1	TE / OFFICEHOL N FINANCE REF			FORM C/OH COVER SHEET PG 1
The C/OH Instruction	Guide explains how to com	plete this form.		2 Total pages filed: 37
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Mark J.	MI	OFFICE USE ONLY
NAME .	NICKNAME	LAST Keough	SUFFIX	Date Received TY ELECTIONS PORTING TO Date Postmarked 37
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; AI 26 Woodmere PI	PT / SUITE #; CITY;	ZIP CODE	Determand-delivered or bate Postmarked \$\frac{1}{2}\$ Amount
Change of Address	The Woodlands, TX 773	81		Date Processed
·····				Date Imaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR Luci	first Le	Ğ,	
	NICKNAME	LANDIS	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS		OBOXPLEASE); RD & PAR	APT/SUITE#; CITY; AD15e DR1	STATE; ZIP CODE
(Residence or Business)	CONRO	e Tx 77	302	
7 CAMPAIGN TREASURER PHONE		NE NUMBER EXTENSION 23 - 851/		
B REPORT TYPE	X January 15 July 15	30th day before election 8th day before election	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
PERIOD COVERED	Month Day Year 07/01/2024	THROUGH	Month Day 12/31/202	Year 1
LO ELECTION	ELECTION DATE Month Day Year 03/03/2026	X Primary General	ELECTION TYPE Runoff Special	Other
.1 OFFICE	OFFICE HELD (if any) Statutory County Judge I	Montgomery	12 OFFICE SOUGHT Statutory County	
-		GO TO PAGE	2	
orms provided by Tex	as Ethics Commission	www.ethics.state	.tx.us	Version V4.1.0.5dd2ace

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

SUPPORT	& IUIALS			2 of 37				
13 C / OH NAME	Keough, Mark J.		14 Filer ID					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.						
Additional Pages	COMMITTEE TYPE GENERAL							
	COMMITTEE ADDRESS							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRES	38					
16 CONTRIBUTION TOTALS	· · · · · · · · · · · · · · · · · · ·							
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 6,500.00				
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES		\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 37,399.84				
CONTRIBUTION BALANCE	REPORTING PE			\$ 63,134.94				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 117,500.00				
AFFIX NOT	JCILE G. LANDIS Notary ID # 2402082 pires July 26, 2025 FARY STAMP / SEAL ABorribed before me, by the sale of the second		Il information required to	be reported by me				
Signature of office	Signature of officer administering Printed name of officer administering Title of officer administering oath							

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 3 of 37 18 FILER NAME 19 Filer ID Keough, Mark J. 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE 6,500.00 SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ 27,228.27 SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS Х \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 8, SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 10,171.57 \$ 9. X SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. 11. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 2,400,00 SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 65.50 12. X **TO FILER**

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/37 3 Filer ID FILER NAME Keough, Mark J. 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$5,000.00 07/07/2024 Gerber, Jeffrey P. Contributor address; City; State; Zip Code 14 Estancia Place The Woodlands, TX 77389 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) **PGAL** Architect out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$500.00 08/29/2024 Halff Associates State PAC Contributor address; City; State; Zip Code 1201 N. Browser Road Richardson, TX 75081 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$500.00 07/03/2024 Pape-Dawson Engineers PAC Contributor address; City; State; Zip Code 2000 NW Loop 410 San Antonio, TX 78213 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$500.00 07/27/2024 Siercks, Megan E. Contributor address; City; State; Zip Code 9702 Willowbridge Park Blvd Houston, TX 77064 Principal occupation / Job title (See Instructions) Employer (See Instructions) BGE, Inc. Associate Manager, Traffic Version V4.1.0.5dd2ace2 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Food/Beverage Expense Gitt/Awards/Memorials Expens Legal Services The Instruction Guide ex	Salaries/	Xpens Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed abova)
1	Total pages Schedule F1:	2 FILER NAM	ΛΕ	······································			3	Filer ID
	Sch: 1/11 Rpt: 5/37	Keough, N	Aark J.					
4	Date	5 Payee nam	e	·				
	08/16/2024	_	y Campaign					
6	Amount (\$)	7 Payee addr	ress; City;	State; Zip Co	ode			
	\$1,000.00	6700 Woo	dlands Parkway					
		Suite 250	- 223					
		The Wood	llands, TX 77382					
8	PURPOSE	(a) Category	See Categories listed at the top of	(this schodula)	(b)	Description		
	OF EXPENDITURE		ons/Donations Made B		``		outsi	de of Texas, Complete Schedule T.
	EXPENDITORE	Candidate	/Officeholder/Political (Committee		 i	n, TX,	officeholder living expense
						Donation		
-	Complete ONLY if direct	Candidate/O	fficeholder name	Office sou	ıabt			Office held
Î	expenditure to benefit C/O		meenouser name	Onice soc	.gin			Office field
	Date	Payee nam						
	09/28/2024	Brett Ligor	n Campaign					
	Amount (\$)	Payee addr	• • •	State; Zip Co	ode			
	\$1,000.00	P. O. Box	558			:		
		Pinehurst,	TX 77362					
	PURPOSE OF		See Categories listed at the top of		(b)	Description		ole of Taylor Commisto Cabadula T
	EXPENDITURE		ons/Donations Made By /Officeholder/Political C			<u>i—i</u>		de of Texas. Complete Schedule T. officeholder living expense
		Cartadate	Omobilologii omoca (2011111111100		Donation		
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ight			Office held
	Date	Payee name	2					
	07/22/2024	Brooks, Da						
-	Amount (\$)	Payee addr	ess; City;	State; Zip Co	de			
	\$100.00	P. O. Box		,				
		Capitol Sta	ation					
ĺ		Austin, TX	78711					
-	PURPOSE	(a) Category	See Categories listed at the top of	this schedule)	(b)	Description		
	OF EXPENDITURE	Education				Check if travel		de of Texas. Complete Schedule T.
	EM EMBITONE					Monthly Cou		officeholder living expense
						Monthly Cou	it ix	ероп
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	aht		-	Office held
	expenditure to benefit C/O		and the second of the second o	55 554	٠٠٠٠			
L								

