		I FINANCE REP				COVER SHEET PG 1
Th	e C/OH Instruction (Guide explains how to comp	lete this form.	1 Filer ID		2 Total pages filed: 68
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Brett		MI	OFFICE USE ONLY Date rather MECLIVED
		NICKNAME	LAST Ligon		SUFFIX	JAN 15 2025 PAR 68 Pgs
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT PO Box 805	「/SUITE#; CIT	Y;	ZIP CODE	Date Hand delivered or Date Postmarked Receipt # Amount
	Change of Address	Montgomery, TX 77356				Date Imaged
		·				Date imaged
5	CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST Shannon		MI	
		NICKNAME	LAST		SUFFIX	
			Ligon		331111	
6	CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO) BOX PLEASE);	AP-	r / SUITE #;	STATE; ZIP CODE
	(Residence or Business)	Montgomery, TX 77356				
7	CAMPAIGN TREASURER PHONE	AREA CODE PHO	NE NUMBER E	XTENSION		
8	REPORT TYPE	X January 15	30th day before		Runoff	15th day after campaign treasurer appointment (officeholder only)
		July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9	PERIOD COVERED	Month Day Year 07/01/2024	TH	ROUGH	Month Day 12/31/202	Year 4
10	ELECTION	ELECTION DATE Month Day Year		imary eneral	ELECTION TYPE Runoff Special	Other
11	OFFICE	OFFICE HELD (if any) Montgomery County Distr	ict Attorney		12 OFFICE SOUGHT Montgomery Co	(if known) unty District Attorney
	GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

			2 of 68	
13 C / OH NAME	Ligon, Brett	14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures made by political co These expenditures may have been made without the candidate's or office d officeholders are required to report this information only if they receive not	holder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
 1	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00	
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 84,264.40	
EXPENDITURE TOTALS				
·	4. TOTAL POLITIC	AL EXPENDITURES	\$ 79,158.21	
CONTRIBUTION BALANCE	5. TOTAL POLITIC, REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE RIOD	\$ 124,727.76	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY TING PERIOD	\$ 0.00	
17 AFFIDAVIT		I swear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code.		
	MELISA G. APPLETO NOTARY PUBLIC, STATE OF TO Notary ID #619299 Expires June 28, 20 TARY STAMP / SEAL ABO	Signature of Candidate or Officehold		
	cribed before me, by the sa	aid Brett W Liga , this the 15th entify which, witness my hand and seal of office.	day day	
Signatule of office	cer administering	Printed name of officer administering NO Tavy Pv	WIIC administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			Ç.	OVER SI	1EE1 PG 3 3 of 68
	ER NA/ on, Bre	·-	19 Filer ID		
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE				OTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	84,264.40
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	49,919.35
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$,
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	·	\$	25,184,51
9.	х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	·	\$	4,054.35
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	DF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/17 Rpt: 4/68	
2	FILER NAME Ligon, Brett		3	Filer ID	
4	Date 10/05/2024	5 Full name of contributor out-of-state PAC (ID#:) Alsbrooks, Emily & Nathan 6 Contributor address; City; State; Zip Code 2152 Moss Creek Ln	7	Amount of Contribution (\$)	\$500,00
		Conroe, TX 77304			
8	Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions))		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:) Appleton, Melisa Contributor address; City; State; Zip Code 704 Sunset Point Ct Montgomery, TX 77316		Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 09/1.1/2024	Full name of contributor out-of-state PAC (ID#:) Armbruster, Bob Contributor address; City; State; Zip Code 3402 Ripplewind Ct		Amount of Contribution (\$)	\$1.25.00
		Montgomery, TX 77356			
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 11/01/2024	Full name of contributor cut-of-state PAC (ID#:) Atkinson, Doug Contributor address; City; State; Zip Code 19194 Laketree Dr. Montgomery, TX 77356		Amount of Contribution (\$)	\$5,000.00
	Principal occu Attorney	pation / Job title (See Instructions) Employer (See Instructions) Self)		
	Date 10/05/2024	Full name of contributor out-of-state PAC (ID#:) Bass, Diane Contributor address; City; State; Zip Code 202 W Northcastle Circle Conroe, TX 77384		Amount of Contribution (\$)	\$125,00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	· · ·			<u> </u>	·· <u>·</u>

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 2/17 Rpt: 5/68	
2	FILER NAME Ligon, Brett			3 Filer ID	
4	Date 09/11/2024	 5 Full name of contributor	·	7 Amount of Contribution (\$)	\$100.00
8	Principal occu	Conroe, TX 77304 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	· morpar ooo	pade/// ess tide (ess libitations)	2 Improyor (ede instruction)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_Bond, Eric Contributor address; City; State; Zip Code 200 West Davis Street Conroe, TX 77301)	Amount of Contribution (\$)	\$5,000.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions) Self		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#:_ Bowers, Mary Contributor address; City; State; Zip Code 1809 Hard Rd Conroe, TX 77304		Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ Brown, Kyle Contributor address; City; State; Zip Code 38 Thornblade Circle Spring, TX 77389)	Amount of Contribution (\$)	\$5,000.00
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions) Chicago Title		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ Brown, Scott Contributor address; City; State; Zip Code 2906 Lacewood Ct Pearland, TX 77584		Amount of Contribution (\$)	\$300,00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
<u></u>		<u> </u>		<u> </u>	

