<br><b>6315 N Lazy Meado Way Spring, TX 77386</b>   |   |   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                     |
| Date<br>05/24/24  | Full name of contributor<br><input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Taylor Pritchett</b> | Amount of contribution (\$)<br><b>\$20.00</b>   |
| Contributor address; City; State; Zip Code<br><b>11911 N Blackjack Oak Cir Spring, TX 77380</b>   |   |   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                     |
|   |   |   |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

|  |   |  |
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| The instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:               |
| 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers)    |
| 4 Date<br>05/24/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Caleb Woods<br>6 Contributor address; City; State; Zip Code<br>30027 Oakwood Ln Magnolia, TX 77354            | 7 Amount of contribution (\$)<br>\$25.00 |
| 8 Principal occupation / Job title (See Instructions)  |   | 9 Employer (See Instructions)            |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Morgan Bourque<br>Contributor address; City; State; Zip Code<br>59 Huntsman Horn Circle The Woodlands, TX 77380 | Amount of contribution (\$)<br>\$600.00  |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Morris White<br>Contributor address; City; State; Zip Code<br>3160 Artesian Springs Ct Katy, TX 77494           | Amount of contribution (\$)<br>\$50.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Craig Heiser<br>Contributor address; City; State; Zip Code<br>15 Bessdale Ct The Woodlands, TX 77382            | Amount of contribution (\$)<br>\$50.00   |
| Principal occupation / Job title (See Instructions)  |   | Employer (See Instructions)              |
|  |   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |  |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/24/24

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Kulasa

7 Amount of contribution (\$)

\$200.00

6 Contributor address;

City;

State;

Zip Code

23211 Morning Dove Bend Ln Spring, TX 77389

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/24/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael Fulton

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

25710 Loop 494 #1137 Kingwood, TX 77339

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alex Robbins

Amount of contribution (\$)

\$10.00

Contributor address;

City;

State;

Zip Code

1303 Forest Circle Montgomery, TX 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

James Taylor

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

11133 Suite D I-45 South Conroe, TX 77320

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

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| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A1:            |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers) |
| 4 Date<br>05/24/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jeffery Hill<br>6 Contributor address; City; State; Zip Code<br>18607 Camellia Estates Cypress, TX 77429         | 7 Amount of contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)         |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Zach Richmond<br>Contributor address; City; State; Zip Code<br>10077 Grogans Mill, Ste 150 The Woodlands, TX 77381 | Amount of contribution (\$) \$100.00  |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)           |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kenneth Hayden<br>Contributor address; City; State; Zip Code<br>PO Box 529 Splendora, TX 77372                     | Amount of contribution (\$) \$400.00  |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)           |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Amy Herr<br>Contributor address; City; State; Zip Code<br>13112 Live Oak Dr Plantersville, TX 77363                | Amount of contribution (\$) \$170.00  |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)           |
|   |   |                                       |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |                                       |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

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| The Instruction Guide explains how to complete this form.  |  | 1 Total pages Schedule A1:             |
| 2 FILER NAME<br>Ryan Gable   |  | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date<br>05/24/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Joseph Palafox<br>6 Contributor address; City; State; Zip Code<br>1747 Sunset Express Dr Alvin, TX 77511 | 7 Amount of contribution (\$) \$900.00 |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)          |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Daniel Wagner<br>Contributor address; City; State; Zip Code<br>9319 Edgeloch Dr Spring, TX 77379           | Amount of contribution (\$) \$575.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)            |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Rick Brass<br>Contributor address; City; State; Zip Code<br>7035 Pleasure Lake Dr Willis, TX 77318         | Amount of contribution (\$) \$375.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)            |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>James Sumner<br>Contributor address; City; State; Zip Code<br>40006 Freemont Rd Magnolia, TX 77354         | Amount of contribution (\$) \$325.00   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)            |
|  |  |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |  |  |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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|---|---|--|
| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A1:                         |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)              |
| 4 Date<br>05/24/24  | <div style="display: flex; justify-content: space-between;"><div>5 Full name of contributor<br/><b>Jack Pedigo</b></div><div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div>6 Contributor address;<br/><b>16445 Air Center Blvd</b></div><div>City;<br/><b>Houston, TX</b></div><div>State;<br/><b>TX</b></div><div>Zip Code<br/><b>77032</b></div></div> | 7 Amount of contribution (\$)<br><b>\$1,000.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                      |
| Date<br>05/24/24  | <div style="display: flex; justify-content: space-between;"><div>Full name of contributor<br/><b>Stephen Sills</b></div><div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div>Contributor address;<br/><b>6315 N Lazy Meadow Way</b></div><div>City;<br/><b>Spring, TX</b></div><div>State;<br/><b>TX</b></div><div>Zip Code<br/><b>77386</b></div></div>   | Amount of contribution (\$)<br><b>\$1,950.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                        |
| Date<br>05/24/24  | <div style="display: flex; justify-content: space-between;"><div>Full name of contributor<br/><b>Frank Torres</b></div><div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div>Contributor address;<br/><b>27902 Robinson Park Dr</b></div><div>City;<br/><b>Spring, TX</b></div><div>State;<br/><b>TX</b></div><div>Zip Code<br/><b>77386</b></div></div>    | Amount of contribution (\$)<br><b>\$3,250.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                        |
| Date<br>05/24/24  | <div style="display: flex; justify-content: space-between;"><div>Full name of contributor<br/><b>Christopher Mann</b></div><div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div>Contributor address;<br/><b>9 Waters Edge St</b></div><div>City;<br/><b>Montgomery, TX</b></div><div>State;<br/><b>TX</b></div><div>Zip Code<br/><b>77356</b></div></div>  | Amount of contribution (\$)<br><b>\$1,400.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                        |
|   |   |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/24/24

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Aven McBride

7 Amount of contribution (\$)

\$3,000.00

6 Contributor address; City; State; Zip Code

31102 Spring Lake Blvd Tomball, TX 77375

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/24/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mark Norris

Amount of contribution (\$)

\$900.00

Contributor address; City; State; Zip Code

2310 Timber Breeze Ct Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Steven Terrell

Amount of contribution (\$)

\$300.00

Contributor address; City; State; Zip Code

18715 Croftsmill Dr New caney, TX 77357

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/24

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Habib Bennani

Amount of contribution (\$)

\$650.00

Contributor address; City; State; Zip Code

3911 Rolling Thicket Dr Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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|---|---|--|
| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A1:                       |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)            |
| 4 Date<br>05/24/24  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Steve Terrell</b><br>6 Contributor address; City; State; Zip Code<br><b>18715 Croftsmill Dr New Caney, TX 77357</b> | 7 Amount of contribution (\$)<br><b>\$100.00</b> |
| 8 Principal occupation / Job title (See Instructions)   |   | 9 Employer (See Instructions)                    |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Lynn Anderson</b><br>Contributor address; City; State; Zip Code<br><b>515 Kades Clay Ct Spring, TX 77379</b>          | Amount of contribution (\$)<br><b>\$1,350.00</b> |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br>05/29/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Justin Bratton</b><br>Contributor address; City; State; Zip Code<br><b>1311 Legends Creek Dr Spring, TX 77386</b>     | Amount of contribution (\$)<br><b>\$1,400.00</b> |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
| Date<br>05/29/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Joseph Palafox</b><br>Contributor address; City; State; Zip Code<br><b>1747 Sunset Express Dr Alvin, TX 77511</b>     | Amount of contribution (\$)<br><b>\$950.00</b>   |
| Principal occupation / Job title (See Instructions)   |   | Employer (See Instructions)                      |
|   |   |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |  |



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

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| The Instruction Guide explains how to complete this form.  |  | 1 Total pages Schedule A1:               |
| 2 FILER NAME<br>Ryan Gable   |  | 3 Filer ID (Ethics Commission Filers)    |
| 4 Date<br>05/29/24   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Garrett Velarde<br>6 Contributor address; City; State; Zip Code<br>14002 Berry Knoll Ln Houston, TX 77079                | 7 Amount of contribution (\$) \$1,350.00 |
| 8 Principal occupation / Job title (See Instructions)  |  | 9 Employer (See Instructions)            |
| Date<br>05/24/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Dustin Machado<br>Contributor address; City; State; Zip Code<br>21827 Stillwater Blvd Montgomery, TX 77316                 | Amount of contribution (\$) \$500.00     |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
| Date<br>06/05/24   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Braiden Bailess Memorial Foundation<br>Contributor address; City; State; Zip Code<br>15 N Spring Brook Ct Spring, TX 77382 | Amount of contribution (\$) \$6,014.14   |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
| Date   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Contributor address; City; State; Zip Code   | Amount of contribution (\$)              |
| Principal occupation / Job title (See Instructions)  |  | Employer (See Instructions)              |
|  |  |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED<br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |  |  |

**NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS****SCHEDULE A2**If the requested information is not applicable, **DO NOT** include this page in the report.

|   |   |   |   |
|---|---|---|---|
| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A2:<br><div style="text-align: center;">14</div> |   |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)                                   |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS   |   | \$ 32,094.00  |   |
| 5 Date<br>05/24/24  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Brandon Cato<br>7 Contributor address; City; State; Zip Code<br>2907 Rayford Rd, Ste 101 Spring, TX 77386 | 8 Amount of Contribution \$<br>\$300.00                                 | 9 In-kind contribution description<br>25 Cases of Soft Drinks - Annual Golf Tournament<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.             |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)   |   | 11 Employer (FOR NON-JUDICIAL) (See Instructions)                       |   |
| 12 Contributor's principal occupation (FOR JUDICIAL)  |   | 13 Contributor's job title (FOR JUDICIAL) (See Instructions)            |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)   |   | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)             |   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)   |   |   |   |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br>Craig Davis<br>Contributor address; City; State; Zip Code<br>25444 Aldine Westfield Rd Spring, TX 77373     | Amount of Contribution \$<br>\$750.00                                   | In-kind contribution description<br>Bloody Mary & Margarita Bar & Fixings - Annual Golf Tournament<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  |   | Employer (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)  |   |   |   |
|   |   |   |   |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. |   |   |   |

## SCHEDULE A2

**The Instruction Guide explains how to complete this form.**

Ryan Gable

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

**\$**

☐ Check if travel outside of Texas. Complete Schedule T.☐ Check if travel outside of Texas. Complete Schedule T.