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Gift/Awards/Memorials E Legal Services The Instruction Gui	Expense P S		ense jes/Contract Labor		Travel Out of District OTHER (enter a category not listed a	ibove)
1	Total pages Schedule F1:	2 FILER NAM		•		, ,	3	Filer ID	
Ì	Sch: 2/11 Rpt: 6/37	Keough, M	ark J.						
4	Date	5 Payee name							
	08/04/2024	Brooks, Da	vid B						
6	Amount (\$)	7 Payee addre	ess; City;	State; Z	Zip Code	}			
	\$100.00	P. O. Box 1	.2303						
		Capitol Sta	tion						
		Austin, TX	78711						
8	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedul	le) (k) Description	· · ·		
	OF EXPENDITURE	Education		•				de of Texas, Complete Schedule T.	
	EXI ENDITORE					······		officeholder living expense	
						Monthly C	ourt R	eport	
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office	ce sough			Office held	
9	expenditure to benefit C/O		cenoider flame	Oille	ce sougr			Onice held	······································
	Date	Payee name			•	,			
	09/15/2024	Brooks, Da	vid B						
	Amount (\$)	Payee addre	ss; City;	State; Z	Zip Code	1			•
	\$100.00	P. O. Box 1	2303						
		Capitol Star	tion						
		Austin, TX	78711						
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedul	le) (k) Description			
ŀ	OF EXPENDITURE	Education			Ì	إسسا		de of Texas. Complete Schedule T.	
						Monthly co		officeholder living expense	
	:					woneny oc	, and 10	Port	
	Complete ONLY if direct	Candidate/Off	ceholder name	Offic	ce sough	t		Office held	
	expenditure to benefit C/O	4							
	Date	Payee name					<u> </u>		
	10/14/2024	Brooks, Da	vid B						
	Amount (\$)	Payee addre	ss; City;	State; Z	ip Code				
	\$100.00	P. O. Box 1	2303						
		Capitol Stat	ion						
		Austin, TX	78711						
	PURPOSE	(a) Category (S	ee Categories listed at the	ton of this schedule	e) (b) Description			,, ,, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,
	OF EVDENDITUDE	Education	oc oatogories isted at the	TOP OF BILL OUTCOM		Check if tra		de of Texas. Complete Schedule T.	
	EXPENDITURE					السيسبا		officeholder living expense	
						Monthly Co	ourt R	eport	
	OI OAR-Y // JP:-	0						Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Offic	ce sough	Į.		Office held	
	•	· · · · ·			· · · · · · · · · · · · · · · · · · ·				

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Gift/Awards/Memorials E Legal Services The Instruction Guid	xpense Pri Sal	·-	se s/Contract Labor		Travel Out of District OTHER (enter a category not listed above))
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	
	Sch: 3/11 Rpt: 7/37	Keough, M	ark J.						
4	Date	5 Payee name	•						
	11/15/2024	Brooks, Da	vid B						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zi	p Code				*
	\$100.00	P. O. Box 2	12303						
		Capitol Sta	tion						
		Austin, TX	78711						
8	PURPOSE		 		(h)	Description	-		·
ľ	OF	Education	iee Categories listed at the	top of this schedule	, ,		l outsid	e of Texas, Complete Schedule T.	
	EXPENDITURE	Ladoudian				Check if Austi	n, TX, e	officeholder living expense	
						Monthly cou	rt rep	oort	
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office	sought			Office held	
	Date	Payee name							
	12/16/2024	Brooks, Da	vid B						
-	Amount (\$)	Payee addre	ss; City;	State; Zij	p Code				
	\$100.00	P. O. Box 1	.2303	·	,				
		Capitol Sta	tion						
		Austin, TX							
	DUDDOGE	,			Las				,
	PURPOSE OF		ee Categories listed at the	top of this schedule)	(0)	Description	outeid	e of Texas. Complete Schedule T.	
	EXPENDITURE	Education				<u> </u>		officeholder living expense	
						Monthly cour	rt rep	ort	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office	sought		, <u>, , , , , , , , , , , , , , , , , , </u>	Office held	
	Date	Payee name				····			
	10/14/2024	Harland Cla	arke						
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code	·		·	
	\$153.24	_	intera Parkway						
			,						
		San Antoni	o, TX 78256						
	PURPOSE OF		ee Categories listed at the		(b)	Description			
	EXPENDITURE	Office Over	head/Rental Expe	nse				e of Texas. Complete Schedule T. Officeholder living expense	
					Į	Reorder of c			
						1100100101010		•	
	Complete ONLY if direct	Candidata/Offi	ceholder name	Office	- Policipt			Office held	
	complete <u>ONLY</u> it direct expenditure to benefit C/OF		cendider name	Onice	sought			Office field	
	•			, , , , , , , , , , , , , , , , , , , 					