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this form.		Total pages Schedule A1: Sch: 3/17 Rpt: 6/68	
2	FILER NAME Ligon, Brett		3	Filer ID	
4	Date 09/27/2024	5 Full name of contributor out-of-state PAC (ID#:) Buckalew, Donnie 6 Contributor address; City; State; Zip Code PO Box 500	7	Amount of Contribution (\$)	\$500,00
		conroe, TX 77305			
8	Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions))		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:) Buckholtz, Jon Contributor address; City; State; Zip Code 9500 W Northridge Dr Conroe, TX 77303		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 10/14/2024	Full name of contributor out-of-state PAC (ID#:) Butler, Carrie Contributor address; City; State; Zip Code 204 Dawns Edge Dr.		Amount of Contribution (\$)	\$250.00
	Principal occu	Montgomery, TX 77356 pation / Job title (See Instructions) Employer (See Instructions)			
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:) Chambers, Kent Contributor address; City; State; Zip Code 542 Diggs Rd	,	Amount of Contribution (\$)	\$75.00
	Principal occu	Willis, TX 77378 eation / Job title (See Instructions) Employer (See Instructions)			
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:) Chambers, Kent Contributor address; City; State; Zip Code 542 Diggs Rd Willis, TX 77378		Amount of Contribution (\$)	\$75.00
	Principal occu	eation / Job title (See Instructions) Employer (See Instructions)		·	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 4/17 Rpt: 7/68	
2	FILER NAME Ligon, Brett			3 Filer ID	
4	Date 10/22/2024	 Full name of contributor out-of-state PAC (ID#:_ Charlie Riley Campaign Contributor address; City; State; Zip Code 31803 COTTONWOOD LN Magnolia, TX 77355 	,	7 Amount of Contribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 10/31/2024	Full name of contributor		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Coconu, Mariana Contributor address; City; State; Zip Code 93 n concord forest cir		Amount of Contribution (\$)	\$206.46
	Principal occu	Spring, TX 77381 pation / Job title (See Instructions)	Employer (See Instructions))	
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Constable Chris Jones Contributor address; City; State; Zip Code 22619 Baneberry Road Magnolia, TX 77355)	Amount of Contribution (\$)	\$2,250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#:_ Constable Chris Jones Contributor address; City; State; Zip Code 22619 Baneberry Road Magnolia, TX 77355		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
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	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 5/17 Rpt: 8/68	
2	FILER NAME Ligon, Brett		3	Filer ID	
4	Date 11/01/2024	Full name of contributor	7	Amount of Contribution (\$)	\$1,250.00
		6 Contributor address; City; State; Zip Code 6107 Canyon Creek Ln			
_	B. S. S. S.	Conroe, TX 77304	Ļ		
8	Attorney	pation / Job title (See Instructions) 9)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#:) Daniels, Joel Contributor address; City; State; Zip Code 34 Harbor Cove Dr Spring, TX 77381		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 08/27/2024	Full name of contributor out-of-state PAC (ID#:) Davenport, Stephanne Contributor address; City; State; Zip Code 336 1/2 N. Main Street Suite 214 Conroe, TX 77301		Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 08/27/2024	Full name of contributor out-of-state PAC (ID#:) Davenport, Stephanne Contributor address; City; State; Zip Code 336 1/2 N. Main Street Suite 214 Conroe, TX 77301		Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 10/05/2024	Full name of contributor out-of-state PAC (ID#:) Del Papa, Omero		Amount of Contribution (\$)	\$2,500.00
		Contributor address; City; State; Zip Code 6 Clyny Ct			
	Dula de al access	The Woodlands, TX 77382	L		
	Owner	pation / Job title (See Instructions) Employer (See Instructions) Del Papa Distributing)		

	MONET	TARY POLITICAL CONTRIBUTIO	ONS		SCHEDUI	E A 1
	The Instru	ction Guide explains how to complete this f	orm.	1.	Total pages Schedule A1: Sch: 6/17 Rpt: 9/68	
2	FILER NAME Ligon, Brett			3	Filer ID	
4	Date 10/22/2024	 Full name of contributor out-of-state PAC (ID#:_Dishongh, Jeremy Contributor address; City; State; Zip Code 322 N Main St Conroe, TX 77301 		7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ Doane, Gracey Contributor address; City; State; Zip Code 25139 Weeren Rd Montgomery, TX 77316			Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/13/2024	Full name of contributor out-of-state PAC (ID#:_ Dorsett, Margaret Contributor address; City; State; Zip Code 530 Diggs Rd			Amount of Contribution (\$)	\$75.00
	Principal occu	Willis, TX 77378 pation / Job title (See Instructions)	Employer (See Instructions)		
-	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#:_Faulkner, Darla Contributor address; City; State; Zip Code 612 Elkins Lake Huntsville, TX 77340			Amount of Contribution (\$)	\$250,00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_Foley, Brian Contributor address; City; State; Zip Code 412 W Phillips St Suite 125 Conroe, TX 77301)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
			<u>,</u>		· · · · · · · · · · · · · · · · · · ·	

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 7/17 Rpt: 10/68	
2	FILER NAME Ligon, Brett		3	Filer ID	
4	Date 09/27/2024	 5 Full name of contributor out-of-state PAC (ID#: Gable, Ryan 6 Contributor address; City; State; Zip Code 2307 Keegan Hollow Ln Spring, TX 77386 		Amount of Contribution (\$)	\$500.00
8	Principal occu		er (See Instructions)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions) Employ	er (See Instructions)		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: Gordon, Robert Joel Contributor address; City; State; Zip Code 174 Harley Drive		Amount of Contribution (\$)	\$75.00
	Principal occu	Montgomery, TX 77356 pation / Job title (See Instructions) Employ	er (See Instructions)	· ···	
	Date 10/15/2024	Full name of contributor		Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions) Employ	er (See Instructions)		
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#: Gray, Matt Contributor address; City; State; Zip Code Po Box 1469 Porter, TX 77365)	Amount of Contribution (\$)	\$500.00
•	Principal occu		er (See Instructions)		
	···	" ··			

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 8/17 Rpt: 11/68	
2	FILER NAME Ligon, Brett		3	Filer ID	
4	Date 11/01/2024	5 Full name of contributor out-of-state PAC (ID#: Green, Bill 6 Contributor address; City; State; Zip Code 13971 Milmac Conroe, TX 77303	7	Amount of Contribution (\$)	\$850.00
8	Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruct	ions)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:) Griffin, BD Contributor address; City; State; Zip Code P.O. Box 1361 Conroe, TX 77305	*****	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	ons)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:) Gurley, Christine Contributor address; City; State; Zip Code 49 Fairfield Drive		Amount of Contribution (\$)	\$75.00
	Principal occu	Montgomery, TX 77356 cation / Job title (See Instructions) Employer (See Instructions)	ons)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:) HPOU PAC Contributor address; City; State; Zip Code 1600 State Street Houston, TX 77007		Amount of Contribution (\$)	\$2,500.00
	Principal occuj	pation / Job title (See Instructions) Employer (See Instructi	ons)		
	Date 10/05/2024	Full name of contributor out-of-state PAC (ID#:) Hansen, Donna Contributor address; City; State; Zip Code 2033 Doolan Dr. Conroe, TX 77301		Amount of Contribution (\$)	\$250.00
	Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ons)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/17 Rpt: 12/68	
2	FILER NAME Ligon, Brett			3	Filer ID	
4	Date 10/02/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Conroe, TX 77304 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/24/2024	Full name of contributor out-of-state PAC (ID#: Holley, Mike Contributor address; City; State; Zip Code 300 Town Park Dr.)		Amount of Contribution (\$)	\$75.00
		Apt. 2103 Conroe, TX 77304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#: Hutson, Echo Contributor address; City; State; Zip Code 3500 Woods Estates Drive			Amount of Contribution (\$)	\$250.00
		Conroe, TX 77304				
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#: Inman, Dale Contributor address; City; State; Zip Code 411 S Rivershire Dr Conroe, TX 77304)		Amount of Contribution (\$)	\$250,00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		*****
					· · ·	