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

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|---|--|---|---|
| The Instruction Guide explains how to complete this form.   |  | 1 Total pages Schedule A2:  |   |
| 2 FILER NAME<br>Ryan Gable  |  | 3 Filer ID (Ethics Commission Filers)   |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS   |  | \$  |   |
| 5 Date<br>05/24/24  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br><b>Terry Ashabranner</b><br>7 Contributor address; City; State; Zip Code<br>1710 FM 1960 Bypass Rd East Humble, TX 77338 | 8 Amount of Contribution \$<br><b>\$650.00</b><br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | 9 In-kind contribution description<br>Radical Firearms rifle - Auction Item -Annual Golf Tournament |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)   |  | 11 Employer (FOR NON-JUDICIAL) (See Instructions)   |   |
| 12 Contributor's principal occupation (FOR JUDICIAL)  |  | 13 Contributor's job title (FOR JUDICIAL) (See Instructions)  |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)   |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)   |   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)   |  |   |   |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br><b>Matthew Cline</b><br>Contributor address; City; State; Zip Code<br>15825 Hwy 249, Ste 4 Houston, TX 77086               | Amount of Contribution \$<br><b>\$1,200.00</b><br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description<br>Earl Campbell Jersey -Auction Item Annual Golf Tournament       |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  |  | Employer (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)  |  |   |   |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |  |   |   |

**SCHEDULE A2**

**The Instruction Guide explains how to complete this form.**

2 FILER NAME

**3 Filer ID (Ethics Commission Filers)**

**\$**

05/24/24

☐ out-of-state PAC (ID# \_\_\_\_\_)

**Joe Castro**

7 Contributor address; City; State; Zip Code

PO Box 1313 Spring, TX 77318

**\$2,500.00**

Weatherby Rifle & Colt  
handgun - Auction Item  
-Annual Golf Tournament

☐ Check if travel outside of Texas. Complete Schedule T.

**11 Employer (FOR NON-JUDICIAL)(See Instructions)**

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

**16** If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

05/24/24

Full name of contributor ☐ out-of-state PAC (ID#:

Chris Davis

Contributor address;                      City;                      State;                      Zip Code

1900 Hughes Landing Blvd The Woodlands, TX 77380

Contribution \$  
\$1,700.00

**\$1,500.00**

Trulucks Dinner for 8  
-Auction Item Annual Golf  
Tournament

☐ Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**SCHEDULE A2**

**The Instruction Guide explains how to complete this form.**

\$

Revised 1/1/2024

**SCHEDULE A2**

**The Instruction Guide explains how to complete this form.**

**2 FILER NAME**

**3 Filer ID (Ethics Commission Filers)**

657

**5 Date**

6 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

## Rick Alspaugh

8 Amount of Contribution \$

**\$3,800.00**

9 In-kind contribution  
description

Treager Timberline XL -  
Auction Item -Annual Golf  
Tournament

☐ Check if travel outside of Texas. Complete Schedule T.

7 Contributor address; City; State; Zip Code

10860 Kuykendahl Rd The Woodlands, TX 77381

**10** Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)

**16** If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date \_\_\_\_\_

05/24/24

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

# Austin Simmons

Amount of Contribution \$

\$8,000.00

In-kind contribution description

Tris Chef Inspired dinner  
for 8 -Auction Item  
Annual Golf Tournament

☐ Check if travel outside of Texas. Complete Schedule T.

Contributor address; City; State; Zip Code

24 Waterway Ave, Ste 125 The Woodlands, TX 77380

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (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)

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

05/24/24

6 Full name of contributor ☐ out-of-state PAC (ID#:

Gabriella Falcone

8 Amount of Contribution \$

\$200.00

9 In-kind contribution description

Vodka Basket - Auction Item -Annual Golf Tournament

7 Contributor address; City; State; Zip Code

38 Leeward Cove Dr The Woodlands, TX 77381

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

05/24/24

Full name of contributor ☐ out-of-state PAC (ID#:

Alicia Falcone

Amount of Contribution \$

\$250.00

In-kind contribution description

Wine Basket -Auction Item Annual Golf Tournament

Contributor address; City; State; Zip Code

38 Leeward Cove Dr The Woodlands, TX 77381

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



**SCHEDULE A2**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A2:

**3** Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

**\$**

7 Contributor address; City; State; Zip Code  
26 Silver Canyon Place The Woodlands, TX 77381

☐ Check if travel outside of Texas. Complete Schedule T.

11 Employer (FOR NON-JUDICIAL) (See Instructions)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

In-kind contribution  
description  
Japanese Knife set &  
Cutting Board -Auction Item  
Annual Golf Tournament

Contributor address; City; State; Zip Code  
38 Leeward Cove Dr The Woodlands, TX 77381

☐ Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

**SCHEDULE A2**

**The Instruction Guide explains how to complete this form.**

2 FILER NAME

**3 Filer ID (Ethics Commission Filers)**

5

☐ Check if travel outside of Texas. Complete Schedule T.

11 Employer (FOR NON-JUDICIAL) (See Instructions)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

☐ Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

**NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS****SCHEDULE A2**If the requested information is not applicable, **DO NOT** include this page in the report.

|   |   |  |  |
|---|---|--|--|
| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A2:                                   |  |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)                        |  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS   |   | \$   |  |
| 5 Date<br>05/24/24  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br><b>Ron Tooker</b><br>7 Contributor address; City; State; Zip Code<br>18123 Kuykendahl Rd Spring, TX 77379 | 8 Amount of Contribution \$<br>\$405.00                      | 9 In-kind contribution description<br>Rossi . 22 Rifle - Auction Item -Annual Golf Tournament<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.       |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)   |   | 11 Employer (FOR NON-JUDICIAL) (See Instructions)            |  |
| 12 Contributor's principal occupation (FOR JUDICIAL)  |   | 13 Contributor's job title (FOR JUDICIAL) (See Instructions) |  |
| 14 Contributor's employer/law firm (FOR JUDICIAL)   |   | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)  |  |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)   |   |  |  |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br><b>Amy Milstead</b><br>Contributor address; City; State; Zip Code<br>1415 Spring Hills Dr Spring, TX 77386  | Amount of Contribution \$<br>\$475.00                        | In-kind contribution description<br>(4) Houston Astros tickets -Auction Item Annual Golf Tournament<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  |   | Employer (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)  |   |  |  |
|   |   |  |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. |   |  |  |

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

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

|   |   |   |  |
|---|---|---|--|
| The Instruction Guide explains how to complete this form.   |   | 1 Total pages Schedule A2:  |  |
| 2 FILER NAME<br>Ryan Gable  |   | 3 Filer ID (Ethics Commission Filers)   |  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS   |   | \$  |  |
| 5 Date<br>05/24/24  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br><b>David Rhodes</b> | 8 Amount of Contribution \$<br><b>\$500.00</b>                                  | 9 In-kind contribution description<br>Shooting equipment & Range<br>Passes & LTC voucher - Auction<br>Item -Annual Golf Tournament |
| 7 Contributor address; City; State; Zip Code<br><b>4401 Spring Cypress Rd Spring, TX 77388</b>  |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)   |   | 11 Employer (FOR NON-JUDICIAL) (See Instructions)                               |  |
| 12 Contributor's principal occupation (FOR JUDICIAL)  |   | 13 Contributor's job title (FOR JUDICIAL) (See Instructions)                    |  |
| 14 Contributor's employer/law firm (FOR JUDICIAL)   |   | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |  |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)   |   |   |  |
| Date<br>05/24/24  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br><b>Austin Simmons</b> | Amount of Contribution \$<br><b>\$500.00</b>                                    | In-kind contribution description<br>Gift Card -Auction Item<br>Annual Golf Tournament  |
| Contributor address; City; State; Zip Code<br><b>24 Waterway Ave, Ste 125 The Woodlands, TX 77380</b>   |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  |   | Employer (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)  |   |   |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |   |   |  |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

05/24/24

6 Full name of contributor ☐ out-of-state PAC (ID#)

Terry Ashabranner

8 Amount of Contribution \$

\$500.00

9 In-kind contribution description

Military Armament Corp 12 Gauge Shot Gun - Auction Item - Annual Golf Tournament

7 Contributor address; City; State; Zip Code

1710 FM 1960 bypass East Humble, TX 77338

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

05/24/24

Full name of contributor ☐ out-of-state PAC (ID#)

Austin Simmons

Amount of Contribution \$

\$500.00

In-kind contribution description

Gift Card - Auction Item Annual Golf Tournament

Contributor address; City; State; Zip Code

24 Waterway Ave, Ste 125 The Woodlands, TX 77380

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## SCHEDULE A2

**The Instruction Guide explains how to complete this form.**

## Ryan Gable

§

05/24/24

## Clint Sweeten

\$500.00

Electronic Double Rifle  
Lock - Auction Item  
-Annual Golf Tournament

8331 FM 1960 bypass East Humble, TX 77338

05/24/24

## Rick Brass

Contribution \$  
\$600.00

Custom Ruger 10/22  
Rifle -Auction Item  
Annual Golf Tournament

7035 Pleasure Lake Dr Willis, TX 77318

Revised 1/1/2024

**SCHEDULE A2**

**The Instruction Guide explains how to complete this form.**

2 FILER NAME

**3 Filer ID (Ethics Commission Filers)**

**\$**

☐ Check if travel outside of Texas. Complete Schedule T.☐ Check if travel outside of Texas. Complete Schedule T.