SCHEDULE F1

	_	EXPENDITURE CA		• •					
Advertising Accounting Consulting Contributio	g/Banking Expense Donations Made I	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens	Office Overh Polling Expe e Printing Exp	ense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District				
	ate/Officeholder/Politic d Payment	<u> </u>	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.						
1 Total pag	es Schedule F1:	2 FILER NAME	•	<u>,</u>	3 Filer ID				
Sch: 4/	11 Rpt: 8/37	Keough, Mark J.							
4 Date		5 Payee name							
07/01/20)24	Landis, Lucile							
6 Amount (-	7 Payee address; City;	State; Zip Code	9					
	\$500.00	15814 Bird of Paradise Drive							
		Conroe, TX 77301							
8 PURP OI		(a) Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this schedule) (I	 Description Check if travel 	outside of Texas, Complete Schedule T.				
EXPEND	DITURE	Salaties/Wages/Contract Labor		<u> </u>	, TX, officeholder living expense				
				Treasurer					
<u> </u>	CALL 37 37 48	Constitute (Cities habitan name	Office and the		Office hold				
	ONLY if direct re to benefit C/C	Candidate/Officeholder name H	Office sough	it	Office held				
Date		Payee name							
07/21/20	24	Landis, Lucile							
Amount (\$	-	Payee address; City; State; Zip Code							
	\$1,000.00 15814 Bird of Paradise Drive								
		Conroe, TX 77301							
PURP		(a) Category (See Categories listed at the top of	this schedule) (k	Description	outside of Texas. Complete Schedule T,				
EXPEND		Salaries/Wages/Contract Labor		<u></u> !	TX, officeholder living expense				
				Fundraiser be	onus				
····									
Complete expenditur	<u>ONLY</u> if direct re to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office held				
									