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Sch: 10/17	Schedule A1: Rpt: 13/68	
2	FILER NAME Ligon, Brett			3 Filer ID		•
4	Date 09/01/2024	 5 Full name of contributor)	7 Amount of C	ontribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/10/2024	Full name of contributor		Amount of C	ontribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/26/2024	Full name of contributor out-of-state PAC (ID#:_ Kolski, Andrea Contributor address; City; State; Zip Code 215 Simonton Conroe, TX 77301		Amount of C	ontribution (\$)	\$1,250.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:_LCARW Contributor address; City; State; Zip Code PO Box 737 Montgomery, TX 77345)	Amount of C	ontribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Laningham, Robert Contributor address; City; State; Zip Code 4015 I-45 North Ste. 220 Conroe, TX 77304		Amount of C	ontribution (\$)	\$7,500.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions) Self)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this	form.	-	ges Schedule A1: L/17 Rpt: 14/68	
2	FILER NAME Ligon, Brett			3 Filer ID		
4	Date 10/03/2024	 5 Full name of contributor out-of-state PAC (ID#: Lewis, Chip 6 Contributor address; City; State; Zip Code 1207 S. Shepherd Dr. Houston, TX 77019 	·	7 Amount	of Contribution (\$)	\$1,500,00
8	Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Self)		·
	Date 09/27/2024 Principal occu	Full name of contributor out-of-state PAC (ID#: Linebarger Goggan Blair & Sampson LLP Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760 pation / Job title (See Instructions)	Amount	of Contribution (\$)	\$250.00	
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#: MCLEA Contributor address; City; State; Zip Code PO Box 8793 The Woodlands, TX 77387		Amount	of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 1.0/05/2024	Full name of contributor out-of-state PAC (ID#: Mark Keough Campaign Contributor address; City; State; Zip Code 26 Woodmere PI The Woodlands, TX 77381		Amount	of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/20/2024	Full name of contributor out-of-state PAC (ID#: Marler, David Contributor address; City; State; Zip Code 326 Creekside Dr Magnolia, TX 77354		Amount	of Contribution (\$)	\$250,00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHE	DULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule . Sch: 12/17 Rpt: 15/6	
2	FILER NAME Ligon, Brett			3 Filer ID	
	Date 10/08/2024	 Full name of contributor out-of-state PAC (ID#:_Marticiuc, Hans Contributor address; City; State; Zip Code PO BOX 130286 Houston, TX 77219 		7 Amount of Contribution	\$250.00 \$250.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	Date 10/21/2024	Full name of contributor		Amount of Contribution	\$75.00
•	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	>)	
	Date 09/11/2024	Full name of contributor		Amount of Contribution	\$100.00 \$100.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions)	
	Date 09/11/2024	Full name of contributor out-of-state PAC (ID#:_Onishi, Lonny Contributor address; City; State; Zip Code 10139 Wayward Wind Ln Houston, TX 77064		Amount of Contribution	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
		· · · · · · · · · · · · · · · · · · ·			

	MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/17 Rpt: 16/68	
2	FILER NAME Ligon, Brett			3 Filer ID	
4	Date 09/11/2024	 Full name of contributor out-of-state PAC (ID#:_Parada, Judy & Charlie Contributor address; City; State; Zip Code 18754 Grand Harbor Point Montgomery, TX 77356 	·	7 Amount of Contribution (\$)	\$250.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 09/27/2024	Full name of contributor)	Amount of Contribution (\$)	\$5,000.00
	Principal occu GM	pation / Job title (See Instructions)	Employer (See Instructions Elite Hospitality)	·
•	Date 12/26/2024	Full name of contributor out-of-state PAC (ID#:_ Rand Henderson Campaign Contributor address; City; State; Zip Code PO Box 1678)	Amount of Contribution (\$)	\$5,000.00
	Principal occu	Conroe, TX 77305 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/05/2024	Full name of contributor out-of-state PAC (ID#:_ Roberson, Evan Contributor address; City; State; Zip Code 162 Remington Rd Huntsville, TX 77340)	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 09/11/2024	Full name of contributor		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	-

	MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDUL	E A1.
	The Instru	ction Guide explains how to complete thi	s form.	1 Total pages Schedule A1: Sch: 14/17 Rpt: 17/68	
2	FILER NAME Ligon, Brett			3 Filer ID	·
4	Date 10/22/2024	 5 Full name of contributor out-of-state PAC (IE Sadler, Alan 6 Contributor address; City; State; Zip Code 2570 Sain Beulah Chapel Rd Montgomery, TX 77316 		7 Amount of Contribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 11/25/2024	Full name of contributor out-of-state PAC (It Saefke, Penny Contributor address; City; State; Zip Code 5003 Rimrock Pass Montgomery, TX 77316	/	Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 10/22/2024	Full name of contributor out-of-state PAC (IE Schumate, Chris Contributor address; City; State; Zip Code 6 Langham Court Shenandoah, TX 77381		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> s)	
•	Date 09/27/2024	Full name of contributor out-of-state PAC (IE Spjut, Swen Contributor address; City; State; Zip Code 15627 Connie Ln Montgomery, TX 77316		Amount of Contribution (\$)	\$125.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 09/09/2024	Full name of contributor) #:)	Amount of Contribution (\$)	\$250.00
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
•			•		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm,	1	Total pages Schedule A1: Sch: 15/17 Rpt: 18/68	
2	FILER NAME Ligon, Brett			3	Filer ID	,
4	Date 10/03/2024	 5 Full name of contributor)	7	Amount of Contribution (\$)	\$75.00
8	Principal occu	Montgomery, TX 77316 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/03/2024	Full name of contributor out-of-state PAC (ID#:_Steinmann, Brandon Contributor address; City; State; Zip Code 135 Caledonia Cir Montgomery, TX 77316)		Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ Texienne Physicians Medical Assoc, PLLC Contributor address; City; State; Zip Code 9303 Pinecroft Dr. Suite 280 Spring, TX 77380)		Amount of Contribution (\$)	\$7,500.00
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#: The Bays Firm Contributor address; City; State; Zip Code 1503 Hailey Conroe, TX 77301			Amount of Contribution (\$)	\$250.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/27/2024	Fuli name of contributor out-of-state PAC (ID#: The Blair Law Firm Contributor address; City; State; Zip Code 7 Grogan's Park Drive Building #3 The Woodlands, TX 77380)		Amount of Contribution (\$)	\$250,00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
				-	<u> </u>	

	MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 16/17 Rpt: 19/68	
2	FILER NAME Ligon, Brett			3 Filer ID	
4	Date 10/05/2024	5 Full name of contributor out-of-state PAC (ID#:_ The Green Family 6 Contributor address; City; State; Zip Code 13971 Millmac Rd Conroe, TX 77303	·	7 Amount of Contribution (\$)	\$125.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$2,500.00
	Principal occu Managemen	pation / Job title (See Instructions) t	Employer (See Instructions) Consolidated Communic		
	Date 10/05/2024	Full name of contributor out-of-state PAC (ID#: VanBuren, William Contributor address; City; State; Zip Code 300 Main Street Suite 200 Houston, TX 77002		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
, -·	Date 09/11/2024	Full name of contributor out-of-state PAC (ID#:_ Ward, Dennis Contributor address; City; State; Zip Code 17836 FM 39 Rd Bedias, TX 77831		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
	Date 1.0/22/2024	Full name of contributor out-of-state PAC (ID#:_ Wayne Mack Campaign Contributor address; City; State; Zip Code PO Box 2234 Conroe, TX 77301		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
		·			