Revised 1/1/2024

## SCHEDULE A2

**The Instruction Guide explains how to complete this form.**

Ryan Gable

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

**\$**

05/24/24

Jeff Yuna

**\$739.00**

Diamond Back Custom  
AR-15 Rifle -Auction Item  
- Annual Golf Tournament

14011 FM 2920 Tomball, TX 77377

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

05/24/24

Thomas Markle

\$475.00

Caviar Silver Bracelet -  
Auction Item - Annual  
Golf Tournament

9595 Six Pines Dr, Ste 950 The Woodlands, TX 77380

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |   |  |             |
|---|--|--|---|--|-------------|
| <b>1</b> Total pages Schedule F1:<br>37                             |  | <b>2</b> FILER NAME<br>Ryan Gable  |   | <b>3</b> Filer ID (Ethics Commission Filers) |             |
| <b>4</b> Date<br>01/12/24   |  | <b>5</b> Payee name<br>Perry's Steakhouse & Grille   |   |  |             |
| <b>6</b> Amount (\$)<br>\$198.46                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>6700 Woodlands Pkwy The Woodlands, TX 77382 |   |  |             |
| <b>8</b><br>PURPOSE<br>OF<br>EXPENDITURE                            | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b)</b> Description<br>Political Lunch Meeting                         |  |             |
|   | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.       |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |             |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |   | Office sought                                | Office held |
| Date<br>01/12/24  |  | Payee name<br>The Woodlands Republican Women's Club  |   |  |             |
| Amount (\$)<br>\$355.00   |  | Payee address; City; State; Zip Code<br>PO Box 7294 The Woodlands, TX 77387                  |   |  |             |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by  |  | Description<br>Donation   |  |             |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                  |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |   | Office sought                                | Office held |
| Date<br>01/16/24  |  | Payee name<br>Top Florist  |   |  |             |
| Amount (\$)<br>\$200.00   |  | Payee address; City; State; Zip Code<br>25119 Gorgans Mill Rd The Woodlands, TX 77380        |   |  |             |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | Category (See Categories listed at the top of this schedule)<br>Gifts/Awards/Memorials Expense   |  | Description<br>Memorial Flowers   |  |             |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                  |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |   | Office sought                                | Office held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |  |  |             |
|--|--|---|--|--|-------------|
| <b>1</b> Total pages Schedule F1:                                      |  | <b>2</b> FILER NAME<br>Ryan Gable   |  | <b>3</b> Filer ID (Ethics Commission Filers) |             |
| <b>4</b> Date<br>01/17/24  |  | <b>5</b> Payee name<br>Alphagraphics  |  |  |             |
| <b>6</b> Amount (\$)<br>\$697.05                                       |  | <b>7</b> Payee address: City; State; Zip Code<br>17126 Stuebner Airline Rd Spring, TX 77379 |  |  |             |
| <b>8</b><br><br>PURPOSE<br>OF<br>EXPENDITURE                           | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense       |   | <b>(b)</b> Description<br>"Save the Date" - Annual Golf<br>Tournament Fundraiser Mailers |  |             |
|  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.     |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                |  |             |
| <b>9</b> Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OH |  | Candidate / Officeholder name   |  | Office sought                                | Office held |
| Date<br>01/20/24   |  | Payee name<br>Whole Foods   |  |  |             |
| Amount (\$)<br>\$198.19  |  | Payee address: City; State; Zip Code<br>1925 Hughes Landing Blvd The Woodlands, TX 77380    |  |  |             |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Event Expense                  |   | Description<br>Supporter Gathering   |  |             |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                |  |             |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OH          |  | Candidate / Officeholder name   |  | Office sought                                | Office held |
| Date<br>01/20/24   |  | Payee name<br>Guitar Center   |  |  |             |
| Amount (\$)<br>\$431.91  |  | Payee address: City; State; Zip Code<br>27500 I-45 N Oak Ridge North, TX 77385              |  |  |             |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |   | Description<br>Wireless Mic for PA Equipment   |  |             |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                |  |             |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OH          |  | Candidate / Officeholder name   |  | Office sought                                | Office held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)          |
| 4 Date<br>01/22/24                                    | 5 Payee name<br>Liberty Belles Republican Women   |  |
| 6 Amount (\$)<br>\$250.00                             | 7 Payee address; City; State; Zip Code<br>PO Box 1081 Conroe, TX 77305  |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | (b) Description<br>2024 Event Sponsor          |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held                      |
| Date<br>01/22/24                                      | Payee name<br>The Woodlands Chamber of Commerce   |  |
| Amount (\$)<br>\$240.00                               | Payee address; City; State; Zip Code<br>9320 Lakeside Blvd, Suite 200 The Woodlands, TX 77381   |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Taste of the Town Event Tickets |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held                      |
| Date<br>01/23/24                                      | Payee name<br>Sur La Table  |  |
| Amount (\$)<br>\$1,124.72                             | Payee address; City; State; Zip Code<br>9595 Six Pines Dr The Woodlands, TX 77380   |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | Description<br>Office Kitchen Equipment        |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held                      |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |   |                                       |  |
|---|---|--|---|---------------------------------------|--|
| 1 Total pages Schedule F1:                            |   | 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers) |  |
| 4 Date<br>01/25/24                                    |   | 5 Payee name<br>The Woodlands Marriott   |   |                                       |  |
| 6 Amount (\$)<br>\$437.28                             |   | 7 Payee address; City; State; Zip Code<br>1601 Lake Robbins Dr The Woodlands, TX 77380       |   |                                       |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE                     | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by |  | (b) Description<br>The Woodlands Chamber Taste of the Town Event          |                                       |  |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                 |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                       |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |   | Candidate / Officeholder name  |   | Office sought Office held             |  |
| Date<br>01/25/24                                      |   | Payee name<br>The Woodlands Marriott   |   |                                       |  |
| Amount (\$)<br>\$240.00                               |   | Payee address; City; State; Zip Code<br>1601 Lake Robbins Dr The Woodlands, TX 77380         |   |                                       |  |
| PURPOSE<br>OF<br>EXPENDITURE                          | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by     |  | Description<br>The Woodlands Chamber Taste of the Town Event              |                                       |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                     |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                       |  |
| Complete ONLY if direct expenditure to benefit C/OH   |   | Candidate / Officeholder name  |   | Office sought Office held             |  |
| Date<br>01/31/24                                      |   | Payee name<br>Diamonds in the Rough  |   |                                       |  |
| Amount (\$)<br>\$2,090.00                             |   | Payee address; City; State; Zip Code<br>9391 Grogans Mill Rd, Ste B4 The Woodlands, TX 77380 |   |                                       |  |
| PURPOSE<br>OF<br>EXPENDITURE                          | Category (See Categories listed at the top of this schedule)<br>Event Expense                       |  | Description<br>Auction Items for Fundraising Events                       |                                       |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                     |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                       |  |
| Complete ONLY if direct expenditure to benefit C/OH   |   | Candidate / Officeholder name  |   | Office sought Office held             |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                |
| 4 Date<br>01/31/24                                    | 5 Payee name<br>Total Wine & More   |  |
| 6 Amount (\$)<br>\$218.05                             | 7 Payee address; City; State; Zip Code<br>1900 Lake Woodlands Dr The Woodlands, TX 77380  |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Gifts/Awards/Memorials Expense  | (b) Description<br>Gifts for Supporters              |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held                            |
| Date<br>02/05/24                                      | Payee name<br>Hobby Lobby   |  |