Date	24	Payee name Landis, Lucile							
08/01/20			State; Zip Code						
Amount (\$	9 \$500.00	Payee address; City; 15814 Bird of Paradise Drive	State; Zip Coue	:					
	Ψ500.00	13014 Bird of Faradisc Brive							
		Conroe, TX 77301							
PURPO		(a) Category (See Categories listed at the top of	this schedule) (t	Description	outside of Texas, Complete Schedule T,				
EXPEND		Salaries/Wages/Contract Labor		<u> </u>	TX, officeholder living expense				
				Treasurer					
			, <u>,</u>						
	ONLY if direct re to benefit C/O	Candidate/Officeholder name	Office sough	t	Office held				
- Sportatul	o to bollolit of			. ,					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		ommittee	Gitt/Awards/Memorials Ex Legal Services The Instruction Guid			/age:	s/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
H	Total pages Schedule F1:	12	EII ED NAMI						2	Filer ID	
ľ	Sch: 5/11 Rpt: 9/37	_	Keough, M						3	Filer ID	
4	Date	5	Payee name)							
	09/01/2024		Landis, Luc	ile							
6	Amount (\$)	7	Payee addre	ess; City;	State:	Zip Co	de				
ļ	\$500.00		-	of Paradise Drive		•					
1											
			Conroe, TX	77301							
8	PURPOSE	(a	Category (S	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			ages/Contract Lab		,		Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE							l,)	, TX,	officeholder living expense	
								Treasurer			
L		<u> </u>						·			
9	Complete ONLY, if direct expenditure to benefit C/O		Candidate/Off	iceholder name	C	Office sou	ght			Office held	
	expenditure to benefit C/O										
Г	Date	Π	Payee name								
ĺ	10/01/2024		Landis, Luc	ile							
 	Amount (\$)	├-	Payee addre	ss; City;	State:	Zip Co	de				
	\$500.00			of Paradise Drive							
	4000,00		TOOT I DIE	orr aradice brive							
			O TV	. 22004							
L		_	Conroe, TX	. //3UI				·			
	PURPOSE OF	(a)		ee Categories listed at the		edule)	(b)	Description) (Tour Condition Colored to T	
	EXPENDITURE		Salaries/Wa	ages/Contract Lab	or	-				de of Texas. Complete Schedule T. officeholder living expense	
								Treasurer		Cillotivitadi ittiliğ evitativa	
	Complete ONLY if direct	Ц,	Candidate/Offi	ceholder name		Office sout	rht			Office held	
	expenditure to benefit C/O		ou falactio on	GOTOIGE TIGHTE	Ŭ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9,,,			Gilles Fisher	
		7									
	Date		Payee name								
	11/01/2024		Landis, Luc	ile							
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de	·			
	\$750.00		15814 Bird	of Paradise Drive							
	;										
			Conroe, TX	77301							
	PURPOSE	(a)	Category (c.	ee Categories listed at the t			(b)	Description			
	OF	(~,		ee Calegones listed at the t ages/Contract Lab		edule)	\-,		outsio	de of Texas. Complete Schedule T.	
	EXPENDITURE		Ocidi 1057 VVC	ages/Contract Lab	0 1			Check if Austin,	TX,	officeholder living expense	
								Treasurer			
						ŀ					
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	ffice soug	ght	·	,	Office held	
	expenditure to benefit C/O	1									
											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Food/Beverage Expense Pollin y Glit/Awards/Memorials Expense Printi	Overhea g Expens ig Expen es/Wage	se s/Contract Labor		Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME		Ta	3	Filer ID
	Sch: 6/11 Rpt: 10/37	Keough, Mark J.				
4	Date	5 Payee name				
	12/01/2024	Landis, Lucile				
6	Amount (\$) \$750.00	7 Payee address; City; State; Zip 15814 Bird of Paradise Drive Conroe, TX 77301	Code			
8	PURPOSE OF EXPENDITURE	(a) Category (See Calegories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	 		le of Texas. Complete Schedule T. officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	sought			Office held
	Date	Payee name				
	10/15/2024	Landis, Lucile				
	Amount (\$) \$250.00	Payee address; City; State; Zip 15814 Bird of Paradise Drive Conroe, TX 77301	Code			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	<u>L</u>		le of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s	ought			Office held
	Date	Payee name		·		
	12/23/2024	Landis, Lucile				
	Amount (\$) \$500.00	Payee address; City; State; Zip 15814 Bird of Paradise Drive	Code		• • • • • • • • • • • • • • • • • • • •	