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDU	SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: Sch: 17/17 Rpt: 20/68			
2	FILER NAME			3 Filer ID			
	Ligon, Brett						
4	Date	5 Full name of contributor ut-of-state PAC (ID#:)	7 Amount of Contribution (\$)			
	10/22/2024	Will Metcalf Campaign			\$1,000.00		
		6 Contributor address; City; State; Zip Code					
		PO Box 454					
		Conroe, TX 77305	·				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)			
	10/29/2024	Windham, Vanessa			\$257.94		
		Contributor address; City; State; Zip Code					
		20910 Meadow Belle Court					
		Humble, TX 77346					
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	g		
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)			
	1.1/25/2024	Woodall, Dorothy			\$75.00		
		Contributor address; City; State; Zip Code					
		65 Fairfield Dr					
		Montgomery, TX 77358					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))			
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)	 		
	09/03/2024	Wright, Jay			\$75.00		
		Contributor address; City; State; Zip Code					
		793 Angelina Court					
		Conroe, TX 77302					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))			
	Date	Full name of contributor ut-of-state PAC (ID#:		Amount of Contribution (\$)			
	09/03/2024	Wright, Jay			\$75,00		
		Contributor address; City; State; Zip Code					
		793 Angelina Court					
		Conroe, TX 77302					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
_							
		•					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solloitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Gift/Awards/Memoria Legal Services The Instruction (·		Wages	Contract Labor	Travel Out of District OTHER (enter a category not listed a	above)
1	Total pages Schedule F1:	72	FILER NAME			- 1 - 1 - 1 - 1			3 Filer ID	
_	Sch: 1/11 Rpt: 21/68	"							3 MIELID	
	2011: 1/11 Kht; 21/00	L	Ligon, Brett							
4	Date	5	Payee name							
:	11/04/2024		Amazon.cor	n						
6	Amount (\$)	7	Payee addres	ss; City;	State	e; Zip Co	ode	· · · · · · · · · · · · · · · · · · ·		
	\$139.41	ŀ	410 Terry A	ve N						
			•							
			Seattle, WA	09100						
_		<u> </u>						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
8	PURPOSE OF	(a)		e Categories listed at	the top of this so	chedule)	(b)	Description		
	EXPENDITURE		Event Exper	nse				<u> </u>	utside of Texas, Complete Schedule T. TX, officeholder living expense	
		l							ent Decorations	
								Campaign Ev	one Becordions	
^	Computate ONII V if allowed	Ц	2 - - - C	-6-ld		06			O#6 b-bd	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	enolder name		Office sou	ignt		Office held	
	Date	•	Payee name							
	11/04/2024		Amazon.com	n						
	Amount (\$)		Payee addres	s; City;	State	e; Zip Co	ode			
	\$125.95		410 Terry Av	ve N						
			•							
			Seattle, WA	02100						
		<u> </u>		***					<u></u>	
	PURPOSE OF	(a)		e Categories listed at		hedule)	(p)	Description		
	EXPENDITURE		Office Overh	iead/Rental Ex	(pense			 !	utside of Texas. Complete Schedule T. TX, officeholder living expense	
								Campaign Off		
							ŀ	campaign on	ice cappiles	
	Commists ONLY if divert	<u>_</u>	Samulial ata (Offic			Offi		.	Office heald	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	enolder name		Office sou	ignt		Office held	
							·			
	Date		Payee name							
	07/30/2024		American Ex	press						
	Amount (\$)		Payee addres	s; City;	State	e; Zip Co	ode	<u> </u>		
	\$4,577.81		PO Box 650			·				
	,									
			Dallas TV 7	EOGE						
			Dallas, TX 7	5265					· · · · · · · · · · · · · · · · · · ·	
	PURPOSE OF	(a)		e Categories listed at	the top of this sc	hedule)	(b)	Description		
	EXPENDITURE		Credit Card	Payment				\Box	utside of Texas. Complete Schedule T.	
									TX, officeholder living expense	
								Campaign Cre	edit Card Payments	
		<u> </u>					<u> </u>			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	enolder name		Office sou	ight		Office held	
	exhauditatio fo heliciit AAL									
										<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide exp	Salaries/V	Nages/	Contract Labor	OTHER (enter a category no	ot listed above)
1	Total pages Schedule F1:	2 FILER NAM	F	.,		Is	3 Filer ID	
	Sch: 2/11 Rpt: 22/68	Ligon, Bret						
4	Date	5 Payee name	<u></u>					
	08/20/2024	American E						
6	Amount (\$) \$1,457.89	Payee addre	50448	State; Zip Co	ode			
8	PURPOSE	(a) Category &	See Categories listed at the top of the	this echadula)	(b)	Description		
	OF EXPENDITURE	Credit Card		ilis scrieuciej	[Check if travel ou Check if Austin, 1	utside of Texas. Complete Sched FX, officeholder living expense edit Card Payments	ule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ight		Office held	
Γ	Date	Payee name	,					
	09/11/2024	American E						
	Amount (\$)	Payee addre	•	State; Zip Co	de			
	\$4,668.12	PO Box 656	0448					
	PURPOSE	Dallas, TX			/ ₆ \			
	OF :		See Categories listed at the top of th	his schedule)	(ii)	Description Check if travel ou	itside of Texas, Complete Sched	uto T
	EXPENDITURE	Credit Card	l Paymenτ			ll	rx, officeholder living expense	ure i.
		l			7		dit Card Payments	
		l	•				•	
	Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office sou	ght		Office held	
	Date	Payee name						
	11/13/2024	American E	Express					
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	de			
	\$4,391.43	PO Box 650	0448					
		Dallas, TX					***	
	PURPOSE OF		See Categories listed at the top of the	his schedule)	(b) I	Description	CONTRACT STREET	
	EXPENDITURE	Credit Card	l Payment				itslde of Texas. Complete Sched FX, officeholder living expense	ule T.
		İ			L		dit Card Payments	
						Oupu.g 2. 2	an cond i agri, aria	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht		Office held	
	expenditure to benefit C/OF		Centract name	Office acu	ym		Office dela	