| Amount (\$)<br>\$249.96                               | Payee address; City; State; Zip Code<br>501 Sawdust Rd Spring, TX 77380   |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | Description<br>Picture Framing for Office            |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held                            |
| Date<br>02/5/24                                       | Payee name<br>The Cynthia Woods Mitchell Pavilion   |  |
| Amount (\$)<br>\$2,500.00                             | Payee address; City; State; Zip Code<br>2005 Lake Robbins Dr The Woodlands, TX 77380  |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Sponsor 2024 Pavilion Partners Dinner |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held                            |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |   |  |  |
|--|--|---|---|--|--|
| <b>1</b> Total pages Schedule F1:  |  | <b>2</b> FILER NAME<br>Ryan Gable   |   | <b>3</b> Filer ID (Ethics Commission Filers) |  |
| <b>4</b> Date<br>02/05/24  |  | <b>5</b> Payee name<br>Preserve the Woodlands Candidate Committee                                     |   |  |  |
| <b>6</b> Amount (\$)<br>\$2,500.00   |  | <b>7</b> Payee address; City; State; Zip Code<br>6700 Woodlands Pkwy, Ste 230 The Woodlands, TX 77382 |   |  |  |
| <b>8</b><br><br>PURPOSE<br>OF<br>EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by |   | <b>(b)</b> Description<br>Donation  |  |  |
|  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                 |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |  |   |   |  |  |
| <b>Date</b><br>02/05/24  |  | <b>Payee name</b><br>AAA Riley Fuzzel Storage   |   |  |  |
| <b>Amount (\$)</b><br>\$200.00   |  | <b>Payee address; City; State; Zip Code</b><br>3201 Riley Fuzzel Rd Spring, TX 77386                  |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense      |   | <b>Description</b><br>Storage Rental - Campaign Food Trailer              |  |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                            |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| <b>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</b><br>Candidate / Officeholder name Office sought Office held   |  |   |   |  |  |
| <b>Date</b><br>02/05/24  |  | <b>Payee name</b><br>Space Center Storage   |   |  |  |
| <b>Amount (\$)</b><br>\$205.00   |  | <b>Payee address; City; State; Zip Code</b><br>26400 Kuykendahl Rd The Woodlands, TX 77375            |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense      |   | <b>Description</b><br>Campaign Storage Rental                             |  |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                            |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| <b>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</b><br>Candidate / Officeholder name Office sought Office held   |  |   |   |  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |   |  |  |
|---|--|--|---|--|--|
| <b>1</b> Total pages Schedule F1:                                   |  | <b>2</b> FILER NAME<br>Ryan Gable  |   | <b>3</b> Filer ID (Ethics Commission Filers) |  |
| <b>4</b> Date<br>02/05/24   |  | <b>5</b> Payee name<br>Grand Oaks High School Booster Club                             |   |  |  |
| <b>6</b> Amount (\$)<br>\$500.00                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>4800 Riley Fuzzel Rd Spring, TX 77386 |   |  |  |
| <b>8</b><br><br>PURPOSE<br>OF<br>EXPENDITURE                        | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | <b>(b)</b> Description<br>Donation                    |  |  |
|   | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |  |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name Office sought Office held                                |   |  |  |
| Date<br>02/06/24  |  | Payee name<br>Montgomery County Food Bank  |   |  |  |
| Amount (\$)<br>\$400.00   |  | Payee address; City; State; Zip Code<br>1 Food for Life Way Conroe, TX 77385           |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by  |  | Description<br>Sponsor 2024 On the Board Walk Gala    |  |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |   |  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name Office sought Office held                                |   |  |  |
| Date<br>02/10/24  |  | Payee name<br>The Woodlands Marriott   |   |  |  |
| Amount (\$)<br>\$272.77   |  | Payee address; City; State; Zip Code<br>1601 Lake Robbins Dr The Woodlands, TX 77380   |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by  |  | Description<br>Donation to 2024 Woodlands Rotary Gala |  |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |   |  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name Office sought Office held                                |   |  |  |
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |   |  |                                       |  |
|--|---|---|--|---------------------------------------|--|
| 1 Total pages Schedule F1:                                   |   | 2 FILER NAME<br><b>Ryan Gable</b>   |  | 3 Filer ID (Ethics Commission Filers) |  |
| 4 Date<br><b>02/14/24</b>                                    |   | 5 Payee name<br><b>Conroe High School Softball Booster Club</b>                               |  |                                       |  |
| 6 Amount (\$)<br><b>\$500.00</b>                             |   | 7 Payee address; City; State; Zip Code<br><b>3200 W Davis St Consroe, TX 77304</b>            |  |                                       |  |
| 8<br><b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                   | (a) Category (See Categories listed at the top of this schedule)<br><b>Contributions/Donations Made by</b>  |   | (b) Description<br><b>Donation</b>                                   |                                       |  |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |  |                                       |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |  |                                       |  |
| Date<br><b>02/17/24</b>                                      |   | Payee name<br><b>Pappasitos</b>   |  |                                       |  |
| Amount (\$)<br><b>\$291.42</b>                               |   | Payee address; City; State; Zip Code<br><b>18101 I-45 South Conroe, TX 77385</b>              |  |                                       |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        | Category (See Categories listed at the top of this schedule)<br><b>Food/Beverage Expense</b>  |   | Description<br><b>Political Dinner Meeting</b>                       |                                       |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |  |                                       |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |   |   |  |                                       |  |
| Date<br><b>02/18/24</b>                                      |   | Payee name<br><b>Tyler's</b>  |  |                                       |  |
| Amount (\$)<br><b>\$344.21</b>                               |   | Payee address; City; State; Zip Code<br><b>1555 Lake Woodlands Dr The Woodlands, TX 77380</b> |  |                                       |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        | Category (See Categories listed at the top of this schedule)<br><b>Advertising Expense</b>  |   | Description<br><b>Clothing for Campaign &amp; Departmental Logos</b> |                                       |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |  |                                       |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |   |   |  |                                       |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |   |  |   |
|--|--|---|---|--|---|
| <b>1</b> Total pages Schedule F1:                            |  | <b>2</b> FILER NAME<br>Ryan Gable   |   | <b>3</b> Filer ID (Ethics Commission Filers) |   |
| <b>4</b> Date<br>02/20/24                                    |  | <b>5</b> Payee name<br>Spring Masonic Lodge # 1174                                  |   |  |   |
| <b>6</b> Amount (\$)<br>\$550.00                             |  | <b>7</b> Payee address; City; State; Zip Code<br>26514 Preston Ave Spring, TX 77373 |   |  |   |
| <b>8</b><br><b>PURPOSE<br/>OF<br/>EXPENDITURE</b>            | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |   | <b>(b)</b> Description<br>Sponsor 2024 Golf Tournament            |  |   |
|  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |   |  |   |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name   |   | Office sought                                | Office held                                     |
| Date<br>02/20/24   |  | Payee name<br>Rick Brass  |   |  |   |
| Amount (\$)<br>\$250.73                                      |  | Payee address; City; State; Zip Code<br>18101 I-45 South Conroe, TX 77385           |   |  |   |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        | Category (See Categories listed at the top of this schedule)<br>Loan Repayment/Reimbursement   |   | Description<br>Reimburse for Food - Employee Birthday Celebration |  |   |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |   |   |  |   |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name   |   | Office sought                                | Office held                                     |
| Date<br>02/20/24   |  | Payee name<br>Robert Walker Campaign  |   |  |   |
| Amount (\$)<br>\$250.00                                      |  | Payee address; City; State; Zip Code<br>PO Box 558 Pinehurst, TX 77362              |   |  |   |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by  |   | Description<br>Campaign Contribution                              |  |   |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |   |   |  |   |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name<br>Robert Walker                                      |   | Office sought                                | Office held<br>Montgomery Co Commissioner Pet 1 |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED          |  |   |   |  |   |