		Conroe, TX 77301				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	إحسا		e of Texas. Complete Schedule T. Officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s	ought			Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Advertising Expense Event Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 7/11 Rpt: 11/37 Keough, Mark J. 4 Date Payee name 08/08/2024 Madera Estates 6 Amount (\$) Payee address; City; State; Zip Code \$2,205.03 3201 N. Frazier St. Conroe, TX 77303 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraiser deposit Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 11/08/2024 Magnolia Support Group Amount (\$) Payee address; State; Zip Code City; \$500.00 P.O. Box 1578 Magnolia, TX 77353 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Support contributions Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 07/18/2024 Milano, Vickie State; Zip Code Payee address: City; Amount (\$) \$170.00 P. O. Box 7974 The Woodlands, TX 77387 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sign storage Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 8/11 Rpt: 12/37	Keough, Mark J.
4	Date	5 Payee name
	08/22/2024	Milano, Vickie
6	Amount (\$) \$170.00	7 Payee address; City; State; Zip Code P. O. Box 7974
L		The Woodlands, TX 77387
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sign storage
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	09/22/2024	Milano, Vickie
	Amount (\$) \$170.00	Payee address; City; State; Zip Code P. O. Box 7974
	;	The Woodlands, TX 77387
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder fiving expense Sign storage
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/14/2024	Milano, Vickie
	Amount (\$) \$170.00	Payee address; City; State; Zip Code P. O. Box 7974
		The Woodlands, TX 77387
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sign storage
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Travel in District Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 1 Total pages Schedule F1: 3 Filer ID Sch: 9/11 Rpt: 13/37 Keough, Mark J. 4 Date Payee name 12/06/2024 Milano, Vickie Amount (\$) Payee address; City; State; Zip Code \$170.00 P. O. Box 7974 The Woodlands, TX 77387 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sign storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/22/2024 Milano, Vickie Amount (\$) Payee address; City; State; Zip Code \$170.00 P. O. Box 7974 The Woodlands, TX 77387 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sign storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/04/2024 Montgomery County Foodbank Payee address; State; Zip Code Amount (\$) City; \$2,500.00 One Food For Life Way Conroe, TX 77385 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Christmas donation Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Glif/Awards/Memorials Expense Legal Services The Instruction Guide explair		ense ges/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above	/e)
1	Total pages Schedule F1:	2 FILER NA	ME	·		3 Filer ID	
L	Sch: 10/11 Rpt: 14/37	Keough,	Mark J.				
4		5 Payee nam					-
L	10/15/2024	ļ. <u> </u>	nery County Republican Clu	b .			
6	Amount (\$)	7 Payee add		ite; Zíp Code	Э		
	\$1,000.00	P. O. Box	c 558				
Ļ			t, TX 77362	Ta	<u> </u>		
8	PURPOSE OF		(See Categories listed at the top of this s	schedule) (I	Description Check if travel	outside of Texas, Complete Schedule T.	
	EXPENDITURE		ions/Donations Made By e/Officeholder/Political Com	nmittee	LI	, TX, officeholder living expense	
					Donation for	get out the vote	
L							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Officeholder name	Office sough	nt	Office held	
	Date	Payee nan	ne				
	08/17/2024	Montgom	ery County Republican Part	ty of Texas (GOP		
Г	Amount (\$)	Payee add	dress; City; Star	te; Zip Code	3		
	\$1,000.00	P. O. Box	(3174				
	!						
		Conroe, T	ΓX 77301				
Γ	PURPOSE		(See Categories listed at the top of this s	schedule) (k	Description		
	OF EXPENDITURE		ions/Donations Made By	:	<u> </u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
		Carididad	e/Officeholder/Political Com	millee	Lincoln Reag		
	!	1					
	Complete ONLY if direct		Officeholder name	Office sough	it	Office held	
	expenditure to benefit C/OF	Н					
	Date	Payee nam	ne				
	07/21/2024	Moxie Inn					
	Amount (\$)	Payee add	lress; City; Stat	te; Zip Code)		
	\$5,000.00	P. O. Box	2513				
	ļ]					
		Conroe, T	X 77305				
	PURPOSE	(a) Category	(See Categories listed at the top of this s	schedule) (b) Description		
	OF EXPENDITURE	i	n/Fundraising Expense		L	outside of Texas, Complete Schedule T.	
	Ind at mary to	ĺ		1	Check if Austin, Fundraiser	, TX, officeholder living expense	
		l			I Ulturulou.		
	Complete ONLY if direct	Candidate/C	Officeholder name	Office sough	ıt	Office held	
	expenditure to benefit C/OF		THOSTOMOT TRAITS	Omog 02		O11100 1.1	
	· · · · · · · · · · · · · · · · · · ·			 			, <u>,</u>