SCHEDULE F1

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

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Ex

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide explain		ges/Contract Labor	OTHER (enter a category not listed above)	1
1	Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID	,
	Sch: 3/11 Rpt: 23/68	Ligon, Bre					
4	Date	5 Payee name	9				
	12/11/2024	American I	Express				
6	Amount (\$) \$10,267.76	7 Payee addro PO Box 65 Dallas, TX	50448	ate; Zip Code	3		
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	schadula) (k) Description		
	OF EXPENDITURE	Credit Care		Scrieduley	Check if travel o	utside of Texas. Complete Schedule T. TX, officeholder living expense edit Card Payments	٠
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sough	t	Office held	
	Date	Payee name	•				
	10/23/2024	Belmares,	Joe				
	Amount (\$)	Payee addre	ess; City; Sta	ite; Zip Code)		
	\$480.00	101 Old Pla	antersville Rd				
		Montgome	ry, TX 77316				
	PURPOSE OF EXPENDITURE	(a) Category (s Event Expe	See Categories listed at the top of this s	schedule) (k		utside of Texas, Complete Schedule T. TX, officeholder living expense /	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sough	t	Office held	
	Date	Payee name					
	07/30/2024	Blakemore	& Associates				
	Amount (\$) \$1,000,00	Payee addre 1 E Greenv	ess; City; Sta vay Plaza Ste 225	te; Zip Code			
		Houston, T	X 77046				
	PURPOSE OF EXPENDITURE	(a) Category (s Consulting	see Categories listed at the top of this s Expense	schedule) (b	<u> </u>	utside of Texas. Complete Schedule T. TX, officeholder living expense nsulting Fees	
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sough	t	Office held	

SCHEDULE F1

				EXPENDIT	URE CATEGO	RIES FOR	B	OX 8(a)		·	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	mmittee	Event Expense Fees Food/Beverage Ex Gift/Awards/Memo Legal Services	rials Expense	Office Ove Polling Ex Printing Ex Salaries/W	rhea pens pens (pens /ages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
L	•			The Instruction	Guide explains	how to cor	mpk	ete this form.			
1	Total pages Schedule F1: Sch: 4/11 Rpt; 24/68	2	FILER NAMI Ligon, Bret					3	Filer ID		
4	Date	5	Payee name						<u> </u>		_
L	08/20/2024		Blakemore	& Associates							
6	Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046								
8	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this sch	redule)	(b)	Description			-
	OF EXPENDITURE		Consulting		•	,		Check if travel	, TX,	de of Texas. Complete Schedule T. officeholder living expense ulting Fees	
						i					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	C	Office sou	ght			Office held	
	Date		Payee name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,					-
	09/11/2024		Blakemore	& Associates							
	Amount (\$)	 	Payee addre	ss; City;	State;	; Zip Coo	de				-
	\$500.00		1 E Greenw	⁄ay Plaza Ste	225	·					
			Houston, T	X 77046							
	PURPOSE OF EXPENDITURE		Category (Se Consulting		at the top of this sch	edule)	(b)	<u></u>	, TX,	de of Texas. Complete Schedule T. officeholder living expense ulting Fees	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offi	ceholder name	C	Office sou	ght			Office held	
	Date		Payee name					· · · · · · · · · · · · · · · · · ·	- ***		=
	11/13/2024		•	& Associates							
	Amount (\$)		Payee addre	ss; City;	State:	Zip Coo	de .				-
	\$1,000.00	Į.	-	ay Plaza Ste		•					
			Houston, TX	X 77046							
	PURPOSE OF EXPENDITURE		Category _{(Si} Consulting I		at the top of this sche	edule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense ulting Fees	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	C	Office souç	ght		•	Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services The Instruction Guide explai		ages/Contract Labor nplete this form.	OTHER (enter a category not li	sted above)
1	Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID	
	Sch: 5/11 Rpt: 25/68	Ligon, Bret	tt				
4	Date	5 Payee name	9		·		
ŀ	12/11/2024	Blakemore	e & Associates				
6	Amount (\$)	7 Payee addr	ess; City; Sta	ate; Zip Cod	le		
	\$500.00	1 E Green	way Plaza Ste 225				
		Houston, T	⁻ X 77046				
8	PURPOSE	(a) Category (See Categories listed at the top of this	schedule)	b) Description		
	OF EXPENDITURE	Consulting	Expense		·	outside of Texas. Complete Schedule	т.
ľ						n, TX, officeholder living expense onsulting Fees	
					oumpaign o	ondatang r dos	
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office soug	ht	Office held	
	expenditure to benefit C/O	1		_			
	Date	Payee name	3				
	10/31/2024	Coleman, (Chelsi				
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Coo	le		
	\$500.00	Best Efforts	s				
		Montgome	ry, TX 77356				
	PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule)	b) Description		
	OF EXPENDITURE	Solicitation	/Fundraising Expense		إحصا	outside of Texas. Complete Schedule	т.
						n, TX, officeholder living expense undraising Event Sound E	-auinment
					Campaign 7	and along Event country	.quipinoni
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office soug	ht .	Office held	
	expenditure to benefit C/Oh	-1					
	Date	Payee name)				
	10/23/2024	Cramer, Ar	ngie				
	Amount (\$)	Payee addre	ess; City; Sta	ite; Zip Cod	e		
	\$65,00	PO Box 80	5				
		Montgome	ry, TX 77356				
	PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule) {	b) Description		
	OF EXPENDITURE	Gift/Awards	s/Memorials Expense			outside of Texas. Complete Schedule	т.
				ŀ		n, TX, officeholder living expense Prize for Best Dressed C	Constume
					Wicker Door	THE TOT DOG DIOGOG C	onotanto
	Complete ONLY if direct	Candidate/Off	ficeholder name	Office soug	ht	Office held	
	expenditure to benefit C/OF					·	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense 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/Fundralsing Expense Transportation Equipment & Related Expense Travel in District
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 F1: Sch: 6/11 Rpt: 26/68	2 FILER NAME 3 Filer ID Ligon, Brett
4	Date 12/31/2024	5 Payee name Eventbrite
6	Amount (\$) \$821,53	7 Payee address; City; State; Zip Code 95 Third St 2nd Floor San Francisco, CA 94103
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Merchant Account Fees (Aggregate For Reporting Period)
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/17/2024	Payee name Flower Shop Network
	Amount (\$) \$112.08	Payee address; City; State; Zip Code 2404 Woodhead St Houston, TX 77019
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austlin, TX, officeholder living expense Office Event Decorations
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 12/18/2024	Payee name HEB
	Amount (\$) \$555.67	Payee address; City; State; Zip Code 3875 W Davis St
		Conroe, TX 77304
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Office Christmas Event Supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Legal Services The Instruction G	•		Vages	/Contract Labor		al Out of District ER (enter a category not listed abov	e)
1	Total pages Schedule F1; Sch: 7/11 Rpt: 27/68	2	FILER NAME Ligon, Brett					3	File	· ID	
4	Date 11/06/2024	5	Payee name Hobby Lobb	у							
6	Amount (\$) \$3.86	7	Payee address 1217 North Conroe, TX	Loop 336 West		; Zip Co	de				
8	PURPOSE OF EXPENDITURE	(a)		e Categories listed at t nead/Rental Ex		nedule)	(b)	<u></u>	X, officel	exas. Complete Schedule T. Holder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		Candidate/Offic	ceholder name	(Office sou	ght		•	Office held	
	Date 11/27/2024		Payee name Kirkland's						•		
	Amount (\$) \$425.00		Payee addres 2932 I 45 N Conroe, TX		State	; Zip Co	de				
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Event Expe	e Categories listed at t	the top of this sch	nedule)	(b)		X, officel	exas, Complete Schedule T. nolder living expense COTATIONS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	(Office sou	ght			Office held	,
	Date 12/20/2024		Payee name Lasker, Roo	sevelt							
	Amount (\$) \$2,099.00		Payee addres 1816 Pembi Conroe, TX	ook Circle	State	; Zip Co	de				
	PURPOSE	<u> </u>					(b)	Docarintian			<u> </u>
	OF EXPENDITURE			e Categories listed at t age Expense	he top of this sch	nedule)	(D)	Check If Austin, TX	X, officel	exas. Complete Schedule T. holder living expense Christmas Party	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		andidate/Offic	eholder name	(Office sou	ght			Office held	
_ _											