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1:                            |  | 2 FILER NAME<br>Ryan Gable  |  | 3 Filer ID (Ethics Commission Filers)                 |  |
| 4 Date<br>03/05/24                                    |  | 5 Payee name<br>Space Center Storage  |  |   |  |
| 6 Amount (\$)<br>\$220.00                             |  | 7 Payee address; City; State; Zip Code<br>26400 Kuykendahl Rd The Woodlands, TX 77375   |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  |  | (b) Description<br>Campaign Storage Rental            |  |
|   |  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name Office sought Office held<br>James Noack  |  |   |  |
| Date<br>03/05/24                                      |  | Payee name<br>Adam Acosta   |  |   |  |
| Amount (\$)<br>\$275.00                               |  | Payee address; City; State; Zip Code<br>19214 Piney Way Dr Tomball, TX 77375  |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | Description<br>Campaign Gathering - Security Donation |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |   |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name Office sought Office held<br>James Noack Montgomery Co Commissioner Pct 3   |  |   |  |
| Date<br>03/05/24                                      |  | Payee name<br>Michael Fulton  |  |   |  |
| Amount (\$)<br>\$275.00                               |  | Payee address; City; State; Zip Code<br>25710 Loop 494, Apt 1137 Kingwood, TX 77339   |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | Description<br>Campaign Gathering - Security Donation |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |   |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name Office sought Office held<br>James Noack Montgomery Co Commissioner Pct 3   |  |   |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |   |  |  |
|--|---|--|---|--|--|
| <b>1</b> Total pages Schedule F1:  |   | <b>2</b> FILER NAME<br>Ryan Gable  |   | <b>3</b> Filer ID (Ethics Commission Filers) |  |
| <b>4</b> Date<br>03/12/24  |   | <b>5</b> Payee name<br>Sportsmen's Outlet  |   |  |  |
| <b>6</b> Amount (\$)<br>\$1,292.36   |   | <b>7</b> Payee address; City; State; Zip Code<br>1710 FM 1960 Bypass East Humble, TX 77338 |   |  |  |
| <b>8</b><br>PURPOSE<br>OF<br>EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense        |  | <b>(b)</b> Description<br>Campaign Golf Tournament Auction Item           |  |  |
|  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.      |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held                                     |   |  |   |  |  |
| Date<br>03/12/24   |   | Payee name<br>The Woodlands Christian Academy  |   |  |  |
| Amount (\$)<br>\$1,500.00  |   | Payee address; City; State; Zip Code<br>5800 Academy Way The Woodlands, TX 77384           |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by |  | Description<br>Table Sponsor 2024 Gala                                    |  |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                 |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held  |   |  |   |  |  |
| Date<br>03/13/24   |   | Payee name<br>Brandon Steinmann  |   |  |  |
| Amount (\$)<br>\$250.00  |   | Payee address; City; State; Zip Code<br>PO Box 9357 The Woodlands, TX 77387                |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by |  | Description<br>Campaign Contribution                                      |  |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                 |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held<br>Brandon Steinmann Montgomery County Clerk |   |  |   |  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |   |  |  |
|---|--|--|---|--|--|
| <b>1</b> Total pages Schedule F1:                                   |  | <b>2</b> FILER NAME<br>Ryan Gable  |   | <b>3</b> Filer ID (Ethics Commission Filers) |  |
| <b>4</b> Date<br>03/15/24   |  | <b>5</b> Payee name<br>Tris  |   |  |  |
| <b>6</b> Amount (\$)<br>\$1,132.57                                  |  | <b>7</b> Payee address; City; State; Zip Code<br>24 Waterway Ave The Woodlands, TX 77380 |   |  |  |
| <b>8</b><br>PURPOSE<br>OF<br>EXPENDITURE                            | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b)</b> Description<br>Dinner for Supporters                           |  |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                  |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |   | Office sought Office held                    |  |
| Date<br>03/16/24  |  | Payee name<br>Trulucks   |   |  |  |
| Amount (\$)<br>\$480.29   |  | Payee address; City; State; Zip Code<br>1900 Hughes Landing Blvd The Woodlands, TX 77380 |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description<br>Political Meeting  |  |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                  |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |   | Office sought Office held                    |  |
| Date<br>03/18/24  |  | Payee name<br>Dennis Tibbs   |   |  |  |
| Amount (\$)<br>\$300.00   |  | Payee address; City; State; Zip Code<br>2603 East Blue Lake Magnolia, TX 77354           |   |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by  |  | Description<br>Sponsor the SD 7 Convention                                |  |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                  |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |   | Office sought Office held                    |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |   |                                       |  |
|--|---|--|---|---------------------------------------|--|
| 1 Total pages Schedule F1:   |   | 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers) |  |
| 4 Date<br>03/20/24   |   | 5 Payee name<br>The Woodlands High School Football Booster Club                                |   |                                       |  |
| 6 Amount (\$)<br>\$7,750.00  |   | 7 Payee address; City; State; Zip Code<br>6700 Woodlands Pkwy, Ste 230 The Woodlands, TX 77382 |   |                                       |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by |  | (b) Description<br>Platinum Football Annual Sponsorship                   |                                       |  |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                 |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                       |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |   |  |   |                                       |  |
| Date<br>03/20/24   |   | Payee name<br>Rapid Radios   |   |                                       |  |
| Amount (\$)<br>\$799.00  |   | Payee address; City; State; Zip Code<br>8122 Fulton Street E Ada, MI 49301                     |   |                                       |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense      |  | Description<br>Handheld Radios for Departmental Use                       |                                       |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                     |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                       |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |  |   |                                       |  |
| Date<br>03/22/24   |   | Payee name<br>Sportsmen's Outlet   |   |                                       |  |
| Amount (\$)<br>\$1,292.36  |   | Payee address; City; State; Zip Code<br>1710 FM 1960 Bypass East Humble, TX 77338              |   |                                       |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Gifts/Awards/Memorials Expense      |  | Description<br>Gift for Supporter   |                                       |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                     |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                       |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |  |   |                                       |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1:                            |  | 2 FILER NAME<br>Ryan Gable  |  | 3 Filer ID (Ethics Commission Filers)                          |  |
| 4 Date<br>03/24/24                                    |  | 5 Payee name<br>The Cynthia Woods Mitchell Pavilion   |  |  |  |
| 6 Amount (\$)<br>\$1,300.00                           |  | 7 Payee address; City; State; Zip Code<br>2005 Lake Robbins Dr The Woodlands, TX 77380  |  |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE                     |  | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | (b) Description<br>Donation Scholarship & Fine Arts Fundraiser |  |
|   |  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name Office sought Office held   |  |  |  |
| Date<br>03/26/24                                      |  | Payee name<br>Amazon  |  |  |  |
| Amount (\$)<br>\$246.66                               |  | Payee address; City; State; Zip Code<br>410 Terry Ave N Seattle, WA 98109   |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                          |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  |  | Description<br>Office Equipment                                |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name Office sought Office held   |  |  |  |
| Date<br>03/28/24                                      |  | Payee name<br>Saddle River Range  |  |  |  |
| Amount (\$)<br>\$2,370.10                             |  | Payee address; City; State; Zip Code<br>4280 FM 1488 Conroe, TX 77384   |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                          |  | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description<br>Campaign Golf Tournament Auction Item           |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name Office sought Office held   |  |  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                              |
| 4 Date<br>03/28/24                                    | 5 Payee name<br>Corporate Incentives  |  |
| 6 Amount (\$)<br>\$1,970.80                           | 7 Payee address; City; State; Zip Code<br>27329 Spectrum Way Conroe, TX 77385   |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br>Golf Towels for Annual Campaign Golf Tournament |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held  |
| Date<br>03/28/24                                      | Payee name<br>Texas Youth Summit  |  |
| Amount (\$)<br>\$1,000.00                             | Payee address; City; State; Zip Code<br>PO Box 8105 Spring, TX 77387  |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Donation  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held  |
| Date<br>03/31/24                                      | Payee name<br>The Woodlands Republican Women's Club   |  |
| Amount (\$)<br>\$512.50                               | Payee address; City; State; Zip Code<br>PO Box 4294 The Woodlands, TX 77387   |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Sponsor 2024 Derby Party Fundraiser                 |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |   |   |  |
|--|--|---|---|---|--|
| <b>1</b> Total pages Schedule F1:                            |  | <b>2</b> FILER NAME<br>Ryan Gable   |   | <b>3</b> Filer ID (Ethics Commission Filers)                      |  |
| <b>4</b> Date<br>03/31/24                                    |  | <b>5</b> Payee name<br>Matt Gray Campaign                                       |   |   |  |
| <b>6</b> Amount (\$)<br>\$250.00                             |  | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1469 Porter, TX 77365   |   |   |  |
| <b>8</b><br>PURPOSE<br>OF<br>EXPENDITURE                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by |   | <b>(b)</b> Description<br>Campaign Contribution                           |   |  |
|  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                 |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name<br>Matt Gray                                      |   | Office sought<br>Office held<br>Montgomery Co. Commissioner Pct 4 |  |
| Date<br>04/01/24   |  | Payee name<br>Living Spaces   |   |   |  |
| Amount (\$)<br>\$588.88                                      |  | Payee address; City; State; Zip Code<br>10900 I-45 South                        |   |   |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense             |   | Description<br>Office Cabinet   |   |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                            |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |  |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name   |   | Office sought<br>Office held                                      |  |
| Date<br>04/02/24   |  | Payee name<br>Morton's Grill  |   |   |  |
| Amount (\$)<br>\$565.84                                      |  | Payee address; City; State; Zip Code<br>25 Waterway Ave The Woodlands, TX 77380 |   |   |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                      |   | Description<br>Political Lunch Meeting                                    |   |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                            |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |  |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name   |   | Office sought<br>Office held                                      |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                             |
| 4 Date<br>04/05/24                                    | 5 Payee name<br>Alphagraphics   |   |
| 6 Amount (\$)<br>\$1,178.61                           | 7 Payee address; City; State; Zip Code<br>17126 Stuebner Airline Rd Spring, TX 77379  |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br>2024 Campaign Golf Tournament Flyers & Mailing |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held   |
| Date<br>04/05/24                                      | Payee name<br>Interfaith of the Woodlands   |   |
| Amount (\$)<br>\$2,884.00                             | Payee address; City; State; Zip Code<br>4242 Interfaith Way The Woodlands, TX 77381   |   |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Sponsor 50th Anniversary Gala                      |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held   |
| Date<br>04/06/24                                      | Payee name<br>Space Center Storage  |   |
| Amount (\$)<br>\$245.00                               | Payee address; City; State; Zip Code<br>26400 Kuykendahl Rd The Woodlands, TX 77375   |   |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | Description<br>Campaign Storage Rental                            |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held   |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                 |
| 4 Date<br>04/08/24                                    | 5 Payee name<br>Children's Safe Harbor  |   |
| 6 Amount (\$)<br>\$754.80                             | 7 Payee address; City; State; Zip Code<br>1519 Odd Fellow St Conroe, TX 77301   |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | (b) Description<br>Sponsor 2024 Fundraiser            |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held                             |
| Date<br>04/09/24                                      | Payee name<br>Turtlebox   |   |
| Amount (\$)<br>\$787.64                               | Payee address; City; State; Zip Code<br>11020 Katy Freeway, Ste. 202 Houston, TX 77043  |   |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>Campaign Golf Tournament Auction Item  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held                             |
| Date<br>04/09/24                                      | Payee name<br>Sportsmen's Outlet  |   |
| Amount (\$)<br>\$3,646.50                             | Payee address; City; State; Zip Code<br>1710 FM 1960 Bypass East Humble, TX 77338   |   |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>Campaign Golf Tournament Auction Items |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held                             |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED   |   |   |