SCHEDULE F1

* _	
	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made 8 Candidate/Officeholder/Politici Credit Card Payment	
1 Total pages Schedule F1:	<u> </u>
Sch: 11/11 Rpt: 15/37	Keough, Mark J.
4 Date	5 Payee name Toyon Young Benublication Endoration
08/10/2024	Texas Young Republication Federation
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 2604 Bright Rock Lane
	Conroe, TX 77304
8 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
08/09/2024	The Woodlands Firefighters Foundation
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1544 Sawdust Road
	Suite 606
	The Woodlands, TX 77380
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
09/16/2024	Willis AG Booster Club, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	P. O. Box 1735
	Willis, TX 77378
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions (Donations Made By Contributions (Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
	Donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oł	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Advertising Expense Event Expense Office Overhead/Rental Expense Accounting/Banking Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Glft/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 3 Filer ID FILER NAME Sch: 1/19 Rpt: 16/37 Keough, Mark J. 4 Date Payee name Avenida Central 10/17/2024 6 Amount (\$) Payee address: City: State: Zip Code \$20.00 1002 Avenida De Las America Reimbursement from political contributions intended [X] Houston, TX 77010 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Event Expense **EXPENDITURE** Parking Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/28/2024 Best Buy #167 Amount (\$) Payee address; City: State: Zip Code \$35.96 1550 Lake Woodlands Reimbursement from political contributions intended \boxtimes The Woodlands, TX 77380 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense ΩE Office Overhead/Rental Expense **EXPENDITURE** Supplies Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name Best Buy #167 12/29/2024 Payee address; City; State: Zip Code Amount (\$) \$8.65 1550 Lake Woodlands Dr. Reimbursement from political contributions intended [x] The Woodlands, TX 77380 Check if travel outside of Texas. Complete Schedule T. Description **PURPOSE** Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Office supplies Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Consulting Expense i-ees Food/Beverage Expense Glft/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID Sch: 2/19 Rpt: 17/37 Keough, Mark J. Date Payee name 12/29/2024 Best Buy #167 Amount (\$) Payee address; City: State; Zip Code \$8.65 1550 Lake Woodlands Dr. Reimbursement from political contributions intended Х The Woodlands, TX 77380 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Office supplies Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 09/18/2024 Black Walnut Payee address; City: State; Zip Code Amount (\$) \$22.48 9000 New Trails Dr. Reimbursement from political contributions intended Х The Woodlands, TX 77380 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent breakfast Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/07/2024 Burger Fresh and More Amount (\$) Payee address; City; State; Zip Code \$51.55 804 Gladstell Road Suite 110 Reimbursement from political contributions intended Conroe, TX 77304 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch - budget planning Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule G: 2 FILER NAME Sch: 3/19 Rpt: 18/37 Keough, Mark J. Date Payee name 11/05/2024 Burger Fresh and More State; Zip Code 6 Amount (\$) Payee address; City; \$127,10 804 Gladstell Road, Suite 110 Reimbursement from political contributions Intended Χ Conroe, TX 77304 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff birthday lunch Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 12/16/2024 Burger Fresh and More Amount (\$) Payee address; City: State; Zip Code \$121.28 804 Gladstell Rd, Ste 110 Reimbursement from political contributions intended $|\mathbf{x}|$ Conroe, TX 77304 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if Austin, TX, officeholder living expense OF Food/Beverage Expense EXPENDITURE Staff Christmas lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 10/22/2024 Campaign Partners Amount (\$) Payee address; City; State; Zip Code \$49.00 DataEcology, LLC P. O. Box 118 Reimbursement from political contributions intended [X] Still River, MA 01467 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 4/19 Rpt: 19/37 Keough, Mark J. 4 Date Payee name 07/22/2024 Campaign Partners 6 Amount (\$) 7 Payee address; State; Zip Code \$49.00 DataEcology, LLC P. O. Box 118 Reimbursement from political contributions X Still River, MA 01467 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/22/2024 Campaign Partners Amount (\$) Payee address; State; Zip Code \$49.00 DataEcology, LLC P. O. Box 118 Reimbursement from political contributions intended X Still River, MA 01467 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/22/2024 Campaign Partners Amount (\$) Payee address; City; State; Zip Code \$49.00 DataEcology, LLC P. O. Box 118 Reimbursement from political contributions intended M Still River, MA 01467 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME 3 Filer ID Sch: 5/19 Rpt: 20/37 Keough, Mark J. 4 Date Payee name 11/22/2024 Campaign Partners 6 Amount (\$) Payee address; City; State; Zip Code \$49,00 DataEcology, LLC P. O. Box 118 Reimbursement from political contributions intended X Still River, MA 01467 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 12/22/2024 Campaign Partners Amount (\$) Payee address; State; Zip Code \$49.00 DataEcology, LLC P. O. Box 118 Reimbursement from political contributions intended X Still River, MA 01467 Check if travel outside of Texas. Complete Schedule T. Description **PURPOSE** Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 07/12/2024 Chick-fil-A Amount (\$) Payee address; City; State; Zip Code \$20.28 335 Marketplace FSR Reimbursement from political contributions intended Conroe, TX 77304 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Hurrican staff lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Loan Repayment/Reimbursement Advertising Expense Event Expense Accounting/Banking Consulting Expense Office Overhead/Rental Expense Food/Beverage Expense Glft/Awards/Memorials Expense Polling Expense Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME 3 Filer ID Sch: 6/19 Rpt: 21/37 Keough, Mark J. Date Payee name Conroe Knights of Columbus 10/26/2024 6 Amount (\$) Pavee address: State; Zip Code \$580.00 2655 FM 1488 Road Reimbursement from political contributions intended Х Conroe, TX 77384 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Support donation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 10/26/2024 Conroe Knights of Columbus Payee address: State; Zip Code Amount (\$) City: \$160.00 2655 FM 1488 Road Reimbursement from political contributions intended Conroe, TX 77384 Check If travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if Austin, TX, officeholder living expense OF Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Support donation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 10/24/2024 Conroe Knights of Columbus Payee address: City; State; Zip Code Amount (\$) \$500.00 2655 FM 1488 Road Reimbursement from political contributions intended [X]Conroe, TX 77384 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Event support Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME 3 Filer ID Sch: 7/19 Rpt: 22/37 Keough, Mark J. 4 Date Payee name 09/03/2024 Coward Creek Cookers 6 Amount (\$) Payee address; City; State; Zip Code \$800.00 21679 McClesky Road Reimbursement from political contributions intended Х New Caney, TX 77357 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee East County cookoff Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 09/18/2024 Golden China Chinese Express Payee address; City; State; Zip Code Amount (\$) \$30.95 25024 | 45 Reimbursement from political contributions intended X Spring, TX 77386 Check if travel outside of Texas. Complete Schedule T. PURPOSE Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Pavee name 07/21/2024 Herrera's Mexican Restaurant Amount (\$) Payee address; City; State; Zip Code \$42.35 9420 College Park Dr. Suite 300 Reimbursement from ÍΧ political contributions intended The Woodlands, TX 77384 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent lunch Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Advertising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorlals Expense Travel in District Travel Out of District Polling Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 8/19 Rpt: 23/37 Keough, Mark J. 4 Date Payee name 08/25/2024 Herrera's Mexican Restaurant 6 Amount (\$) Payee address; State; Zip Code \$29.89 9420 College Park Dr. Suite 300 Reimbursement from political contributions intended Х The Woodlands, TX 77384 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent lunch Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Pavee name 10/18/2024 Herrera's Mexican Restaurant Payee address; City; State; Zip Code Amount (\$) \$32,48 9420 College Park Dr. Suite 300 Reimbursement from political contributions intended The Woodlands, TX 77384 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent dinner Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 10/26/2024 Herrera's Mexican Restaurant Amount (\$) Payee address; City; State; Zip Code 9420 College Park Dr. \$34.89 Suite 300 Reimbursement from political contributions intended The Woodlands, TX 77384 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Office Overhead/Rental Expense Travel in District Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: FILER NAME 3 Filer ID Sch: 9/19 Rpt: 24/37 Keough, Mark J. 4 Date Payee name 08/01/2024 **Honor Cafe** Amount (\$) Payee address; City; State; Zip Code \$32.48 103 N. Thompson St. Reimbursement from Х political contributions intended Conroe, TX 77301 8 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Campaign planning Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/05/2024 Kroger Amount (\$) Payee address; City; State; Zip Code \$29.99 2222 I-45 Reimbursement from political contributions intended Х Conroe, TX 77301 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check If travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Birthday cake for staff lunch Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/QH Date Payee name 12/12/2024 Kroger Amount (\$) Payee address: City; State; Zip Code \$223.80 4747 Research Forest Dr. Relmbursement from political contributions intended X The Woodlands, TX 77381 PURPOSE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Employee committee contributions