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Gift/Awards/Memorials Exp Legal Services The Instruction Guid	Salarie	-	s/Contract Labor	Travel Out of District OTHER (enter a category not listed above	/e)
1	Total pages Schedule F1:	2 FILER NAME				3	Filer ID	
	Sch: 8/11 Rpt: 28/68	Ligon, Brett						
4	Date	5 Payee name						
	10/29/2024	Ligon, Brett						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip	Code	•		
	\$1,554.35	-						
		Montgomer	y, TX 77356					
8	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description		
	OF EXPENDITURE	Loan Repay	/ment/Reimbursen	nent			ide of Texas. Complete Schedule T.	
ĺ							, officeholder living expense	
					i	Schedule G Rei	mbursements	
_	Consolate ONLY & disease	Condidate (Off		0#			Office hold	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ceholder name	Office s	ougnt		Office held	
	Date	Payee name						
	10/29/2024	Ligon, Brett						
	Amount (\$)	Payee addre	ss; City;	State; Zip (Code			
	\$2,500.00	-						
		Montgomer	y, TX 77356					
_	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description		
	OF EVEN DITUE		/ment/Reimbursen				ide of Texas. Complete Schedule T.	
	EXPENDITURE						officeholder living expense	
						Schedule G Rei	mursements	
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office s	ought		Office held	
	Date	Payee name					3-44-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	
	10/30/2024	Lowe's						
	Amount (\$)	Payee addre	ss; City;	State; Zip (Code			
	\$43.65	3052 Colleg						
		Ì	•					
		The Woodla	ınds, TX 77384					-
	PURPOSE	(a) Category (Se	ee Categories listed at the t	op of this schedule)	(b)	Description		
	OF EXPENDITURE	Event Expe	nse				ide of Texas. Complete Schedule T.	
l						Office Event Su	, officeholder living expense	
						Office Everit 30	ρμισο	
-	Complete ONLY if direct	Candidate/Offi	ceholder name	Office s	ought	-	Office held	
	expenditure to benefit C/O		CONTRACT HOUSE	Office S	vugrit		Omeo neid	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services	Polling Expe Printing Expo Salaries/Wa	ense ges/Contract Labor		Transportation Equipment & Related Expense Fravel in District Fravel Out of District OTHER (enter a category not listed above)
			The Instruction Guide expl	ains how to com	plete this form.		
1	Total pages Schedule F1:					3 F	Filer ID
L	Sch: 9/11 Rpt: 29/68	Ligon, Bret	t				
4	Date	5 Payee name					
	12/03/2024	Magnolia F	Republican Party				
6	Amount (\$)	7 Payee addre	ess; City; S	state; Zip Code	€		
	\$515.38	18640 FM	1488 Ste A294				
		Mangolia,	TX 77354				
8	PURPOSE	(a) Category (See Categories listed at the top of th	is schedule) (1) Description		
	OF EXPENDITURE		ns/Donations Made By		<u> </u>		of Texas, Complete Schedule T.
		Candidate/	Officeholder/Political Co	mmittee	Contribution	n,⊺X,o	fficeholder living expense
					Contribution		
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sough	nt .		Office held
	expenditure to benefit C/O			30 00491			
-	Date	Payee name	<u> </u>	"			
	11/14/2024	•	, ry County DA Investigat	ors Fund			
	Amount (\$)	Payee addre		tate; Zip Code	<u> </u>		
	\$2,500.00	· ·	lips 2nd Floor	tate, 21p coat	•		
	+=,010,21		mps =110 + 100+				
		Conroe, T	C 77301				
	PURPOSE) Description		
	OF		See Categories listed at the top of th ns/Donations Made By	is schedule)		outside	of Texas. Complete Schedule T.
	EXPENDITURE		Officeholder/Political Co	mmittee	<u> </u>	n, TX, o	fficeholder living expense
					Contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sough	nt		Office held
_						<u> </u>	
	Date	Payee name					
	11/06/2024		ry County Republican P				
	Amount (\$)	Payee addre		tate; Zip Code	•		
	\$600,00	18001 Hwy	105 W Ste 101				
		Montgome	ry, TX 77356				
	PURPOSE OF		see Categories listed at the top of th	is schedule) (k	Description		
	EXPENDITURE		ns/Donations Made By Officeholder/Political Co	ımmittee			of Texas. Complete Schedule T. fficeholder living expense
		Candidate/	Omognoliden Folitical CC		Contribution	,	
	Complete ONLY if direct		iceholder name	Office sough	nt		Office held
	expenditure to benefit C/OI	4					