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| <b>1</b> Total pages Schedule F1:                            |  | <b>2</b> FILER NAME<br>Ryan Gable  |  | <b>3</b> Filer ID (Ethics Commission Filers)      |  |
| <b>4</b> Date<br>04/09/24                                    |  | <b>5</b> Payee name<br>Yes to Youth  |  |   |  |
| <b>6</b> Amount (\$)<br>\$1,250.00                           |  | <b>7</b> Payee address; City; State; Zip Code<br>8701 New Trails, Ste 118 The Woodlands, TX 77381  |  |   |  |
| <b>8</b><br>PURPOSE<br>OF<br>EXPENDITURE                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | <b>(b)</b> Description<br>Sponsor 2024 Fundraiser |  |
|  |  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name Office sought Office held<br>Matt Beasley Montgomery Co. J.P. Pct 3  |  |   |  |
| Date<br>04/09/24   |  | Payee name<br>Matt Beasley Campaign  |  |   |  |
| Amount (\$)<br>\$1,000.00                                    |  | Payee address; City; State; Zip Code<br>402 Monarch Oak Dr Magnolia, TX 77354  |  |   |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by  |  | Description<br>Campaign Contribution              |  |
|  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |   |  |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name Office sought Office held<br>Matt Beasley Montgomery Co. J.P. Pct 3  |  |   |  |
| Date<br>04/10/24   |  | Payee name<br>Matt Beasley Campaign  |  |   |  |
| Amount (\$)<br>\$800.00                                      |  | Payee address; City; State; Zip Code<br>402 Monarch Oak Dr Magnolia, TX 77354  |  |   |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by  |  | Description<br>Campaign Contribution              |  |
|  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |   |  |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name Office sought Office held<br>Matt Beasley Montgomery Co. J.P. Pct 3  |  |   |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                            |
| 4 Date<br>04/10/24                                    | 5 Payee name<br>PGA Superstore  |  |
| 6 Amount (\$)<br>\$731.72                             | 7 Payee address; City; State; Zip Code<br>19075 I-45 S Shenandoah, TX 77385   |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br>2024 Campaign Golf Tournament Accessories     |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held  |
| Date<br>04/11/24                                      | Payee name<br>Chris Jones Campaign  |  |
| Amount (\$)<br>\$200.00                               | Payee address; City; State; Zip Code<br>PO Box 52 Magnolia, TX 77353  |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Campaign Contribution                             |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name<br>Chris Jones  | Office sought Office held<br>Montgomery Co. Constable Pct 5      |
| Date<br>04/17/24                                      | Payee name<br>Corporate Incentives  |  |
| Amount (\$)<br>\$1,803.36                             | Payee address; City; State; Zip Code<br>27329 Spectrum Way Conroe, TX 77385   |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>Campaign Logo Golf Balls for 2024 Golf Tournament |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| <b>1</b> Total pages Schedule F1:                            |  | <b>2</b> FILER NAME<br>Ryan Gable  |  | <b>3</b> Filer ID (Ethics Commission Filers)                       |  |
| <b>4</b> Date<br>04/19/24                                    |  | <b>5</b> Payee name<br>Graphic Results   |  |  |  |
| <b>6</b> Amount (\$)<br>\$1,226.47                           |  | <b>7</b> Payee address; City; State; Zip Code<br>6315B FM 1488 Rd, Ste 227 Magnolia, TX 77354  |  |  |  |
| <b>8</b><br><b>PURPOSE<br/>OF<br/>EXPENDITURE</b>            |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | <b>(b)</b> Description<br>2024 Campaign Golf Tournament Hole Signs |  |
|  |  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |  | Office sought Office held  |  |
| <b>Date</b><br>04/20/24                                      |  | <b>Payee name</b><br>Pappa Bros. Steakhouse  |  |  |  |
| <b>Amount (\$)</b><br>\$655.96                               |  | <b>Payee address; City; State; Zip Code</b><br>5839 Westheimer Rd Houston, TX 77057  |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   |  | <b>Description</b><br>Political Dinner                             |  |
|  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |  |  |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   |  | Candidate / Officeholder name  |  | Office sought Office held  |  |
| <b>Date</b><br>04/22/24                                      |  | <b>Payee name</b><br>Corporate Incentives  |  |  |  |
| <b>Amount (\$)</b><br>\$2,548.96                             |  | <b>Payee address; City; State; Zip Code</b><br>27329 Spectrum Way Conroe, TX 77385   |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Event Expense   |  | <b>Description</b><br>Campaign Golf Tournament "Goody bag" Coolers |  |
|  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |  |  |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   |  | Candidate / Officeholder name  |  | Office sought Office held  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                                  |
| 4 Date<br>04/24/24                                    | 5 Payee name<br>Academy Sports & Outdoors   |  |
| 6 Amount (\$)<br>\$862.38                             | 7 Payee address; City; State; Zip Code<br>1360 Lake Woodlands Dr The Woodlands, TX 77380  |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br>2024 Campaign Golf Tournament Trophies              |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held  |
| Date<br>04/24/24                                      | Payee name<br>Costco  |  |
| Amount (\$)<br>\$292.81                               | Payee address; City; State; Zip Code<br>8185 SH 242 The Woodlands, TX 77385   |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>2024 Campaign Golf Tournament "Goodie Bag" snacks       |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held  |
| Date<br>04/26/24                                      | Payee name<br>PGA Superstore  |  |
| Amount (\$)<br>\$270.61                               | Payee address; City; State; Zip Code<br>19075 I-45 S Shenandoah, TX 77385   |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>2024 Campaign Golf Tournament Accessories & Door Prizes |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1:                            |  | 2 FILER NAME<br>Ryan Gable  |  | 3 Filer ID (Ethics Commission Filers)                        |  |
| 4 Date<br>04/26/24                                    |  | 5 Payee name<br>Costco  |  |  |  |
| 6 Amount (\$)<br>\$1,893.62                           |  | 7 Payee address; City; State; Zip Code<br>8185 SH 242 The Woodlands, TX 77385   |  |  |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | (b) Description<br>2024 Campaign Golf Tournament Drinks/Beer |  |
|   |  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name Office sought Office held   |  |  |  |
| Date<br>04/27/24                                      |  | Payee name<br>Morton's Grill  |  |  |  |
| Amount (\$)<br>\$310.07                               |  | Payee address; City; State; Zip Code<br>25 Waterway Ave The Woodlands, TX 77380   |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   |  | Description<br>2024 Ironman Meeting                          |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name Office sought Office held   |  |  |  |
| Date<br>04/29/24                                      |  | Payee name<br>The Woodlands High School Football Booster Club   |  |  |  |
| Amount (\$)<br>\$200.00                               |  | Payee address; City; State; Zip Code<br>6700 Woodlands Parkway, Suite 230 The Woodlands, TX 77382   |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | Description<br>Donation                                      |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name Office sought Office held   |  |  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:                            |  | 2 FILER NAME<br><b>Ryan Gable</b>  |  | 3 Filer ID (Ethics Commission Filers)                                     |  |
| 4 Date<br><b>04/30/24</b>                             |  | 5 Payee name<br><b>MS National Multiple Sclerosis Society</b>  |  |   |  |
| 6 Amount (\$)<br><b>\$530.00</b>                      |  | 7 Payee address; City; State; Zip Code<br><b>733 Third Ave, 3rd Floor New york, NY 10017</b>               |  |   |  |
| 8<br><b>PURPOSE OF EXPENDITURE</b>                    |  | (a) Category (See Categories listed at the top of this schedule)<br><b>Contributions/Donations Made by</b> |  | (b) Description<br><b>Sponsor Local MS 150 Bicycle Ride</b>               |  |
|   |  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                        |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |  | Office sought Office held   |  |
| Date<br><b>04/30/24</b>                               |  | Payee name<br><b>Graphic Results</b>   |  |   |  |
| Amount (\$)<br><b>\$586.72</b>                        |  | Payee address; City; State; Zip Code<br><b>6315B FM 1488 Rd, Ste 227 Magnolia, TX 77354</b>                |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                         |  | Category (See Categories listed at the top of this schedule)<br><b>Event Expense</b>                       |  | Description<br><b>Signage for 2024 Campaign Golf Tournament</b>           |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                            |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name  |  | Office sought Office held   |  |
| Date<br><b>04/30/24</b>                               |  | Payee name<br><b>Corporate Incentives</b>  |  |   |  |
| Amount (\$)<br><b>\$842.16</b>                        |  | Payee address; City; State; Zip Code<br><b>27329 Spectrum Way Conroe, TX 77385</b>                         |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                         |  | Category (See Categories listed at the top of this schedule)<br><b>Event Expense</b>                       |  | Description<br><b>2024 Campaign Golf Tournament Golf Towels</b>           |  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                            |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate / Officeholder name  |  | Office sought Office held   |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |   |
|--|---|---|
| 1 Total pages Schedule F1:   | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                             |
| 4 Date<br>05/02/24   | 5 Payee name<br>Graphic Results   |   |
| 6 Amount (\$)<br>\$595.38  | 7 Payee address; City; State; Zip Code<br>6315 B FM 1488 Rd, Ste 227 Magnolia, TX 77354   |   |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br>Signage for 2024 Campaign Golf Tournament      |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |
| 9 Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |   |   |
| Date<br>05/02/24   | Payee name<br>Space Center Storage  |   |
| Amount (\$)<br>\$1,760.00  | Payee address; City; State; Zip Code<br>26400 Kuykendahl Rd The Woodlands, TX 77375   |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | Description<br>Bi-Annual Campaign Storage Rental                  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |   |
| Date<br>05/02/24   | Payee name<br>Total Wine & More   |   |
| Amount (\$)<br>\$641.16  | Payee address; City; State; Zip Code<br>1900 Lake Woodlands Dr The Woodlands, TX 77380  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>Specialty Drinks for 2024 Campaign Golf Tournament |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |   |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| 1 Total pages Schedule F1:   | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date<br>05/03/24   | 5 Payee name<br>Terro Vino  |  |
| 6 Amount (\$)<br>\$191.98  | 7 Payee address; City; State; Zip Code<br>2520 Research Forest Dr The Woodlands, TX 77381   |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | (b) Description<br>Political Meeting   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |   |  |
| Date<br>05/04/24   | Payee name<br>The Woodlands Christian Academy   |  |
| Amount (\$)<br>\$200.00  | Payee address; City; State; Zip Code<br>5800 Academy Way The Woodlands, TX 77384  |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Donation  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |  |
| Date<br>05/04/24   | Payee name<br>The Woodlands Marriott  |  |
| Amount (\$)<br>\$280.72  | Payee address; City; State; Zip Code<br>1601 Lake Robbins Dr The Woodlands, TX 77380  |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>The Woodlands Christian Academy 2024 Gala Gathering with Supporters |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| <b>1</b> Total pages Schedule F1:  |  | <b>2</b> FILER NAME<br>Ryan Gable  |  | <b>3</b> Filer ID (Ethics Commission Filers) |  |
| <b>4</b> Date<br>05/08/24  |  | <b>5</b> Payee name<br>Normangee Mercantile                                    |  |  |  |
| <b>6</b> Amount (\$)<br>\$2,840.80   |  | <b>7</b> Payee address; City; State; Zip Code<br>123 FM 39 Normangee, TX 77381 |  |  |  |
| <b>8</b><br><br>PURPOSE<br>OF<br>EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | <b>(b)</b> Description<br>Donate Food / High School Teacher & Student Appreciation Day |  |  |
|  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |  |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held                                    |  |  |  |  |  |
| Date<br>05/08/24   |  | Payee name<br>Linda Nelson Campaign  |  |  |  |
| Amount (\$)<br>\$500.00  |  | Payee address; City; State; Zip Code<br>151 N Mill Trace Dr Spring, TX 77382   |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | <b>Description</b><br>Campaign Contribution  |  |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held<br>Linda Nelson Woodlands Township Director |  |  |  |  |  |
| Date<br>05/08/24   |  | Payee name<br>HEB  |  |  |  |
| Amount (\$)<br>\$211.90  |  | Payee address; City; State; Zip Code<br>3540 Rayford Rd Spring, TX 77386       |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | <b>Description</b><br>Sponsor Men's Night "Wing Stop" Angel Reach Organization         |  |  |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |  |  |  |  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