expenditure to benefit

C/OH

Complete ONLY if direct Candidate/Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Relimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Event Expense Transportation Equipment & Related Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By -Polling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) Salaries/Mages/Contract Labor The Instruction Guide explains how to complete this form. FILER NAME 3 Filer ID Total pages Schedule G: Sch: 10/19 Rpt: 25/37 Keough, Mark J. 4 Date Payee name 10/22/2024 Kuntry Katfish 6 Amount (\$) Payee address; City; State; Zip Code \$82.32 5901 W. Davis Reimbursement from political contributions intended X Conroe, TX 77304 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/13/2024 La Palma Taqueria Amount (\$) Payee address; City; State; Zip Code \$24.52 309 W. Avenue G Reimbursement from political contributions intended \overline{X} Conroe, TX 77301 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Description Category (See Categories listed at the top of this schedule) OF Check If Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Hurrican staff lunch Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit COH Date Pavee name 07/23/2024 La Palma Taqueria Amount (\$) Payee address; City; State; Zip Code \$20.33 309 W. Avenue G Reimbursement from political contributions intended X Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Event Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorlals Expense Polling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID Total pages Schedule G: Sch: 11/19 Rpt: 26/37 Keough, Mark J. 4 Date Payee name 09/03/2024 La Palma Taqueria Payee address; City; State; Zip Code 6 Amount (\$) \$126.94 309 W. Avenue G Reimbursement from political contributions intended X Conroe, TX 77301 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** OEM/First responders lunch Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/12/2024 La Palma Taqueria Amount (\$) Payee address; City; State; Zip Code \$26.01 309 W. Avenue G Reimbursement from political contributions intended Χ Conroe, TX 77301 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Description Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Pavee name 08/06/2024 La Palma Taqueria City; Amount (\$) Payee address; State; Zip Code \$21.32 309 W. Avenue G Reimbursement from political contributions intended ΙXΙ Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. PURPOSE Description Category (See Categories listed at the top of this schedule) OF Check If Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By-Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Credit Card Payment Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME 3 Filer ID Sch: 12/19 Rpt: 27/37 Keough, Mark J. Date Payee name 11/13/2024 La Palma Tagueria 6 Amount (\$) Payee address; State; Zip Code \$23.92 309 W. Avenue G Reimbursement from political contributions intended Х Conroe, TX 77301 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Officers lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/19/2024 La Palma Tagueria Amount (\$) Payee address; State; Zip Code \$23.32 309 W. Avenue G Reimbursement from political contributions intended Х Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Office held Candidate/Officeholder name Complete ONLY if direct Office sought expenditure to benefit C/OH Date Pavee name 12/03/2024 Magnolia Republican Club Amount (\$) Payee address; City; State; Zip Code \$1,000.00 18640 FM 2488 #A294 Reimbursement from political contributions intended lΣl Magnolia, TX 77354 Check if travel outside of Texas. Complete Schedule T. Description PURPOSE Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Sponsorship Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Event Expense Advertising Expense Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule G: FILER NAME Sch: 13/19 Rpt: 28/37 Keough, Mark J. Date Payee name 09/24/2024 Magnolia Support Group Payee address; City: State: Zip Code 6 Amount (\$) \$500.00 P. O. Box 1578 Reimbursement from political contributions Intended Х Magnolia, TX 77353 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) ΩE Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Support donation Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/22/2024 Montgomery County Community Foundation State: Zip Code Payee address; City: Amount (\$) \$1,400.00 2001 Timberloch Place Suite 500BB Reimbursement from political contributions intended Х The Woodlands, TX 77380 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense OF Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Montgomery County Republican Party 09/06/2024 Payee address; State; Zip Code City; Amount (\$) \$300.00 310 Metcalf Reimbursement from political contributions intended X Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Sponsorship Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Glft/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 14/19 Rpt: 29/37 Keough, Mark J. Date Payee name 10/27/2024 New Golden Chopsticks 6 Amount (\$) 7 Payee address; State; Zip Code \$32.62 9420 College Park Drive Reimbursement from political contributions intended X The Woodlands, TX 77384 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent lunch Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 11/11/2024 New Golden Chopsticks Amount (\$) Payee address; State; Zip Code \$27.62 9420 College Park Drive Reimbursement from political contributions intended Х The Woodlands, TX 77384 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituent lunch Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 12/12/2024 Pachyderm Club Amount (\$) Payee address; City; State; Zip Code \$120.00 19099 |-45 Reimbursement from political contributions intended [x[Shenandoah, TX 77385 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Christmas event Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Event Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel In District Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule G: 2 FILER NAME Sch: 15/19 Rpt: 30/37 Keough, Mark J. 4 Date Payee name 07/19/2024 Saltgrass Steakhouse State; Zip Code 6 Amount (\$) Payee address; \$589,97 810 I-45 North Reimbursement from political contributions Intended X Conroe, TX 77301 **PURPOSE** (b) Description Check if travel outside of Texas, Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense OF Food/Beverage Expense **EXPENDITURE** Emergency Management team luncheon Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 11/14/2024 Saltgrass Steakhouse Amount (\$) Payee address; City; State: Zip Code \$43.04 810 I-45 North Reimbursement from political contributions intended Х Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Banking Accounting consultation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit CIOH Date Payee name 10/31/2024 Shipley's Amount (\$) Payee address; City; State; Zip Code \$13.99 518 E. Davis Reimbursement from political contributions intended LX Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) **OF** Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff breakfast Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 16/19 Rpt: 31/37 Keough, Mark J. 4 Date Payee name 09/15/2024 Starbucks Store #14052 6 Amount (\$) Payee address; City; State; Zip Code \$20.67 15330 Hwy 105 W Reimbursement from X political contributions intended Montgomery, TX 77356 (b) Description 8 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check If Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Boat attendants' coffee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/20/2024 The Federal Grill Payee address: Amount (\$) City; State; Zip Code \$134.20 27700 I-45 N Reimbursement from \square political contributions intended Oak Ridge, TX 77385 **PURPOSE** Category (See Categories listed at the top of this schedule)

OF EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense Consultation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
09/16/2024	The Roaring Fork	
Amount (\$)	Payee address; City; State; Zip C	ode
\$96.73	701 Congress	
Reimbursement from political contributions Intended	Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch with attorneys
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Fees Food/Beverage Expense Glft/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 17/19 Rpt: 32/37 Keough, Mark J. 4 Date Payee name 07/18/2024 The Toasted Yolk Cafe 6 Amount (\$) Payee address; City; State; Zip Code \$58,96 2129 W. Davis Street Suite C Reimbursement from political contributions Intended X Conroe, TX 77304 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 07/23/2024 The Toasted Yolk Cafe Amount (\$) Payee address; City; State; Zip Code \$75.83 2129 W. Davis Street Suite C Reimbursement from political contributions intended Х Conroe, TX 77304 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Pavee name 08/28/2024 The Toasted Yolk Cafe State; Zip Code Amount (\$) Payee address; City; \$43,20 2129 W. Davis Street Reimbursement from political contributions intended Suite C [x] Conroe, TX 77304 Check if travel outside of Texas. Complete Schedule T. PURPOSE Description Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Constituet lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought

expenditure to benefit

C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Glft/Awards/Memorlals Expense Polling Expense Printing Expense Travel in District Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 18/19 Rpt: 33/37 Keough, Mark J. 4 Date Payee name 12/06/2024 The Toasted Yolk Cafe Amount (\$) 7 Payee address; State; Zip Code \$52.82 2129 W. Davis Street Suite C Reimbursement from political contributions intended X Conroe, TX 77304 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Lunch with campaign treasurer Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 09/19/2024 Tommy Bahamas Amount (\$) Payee address; City; State; Zip Code \$62.51 9595 Six Pines Dr., Suite 700 Reimbursement from political contributions intended X The Woodlands, TX 77380 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check If Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Lunch with business constituent Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 08/29/2024 Whataburger Amount (\$) Payee address; City; State; Zip Code \$18.94 316 Sawdust Road Reimbursement from political contributions intended M Spring, TX 77380 Check if travel outside of Texas. Complete Schedule T. Description **PURPOSE** Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Staff lunch Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Denations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME 3 Filer ID Sch: 19/19 Rpt: 34/37 Keough, Mark J. 4 Date Payee name 10/02/2024 Will Metcalf Campaign 6 Amount (\$) Payee address; State; Zip Code \$1,000.00 P. O. Box 454 Reimbursement from political contributions Intended X Conroe, TX 77305 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Campaign donation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 09/13/2024 Woodlands Marriott Amount (\$) Payee address; City; State; Zip Code \$25.01 1601 Lake Robbins Reimbursement from political contributions intended Х The Woodlands, TX 77380 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Event Expense **EXPENDITURE** Parking Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Pavee name 09/26/2024 Yes to Youth Gala Amount (\$) Payee address; City; State; Zip Code \$1,000.00 8701 New Trails Dr., Suite 118 Reimbursement from political contributions intended X The Woodlands, TX 77381 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Support donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE |

The Instruction Guide explains how to complete this form.	
2 FILER NAME Keough, Mark J.	3 Filer ID
5 Payee name Keough, Mark	
7 Payee Address; City; State; Zip 26 Woodmere Place The Woodlands, TX 77381	
(a) Category (See Instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See Instructions regarding type of information required.) Partial loan repayment
Payee name	
Keough, Mark	
Payee Address; City; State; Zip	
26 Woodmere Place	
The Woodlands, TX 77381	
(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See Instructions regarding type of information required.) Loan repayment
	2 FILER NAME Keough, Mark J. 5 Payee name Keough, Mark 7 Payee Address; City; State; Zip 26 Woodmere Place The Woodlands, TX 77381 (a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement Payee name Keough, Mark Payee Address; City; State; Zip 26 Woodmere Place The Woodlands, TX 77381 (a) Category (See instructions for examples of acceptable categories)

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K CONTRIBUTIONS RETURNED TO FILER 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/2 Rpt: 36/37 2 FILER NAME 3 Filer ID Keough, Mark J. 8 Amount (\$) 4 Date 5 Name of person from whom amount is received 11/20/2024 \$10.18 Woodforest Bank 6 Address of person from whom amount is received; City; State; Zip Code 1599 Lake Robbins, Ste. 100 The Woodlands, TX 77380 Purpose for which amount is received Check if political contribution returned to filer Interest on checking account Amount (\$) Date Name of person from whom amount is received \$10.55 10/20/2024 Woodforest Bank Address of person from whom amount is received; City; State; Zip Code 1599 Lake Robbins, Ste. 100 The Woodlands, TX 77380 Purpose for which amount is received Check if political contribution returned to filer Interest on checking account Amount (\$) Name of person from whom amount is received Date \$11.19 09/20/2024 Woodforest Bank Address of person from whom amount is received; City; State; Zip Code 1599 Lake Robbins, Ste. 100 The Woodlands, TX 77380 Check if political contribution returned to filer Purpose for which amount is received Interest on checking account Amount (\$) Date Name of person from whom amount is received \$12.26 08/20/2024 Woodforest Bank Address of person from whom amount is received; City; State; Zip Code 1599 Lake Robbins, Ste. 100 The Woodlands, TX 77380 Check if political contribution returned to filer Purpose for which amount is received Interest on checking account Amount (\$) Date Name of person from whom amount is received \$12,05 07/20/2024 Woodforest Bank Address of person from whom amount is received; City; State; Zip Code 1599 Lake Robbins, Ste. 100 The Woodlands, TX 77380 Check if political contribution returned to filer Purpose for which amount is received Interest on checking account www.ethics.state.tx.us

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 37/37 2 FILER NAME 3 Filer ID Keough, Mark J. 8 Amount (\$) 4 Date 5 Name of person from whom amount is received \$9.23 12/20/2024 Woodforest Bank 6 Address of person from whom amount is received; City; State; Zip Code 1599 Lake Robbins, Ste. 100 The Woodlands, TX 77380 Purpose for which amount is received Check if political contribution returned to filer Interest on checking account Amount (\$) Date Name of person from whom amount is received \$0.04 12/27/2024 Woodforest Bank Address of person from whom amount is received; City; State; Zip Code 1599 Lake Robbins, Ste. 100 The Woodlands, TX 77380 Purpose for which amount is received Check if political contribution returned to filer Interest on checking account