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 B Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Git/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 above)
1	Total pages Schedule F1:						3	Filer ID
L	Sch: 10/11 Rpt: 30/68	Ligon, Bret	tt					
4	Date	5 Payee name						
L	10/07/2024	Orant Neo	n					
6	Amount (\$)	7 Payee addre	• • •	State; Zip Co	ode			
	\$589.88	300 Vesey	St FI 8					
		New York,	NY 10282					
8	PURPOSE OF		See Categories listed at the top o	f this schedule)	(b)	Description		
	EXPENDITURE	Event Expe	ense			<u> </u>		le of Texas, Complete Schedule T. officeholder living expense
						Office Event		
								_
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ight			Office held
	Date	Payee name	?					
	12/31/2024	Paypal						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode			
	\$359.81	2211 North	ı First St					
		San Jose,	CA 95131					
	PURPOSE	(a) Category (S	See Categories listed at the top of	this schedule)	(b)	Description		
	OF EXPENDITURE	Fees				<u> </u>		e of Texas, Complete Schedule T,
								officeholder living expense lant Account Fees (Aggregate For
						Reporting Per		
-	Complete ONLY if direct	Candidate/Off	ficeholder name	Office sot	laht			Office held
	expenditure to benefit C/OI		noonoidei name	Onjoe out	.9			O Moo Mood
	Date	Dayoo nama		•				
	11/04/2024	Payee name Southern F	r Ieritage Consulting					
	Amount (\$)	Payee addre		State; Zip Co	ode			
	\$2,500.00	PO Box 55		and the se				
	,, z z z z z		-					
		Pinehurst,	TX 77362					
	PURPOSE				(b)	Description		
	OF		See Categories listed at the top of /Fundraising Expense	this schedule)	(5)		outsid	e of Texas, Complete Schedule T.
	EXPENDITURE	Conortation	n undialing Expense			Check if Austin,	TX,	officeholder living expense
						Campaign Fu	ndr	aising Consulting
	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office sou	ght			Office held
	SAPORIGINATO TO DESIGNE OF OT							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services The Instruction Guide expl		-	ntract Labor this form.	OTHER (enter a cate	egory not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID	
	Sch: 11/11 Rpt: 31/68	Ligon, Bret	t					
4	Date	5 Payee name				· · · · ·		
	11/20/2024	Southern F	leritage Consulting					
6	Amount (\$)	7 Payee addre	ess; City; S	tate; Zip Co	de	·		
	\$2,500.00	PO Box 55	8					
		Pinehurst,	TX 77362					
8	PURPOSE	(a) Category (5	See Categories listed at the top of th	is schedule)	(b) De	escription		
	OF EXPENDITURE		/Fundraising Expense	- 1		4	utside of Texas. Complete	
				ĺ		4	TX, officeholder living exp ndraising Consult	
					C	ampaigniai	idraising consul	ang
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office soug	ıht		Office held	
	expenditure to benefit C/O		(55),5(35) (733),15	2 11100 000g	,		Omoo noid	
	Date	Payee name					<u></u>	
	11/04/2024	The Bees I						
	Amount (\$)	Payee addre	ess; City; S	tate; Zip Cod	le		· · · · · · · · · · · · · · · · · · ·	
	\$2,000.00	30310 Cha	•					
		Magnolia,∃	TX 77355					
	PURPOSE	(a) Category (S	ee Categories listed at the top of thi	s schedule)	(b) De	escription		
	OF EXPENDITURE	Event Expe		,		Check if travel ou	itside of Texas. Complete	
	E-11-01-11-01-11-11-11-11-11-11-11-11-11-					J	FX, officeholder living exp	ense
		ŗ.			E	vent Decorat	10115	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office soug	ht	****	Office held	
	expenditure to benefit C/O		octioned marie	Omoc soug	i i c		Office field	
	Date	Dougo nomo		10111111111111111111111111111111111111			······	
	11/06/2024	Payee name Walmart						
	Amount (\$)	Payee addre	ss; City; S	tate; Zip Cod	lo.	.		· · · · · · · · · · · · · · · · · · ·
	\$65.77	1407 N Loc	• •	tato, zip cot	iC.			
	φ33.11	210711200	,p 000					
		Conroe, TX	77304					
	PURPOSE		ee Categories listed at the top of thi		' h) De	escription		
	OF	Event Expe		s scriedule)			tside of Texas, Complete	e Schedule T.
	EXPENDITURE	•	•				FX, officeholder living exp	ense
					Of	ffice Event S	upplies	
	Complete ONE V & dis-	0			La		mer I I I	······
	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office soug	ΠŢ		Office held	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politic			alaries/Wages/Cor		OTHER (enter a categorial	ory not listed a	bove)
		truction Guide explains ho	w to complete t	this form.			
1 Total pages Schedule F4:					3 Filer ID		
Sch: 1/31 Rpt: 32/68	Ligon, Brett						
4 CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZE	D		
ISSUER	Ameria	n Express		DITURES ED TO A CRED	or⊥ \$		
			CARD	ZD TO K OKED	·		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Iss	uer Paid		•
	\$139.00	07/03/2024	08/20/20	24			
	4200,00	0,700,202,					
7 PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
			1,,,,,	rstate 45 Nort	•	•	·
	Red Lobster						
			Conroe, 7	ΓX 77303			
8 PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top	·	Office Sta	aff Meeting			
X Political	Food/Beverage Expe	nse		-			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	!	Chack if Austin	TX, officeholder living ex	manea	
9 Complete ONLY if direct	Candidate/Officeholder		ce sought	CHECK II Additi,	Office held	ропос	.
expenditure to benefit C/OH			y				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Iss	uer Paid		
	\$43,29	07/18/2024	08/20/202				
	Ф4 3.29	0111012024					
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
			410 Terry		,	·	•
	Amazon.com						
•			Seattle, V	VA 98109			
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaigr	n Event Decor	ations		
X Political	Event Expense		' -				
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule T.	<u></u>	Check if Auetin	TX, officeholder living ex	monea	
Complete ONLY if direct	Candidate/Officeholder	 	ce sought	Orice ii Addini,	Office held	репос	· · · · · · · · · · · · · · · · · · ·
expenditure to benefit C/OH	Canada Cijoojjola Ci	Trace of the	oo oodga		Omoo nota		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Iss	ıer Paid		
TATMENT		1	09/11/202		JC) LIIU		
	\$133,41	07/29/2024					
PAYEE	(a) Payee name		(b) Payee a	addraca:	City,	State,	Zip Code
171122	(a) rayee name				City,	State,	Zip Code
	Carmelita's		109 West	. Davis St			
			Conroo	TX 77301-2877	7		
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top		1	aff Meeting			
X Political	Food/Beverage Expe	nse	1 311100 010	mooning			
	/ \ 		<u> </u>				
Non-Political		of Texas. Complete Schedule T.		Check if Austin,	CYffine hold	pense	
Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made Candidate/Officeholder/Politi		wards/Memorials Expense Services	Printing Expense Salaries/Wages/Contract Labor	Travel Out of Distric OTHER (enter a cat		bove)
	The	Instruction Guide explain	s how to complete this form.			
 Total pages Schedule F4 	: 2 FILER NAME			3 Filer ID		
Sch: 2/31 Rpt: 33/68	Ligon, Brett					
4 CREDIT CARD	Name of	financial institution	5 TOTAL OF UNITEM			
ISSUER	se	e previous	EXPENDITURES CHARGED TO A CF	REDIT S		
C DAVISENT	(a) Amazanak Chamaral	(h) Data of Charma	CARD	Januar Daid		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	09/11/2024	issuer Paiu		
	\$109.95	08/01/2024	30,11,232			
7 PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code
	Gringo's		2550 Interstate 45 N			
	Oning03					
			Conroe, TX 77303			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the	a top of this schedule)	(b) Description			
	Food/Beverage Ex	·	Office Staff Meeting			
X Political						
Non-Political	(c) Check if travel out	side of Texas, Complete Sched	ule T. Check if Aus	stin, TX, officeholder living	expense	
9 Complete ONLY if direct	Candidate/Officeho	lder name	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	■ * * * * * * * * * * * * * * * * * * *	Issuer Paid	•	
	\$106.93	08/02/2024	09/11/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			300 Cb Stewart Drive	e		
	Ransoms Steak	nouse	j			
			Montgomery, TX 773	356		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the Food/Beverage E)		Office Staff Meeting			
X Political	1 courbeverage Ex	period				
Non-Political	(c) Check if travel out	side of Texas, Complete Sched	ule T, Check if Aus	stin, TX, officeholder living	expense	••
Complete ONLY if direct	Candidate/Officeho	der name	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$766.41	08/07/2024	09/11/2024			
	1.00(/2	03/3//2027				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			14135 Laramie Trail	•		•
	The Springs Eve	ents				
			Montgomery, TX 773	316		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the	top of this schedule)	Office Event Facilitie	s Rental		
X Political	Event Expense					
Non-Political	(c) Check if travel out	side of Texas, Complete Schedu	ule T. Check if Aus	atin, TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeho		Office sought	Office held		
expenditure to benefit C/OH			aa aaa911.	S56 Hold		
4						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundralsing Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politics	y - Gift/Award	erage Expense Is/Memorials Expense vices	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equip Travel in District Travel Out of District OTHER (enter a cate		
	The Inst	ruction Guide explains	how to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME		· · · · · · · · · · · · · · · · · · ·	3 Filer ID		
Sch: 3/31 Rpt: 34/68	Ligon, Brett					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRE CARD	 \$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
	\$3,000.00	08/07/2024	09/11/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	The Springs Events		14135 Laramie Trail			
	The Spings Events	>				
	(a) Catanan	** * · · · · · · · · · · · · · · · · ·	Montgomery, TX 7731	6	 	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Office Event Facilities	Rental		
X Political	Event Expense		Office Event racinges	restrui		
Non-Political	/-> Colonia Riconal constitu	of Towns Consolidate Coloreda	D about 16 August	TV office believe the form		
9 Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas, Complete Schedule name	Office sought	TX, officeholder living Office held	ехрепѕе	
expenditure to benefit C/OH	Danial action of the original action		omoo ocugin			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
	\$175.17	08/07/2024	09/11/2024			
	, _ , _ ,					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Carmelita's		109 West Davis St			
	Camenas					
PURPOSE OF	(a) Category		Conroe, TX 77301-287 (b) Description	77		
EXPENDITURE	(See Categories listed at the top	of this schedule)	Office Staff Meeting			
X Political	Food/Beverage Expe	nse				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	e T Check if Austin	, TX, officeholder living	exnense	
Complete ONLY if direct	Candidate/Officeholder		Office sought	Office held	onposioo	
expenditure to benefit C/OH			-			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
	\$204.98	08/08/2024	09/11/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Doordash		303 2Nd Street			
			San Francisco CA 041	107		
PURPOSE OF	(a) Category		San Francisco, CA 943 (b) Description	TO (
EXPENDITURE	(See Categories listed at the top	•	Office Staff Meeting			
X Political	Food/Beverage Exper	nse				
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule	e T. Check if Austin,	TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder		Office sought	Office held		
expenditure to benefit C/OH						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