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|----------------------------|----------------------------|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME<br>Ryan Gable | 3 Filer ID (Ethics Commission Filers) |
|----------------------------|----------------------------|---------------------------------------|

|                    |                               |
|--------------------|-------------------------------|
| 4 Date<br>05/09/24 | 5 Payee name<br>Alphagraphics |
|--------------------|-------------------------------|

|                           |   |                     |              |                   |
|---------------------------|---|---------------------|--------------|-------------------|
| 6 Amount (\$)<br>\$692.77 | 7 Payee address;<br>17126 Stuebner Airline Rd | City;<br>Spring, TX | State;<br>TX | Zip Code<br>77379 |
|---------------------------|---|---------------------|--------------|-------------------|

|                                       |   |  |
|---------------------------------------|---|--|
| 8<br><br>PURPOSE<br>OF<br>EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br>Print & Mail 2024 Campaign Golf<br>Tournament "Reschedule Date" Cards |
|                                       | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |

|   |                               |               |             |
|---|-------------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

|                  |                                 |
|------------------|---------------------------------|
| Date<br>05/11/24 | Payee name<br>Porky's Belly BBQ |
|------------------|---------------------------------|

|                           |                                 |                         |              |                   |
|---------------------------|---------------------------------|-------------------------|--------------|-------------------|
| Amount (\$)<br>\$5,351.88 | Payee address;<br>15496 FM 2854 | City;<br>Montgomery, TX | State;<br>TX | Zip Code<br>77316 |
|---------------------------|---------------------------------|-------------------------|--------------|-------------------|

|                              |   |  |
|------------------------------|---|--|
| PURPOSE<br>OF<br>EXPENDITURE | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>BBQ Dinner for 2024 Campaign Golf<br>Tournament |
|                              | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |

|   |                               |               |             |
|---|-------------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

|                  |                                     |
|------------------|-------------------------------------|
| Date<br>05/19/24 | Payee name<br>The Bourbon Concierge |
|------------------|-------------------------------------|

|                         |  |                         |              |                   |
|-------------------------|--|-------------------------|--------------|-------------------|
| Amount (\$)<br>\$296.65 | Payee address;<br>2816 Pennsylvania Ave NW | City;<br>Washington, DC | State;<br>DC | Zip Code<br>20007 |
|-------------------------|--|-------------------------|--------------|-------------------|

|                              |   |  |
|------------------------------|---|--|
| PURPOSE<br>OF<br>EXPENDITURE | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>2024 Campaign Golf Tournament Door<br>Prize |
|                              | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |

|   |                               |               |             |
|---|-------------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |   |                                       |  |
|---|---|--|---|---------------------------------------|--|
| 1 Total pages Schedule F1:                            |   | 2 FILER NAME<br>Ryan Gable   |   | 3 Filer ID (Ethics Commission Filers) |  |
| 4 Date<br>05/20/24                                    |   | 5 Payee name<br>Sam's Club   |   |                                       |  |
| 6 Amount (\$)<br>\$1,008.45                           |   | 7 Payee address; City; State; Zip Code<br>19091 I-45 Shenandoah, TX 77385              |   |                                       |  |
| 8<br><b>PURPOSE<br/>OF<br/>EXPENDITURE</b>            | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | (b) Description<br>Lunch Supplies for 2024 Campaign Golf Tournament   |                                       |  |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |   |                                       |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |   | Candidate / Officeholder name  |   | Office sought Office held             |  |
| Date<br>05/21/24                                      |   | Payee name<br>Lupe Tortilla  |   |                                       |  |
| Amount (\$)<br>\$251.60                               |   | Payee address; City; State; Zip Code<br>19437 I-45 South Shenandoah, TX 77385          |   |                                       |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                 | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description<br>2024 Campaign Golf Tournament Meeting                  |                                       |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |   |                                       |  |
| Complete ONLY if direct expenditure to benefit C/OH   |   | Candidate / Officeholder name  |   | Office sought Office held             |  |
| Date<br>05/21/24                                      |   | Payee name<br>Total Wine & More  |   |                                       |  |
| Amount (\$)<br>\$527.57                               |   | Payee address; City; State; Zip Code<br>1900 Lake Woodlands Dr The Woodlands, TX 77380 |   |                                       |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                 | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description<br>Specialty Drinks for the 2024 Campaign Golf Tournament |                                       |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |   |                                       |  |
| Complete ONLY if direct expenditure to benefit C/OH   |   | Candidate / Officeholder name  |   | Office sought Office held             |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |  |  |  |
|---|---|--|--|--|--|
| <b>1</b> Total pages Schedule F1:   |   | <b>2</b> FILER NAME<br>Ryan Gable  |  | <b>3</b> Filer ID (Ethics Commission Filers) |  |
| <b>4</b> Date<br>05/22/24   |   | <b>5</b> Payee name<br>Graphic Results   |  |  |  |
| <b>6</b> Amount (\$)<br>\$360.47  |   | <b>7</b> Payee address; City; State; Zip Code<br>6315B FM 1488, Ste 227 Magnolia, TX 77354 |  |  |  |
| <b>8</b><br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | (b) Description<br>Signage for 2024 Campaign Golf Tournament |  |  |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |  |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |   |  |  |  |  |
| Date<br>05/23/24  |   | Payee name<br>Boeker's Humble Ice  |  |  |  |
| Amount (\$)<br>\$745.00   |   | Payee address; City; State; Zip Code<br>3007 Woodlands Hills Dr # 218 Kingwood, TX 77339   |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description<br>Ice for the 2024 Campaign Golf Tournament     |  |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held          |   |  |  |  |  |
| Date<br>05/23/24  |   | Payee name<br>GoodeCo. Kitchen & Cantina   |  |  |  |
| Amount (\$)<br>\$274.09   |   | Payee address; City; State; Zip Code<br>8865 Six Pines Dr Shenandoah, TX 77380             |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   |  | Description<br>Political Dinner Meeting                      |  |  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held          |   |  |  |  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

|  |   |   |
|--|---|---|
| 1 Total pages Schedule F1:   | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                                 |
| 4 Date<br>05/23/24   | 5 Payee name<br>Best Buy  |   |
| 6 Amount (\$)<br>\$193.04  | 7 Payee address; City; State; Zip Code<br>1550 Lake Woodlands Dr The Woodlands, TX 77380  |   |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | (b) Description<br>Geek Squad Renewal                                 |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |
| 9 Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |   |   |
| Date<br>05/24/24   | Payee name<br>Nikki's Creations & More  |   |
| Amount (\$)<br>\$243.00  | Payee address; City; State; Zip Code<br>314 Eastlake St Houston, TX 77034   |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>Balloon Arch for the 2024 Campaign Golf Tournament     |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |   |
| Date<br>05/24/24   | Payee name<br>MarcG   |   |
| Amount (\$)<br>\$700.00  | Payee address; City; State; Zip Code<br>422 Dunkley Dr Houston, TX 77076  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>DJ & Audio Equipment for 2024 Campaign Golf Tournament |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |   |
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |   |
|--|---|---|
| 1 Total pages Schedule F1:   | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                                     |
| 4 Date<br>05/24/24   | 5 Payee name<br>Cypresswood golf Club   |   |
| 6 Amount (\$)<br>\$25,500.00   | 7 Payee address; City; State; Zip Code<br>21602 Cypresswood Dr Spring, TX 77373   |   |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description<br>Golf Course Payment - 2024 Campaign<br>Golf tournament |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |
| 9 Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |   |   |
| Date<br>05/27/24   | Payee name<br>Total Wine & More   |   |
| Amount (\$)<br>\$268.45  | Payee address; City; State; Zip Code<br>1900 Lake Woodlands Dr The Woodlands, TX 77380  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Gifts/Awards/Memorials Expense  | Description<br>Gift for Staff   |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |   |
| Date<br>05/28/24   | Payee name<br>Best Buy  |   |
| Amount (\$)<br>\$1,149.58  | Payee address; City; State; Zip Code<br>1550 Lake Woodlands Dr The Woodlands, TX 77380  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | Description<br>Office Computer Tablet                                     |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |   |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                               |
| 4 Date<br>05/29/24                                    | 5 Payee name<br>Lorna Sumner  |   |
| 6 Amount (\$)<br>\$1,000.00                           | 7 Payee address; City; State; Zip Code<br>78 N Creekmist Place The Woodlands, TX 77385  |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | (b) Description<br>Sponsor College Park High School FFA - Livestock |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held   |
| Date<br>06/02/24                                      | Payee name<br>Zanti   |   |
| Amount (\$)<br>\$375.80                               | Payee address; City; State; Zip Code<br>10000 Research Forest Dr Magnolia, TX 77354   |   |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | Description<br>Political Dinner Meeting                             |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held   |
| Date<br>06/05/24                                      | Payee name<br>Judge Mark Keough   |   |
| Amount (\$)<br>\$250.00                               | Payee address; City; State; Zip Code<br>26 Woodmere Place The Woodlands, TX 77381   |   |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Campaign Contribution                                |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name<br>Mark Keough  | Office sought Office held<br>Montgomery Co. Judge                   |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:                            | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date<br>06/05/24                                    | 5 Payee name<br>Best Buy  |  |
| 6 Amount (\$)<br>\$864.92                             | 7 Payee address; City; State; Zip Code<br>1550 Lake Woodlands Dr The Woodlands, TX 77380  |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | (b) Description<br>Office Communications Equipment   |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought Office held  |
| Date<br>06/11/24                                      | Payee name<br>Alphagraphics   |  |
| Amount (\$)<br>\$618.87                               | Payee address; City; State; Zip Code<br>17126 Stuebner Airline Rd Spring, TX 77379  |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>Thank you Letters to Supporters & Mailing for 2024 Campaign Golf Tournament |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held  |
| Date<br>06/15/24                                      | Payee name<br>HEB   |  |
| Amount (\$)<br>\$286.90                               | Payee address; City; State; Zip Code<br>3540 Rayford Rd Spring, TX 77386  |  |
| PURPOSE OF EXPENDITURE                                | Category (See Categories listed at the top of this schedule)<br>Gifts/Awards/Memorials Expense  | Description<br>Gift Cards  |
|   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought Office held  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| 1 Total pages Schedule F1:   | 2 FILER NAME<br>Ryan Gable  | 3 Filer ID (Ethics Commission Filers)                                    |
| 4 Date<br>06/15/24   | 5 Payee name<br>Academy Sports & Outdoors   |  |
| 6 Amount (\$)<br>\$200.93  | 7 Payee address; City; State; Zip Code<br>1360 Lake Woodlands Dr The Woodlands, TX 77380  |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | (b) Description<br>Shirts for Department Embroderery                     |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held |   |  |
| Date<br>06/17/24   | Payee name<br>Northwest Pawn  |  |
| Amount (\$)<br>\$1,500.00  | Payee address; City; State; Zip Code<br>18123 Kuykendahl Rd Spring, TX 77379  |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description<br>Auction Items/Door Prizes for Campaign Fundraising Events |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |  |
| Date<br>06/17/24   | Payee name<br>TSDTPO  |  |
| Amount (\$)<br>\$500.00  | Payee address; City; State; Zip Code<br>12110 Pin Oak Dr Magnolia, TX 77354   |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Donation to the Magnolia High School Dance Team           |
|  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense     |  |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name Office sought Office held   |   |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| <b>1</b> Total pages Schedule F1:                            |  | <b>2</b> FILER NAME<br>Ryan Gable  |  | <b>3</b> Filer ID (Ethics Commission Filers)                           |  |
| <b>4</b> Date<br>06/18/24                                    |  | <b>5</b> Payee name<br>The Woodlands Chamber of Commerce   |  |  |  |
| <b>6</b> Amount (\$)<br>\$1,750.00                           |  | <b>7</b> Payee address; City; State; Zip Code<br>9320 Lakeside Blvd, Suite 200 The Woodlands, TX 77381   |  |  |  |
| <b>8</b><br>PURPOSE<br>OF<br>EXPENDITURE                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   |  | <b>(b)</b> Description<br>Sponsor 2024 Chairman's Ball                 |  |
|  |  | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |  |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |  | Office sought Office held  |  |
| Date<br>06/20/24   |  | Payee name<br>Pit Master BBQ   |  |  |  |
| Amount (\$)<br>\$400.00                                      |  | Payee address; City; State; Zip Code<br>343 Sawdust Rd Spring, TX 77380  |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  |  | Description<br>Host Departmental Birthday Luncheon                     |  |
|  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |  | Office sought Office held  |  |
| Date<br>07/01/24   |  | Payee name<br>Town Square Publications   |  |  |  |
| Amount (\$)<br>\$499.00                                      |  | Payee address; City; State; Zip Code<br>PO Box 280 Arlington HTS, IL 60006   |  |  |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense  |  | Description<br>Department Publication in Woodlands Chamber Advertising |  |
|  |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |  | Office sought Office held  |  |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|                                   |                                   |  |
|-----------------------------------|-----------------------------------|--|
| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME<br>Ryan Gable | <b>3</b> Filer ID (Ethics Commission Filers) |
|-----------------------------------|-----------------------------------|--|

|                           |   |
|---------------------------|---|
| <b>4</b> Date<br>07/11/24 | <b>5</b> Payee name<br>The Woodlands High School Cheer Booster Club |
|---------------------------|---|

|                                  |  |                            |              |                   |
|----------------------------------|--|----------------------------|--------------|-------------------|
| <b>6</b> Amount (\$)<br>\$500.00 | <b>7</b> Payee address;<br>6101 Research Forest Dr | City;<br>The Woodlands, TX | State;<br>TX | Zip Code<br>77381 |
|----------------------------------|--|----------------------------|--------------|-------------------|

|   |  |                                    |
|---|--|------------------------------------|
| <b>8</b><br><b>PURPOSE<br/>OF<br/>EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | <b>(b)</b> Description<br>Donation |
|   | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                    |

|   |                               |               |             |
|---|-------------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

|                  |   |
|------------------|---|
| Date<br>07/11/24 | Payee name<br>Grand Oaks High School Cheer Booster Club |
|------------------|---|

|                         |  |                     |              |                   |
|-------------------------|--|---------------------|--------------|-------------------|
| Amount (\$)<br>\$500.00 | Payee address;<br>4800 Riley Fuzzel Rd | City;<br>Spring, TX | State;<br>TX | Zip Code<br>77386 |
|-------------------------|--|---------------------|--------------|-------------------|

|                                       |   |                         |
|---------------------------------------|---|-------------------------|
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b> | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made by   | Description<br>Donation |
|                                       | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                         |

|  |                               |               |             |
|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

|                  |                            |
|------------------|----------------------------|
| Date<br>07/11/24 | Payee name<br>Squareup.com |
|------------------|----------------------------|

|                           |  |                      |              |                   |
|---------------------------|--|----------------------|--------------|-------------------|
| Amount (\$)<br>\$4,233.41 | Payee address;<br>1955 Broadway, Ste 600 | City;<br>Oakland, CA | State;<br>CA | Zip Code<br>94612 |
|---------------------------|--|----------------------|--------------|-------------------|

|                                       |   |  |
|---------------------------------------|---|--|
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b> | Category (See Categories listed at the top of this schedule)<br>Fees  | Description<br>Credit Card Processing Fees for Political Contributions |
|                                       | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |

|  |                               |               |             |
|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

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

|   |   |                                       |
|---|---|---------------------------------------|
| The Instruction Guide explains how to complete this form. |   | 1 Total pages Schedule K:<br>1        |
| 2 FILER NAME<br>Ryan Gable                                |   | 3 Filer ID (Ethics Commission Filers) |
| 4 Date<br>02/28/24  | 5 Name of person from whom amount is received<br>Jo Dawn Shore<br><br>6 Address of person from whom amount is received; City; State; Zip Code<br>2230 Fawn Bridge Ln Crosby, TX 77532<br><br>7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer<br>Sale of the Constable Gable Campaign Food Trailer | 8 Amount (\$)<br>\$10,000.00          |
| Date  | Name of person from whom amount is received<br><br>Address of person from whom amount is received; City; State; Zip Code<br><br>Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer   | Amount (\$)                           |
| Date  | Name of person from whom amount is received<br><br>Address of person from whom amount is received; City; State; Zip Code<br><br>Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer   | Amount (\$)                           |
| Date  | Name of person from whom amount is received<br><br>Address of person from whom amount is received; City; State; Zip Code<br><br>Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer   | Amount (\$)                           |

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