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

Candidate/Officeholder/Politic	al Committee Legal Servi	ces Sa	rinting Expense alaries/Wages/Contract I	_abor OT	HER (enter a categoi	ry not listed at	ove)
	The Instr	uction Guide explains hov	v to complete this fo	orm.			,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID		
Sch: 4/31 Rpt; 35/68	Ligon, Brett						
4 CREDIT CARD	Name of finan	cial institution	5 TOTAL OF U	NITEMIZED		***************************************	
ISSUER	see pro	evious	EXPENDITU	RES O A CREDIT	 \$		
1			CARD	O A CREDIT			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	it Card Issuer	Paid		
	\$18.42	08/09/2024	09/11/2024				
Ha.		33.337232					
7 PAYEE	(a) Payee name	· · · · · · · · · · · · · · · · · · ·	(b) Payee addre	ess;	City,	State,	Zip Code
			1351 W Davis	St Ste B			
	Nothing Bundt Cake	S					
			Conroe, TX 7	7304			
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top o Food/Beverage Expen	,	Office Staff M	eeting			
X Political	1 obdi bavelage Expen	30					
Non-Political	(c) Check if travel outside o	f Texas, Complete Schedule T.		neck if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder i	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	lit Card Issuer	Paid	-	
	\$152.91	08/09/2024	09/11/2024				
PAYEE	(a) Payee name		(b) Payee addre	ss;	City,	State,	Zip Code
	Caltanaga		810 Interstate	45 N			
	Saltgrass						
			Conroe, TX 7	7301-1764			
PURPOSE OF	(a) Category	f thin nahadula)	(b) Description	_			
EXPENDITURE	(See Categories listed at the top o Food/Beverage Expen		Office Staff M	eeting			
X Political							
Non-Political	(c) Check if travel outside of	f Texas. Complete Schedule T,	C	neck if Austin, TX, o	officeholder living exp	ense	
Non-Political Complete ONLY if direct	(c) Check if travel outside of Candidate/Officeholder i		ce sought	neck if Austin, TX, u	officeholder living exp	nense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder r	name Offic	e sought		Office held	ense	
Complete ONLY if direct	Candidate/Officeholder r		e sought (c) Date(s) Cred		Office held	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder r	name Offic	e sought		Office held	iense	
Complete ONLY if direct expenditure to benefit C/OH PAYMENT	Candidate/Officeholder i	name Office (b) Date of Charge	e sought (c) Date(s) Cred		Office held	iense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder i	name Office (b) Date of Charge	e sought (c) Date(s) Cred	lit Card Issuer	Office held	State,	Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT	Candidate/Officeholder r (a) Amount Charged \$800.00 (a) Payee name	name Office (b) Date of Charge 08/14/2024	(c) Date(s) Cred 11/13/2024	lit Card Issuer	Office held		Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT	Candidate/Officeholder r (a) Amount Charged \$800.00	name Office (b) Date of Charge 08/14/2024	(c) Date(s) Cred 11/13/2024 (b) Payee addre	lit Card Issuer	Office held		Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE	Candidate/Officeholder i (a) Amount Charged \$800.00 (a) Payee name Childrens Safe Harb	name Office (b) Date of Charge 08/14/2024	(c) Date(s) Cred 11/13/2024 (b) Payee addre 1519 Oddfello	lit Card Issuer ess; ww St	Office held		Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF	Candidate/Officeholder (a) Amount Charged \$800.00 (a) Payee name Childrens Safe Harb (a) Category	name Office (b) Date of Charge 08/14/2024 or	(c) Date(s) Cred 11/13/2024 (b) Payee addre 1519 Oddfello Conroe, TX 7	lit Card Issuer ess; ww St	Office held		Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF EXPENDITURE	Candidate/Officeholder i (a) Amount Charged \$800.00 (a) Payee name Childrens Safe Harb	name Office (b) Date of Charge 08/14/2024 or	(c) Date(s) Cred 11/13/2024 (b) Payee addre 1519 Oddfello	lit Card Issuer ess; ww St	Office held		Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF EXPENDITURE X Political	Candidate/Officeholder (a) Amount Charged \$800,00 (a) Payee name Childrens Safe Harb (a) Category (See Categories listed at the top of	name Office (b) Date of Charge 08/14/2024 or f this schedule) is Made By	(c) Date(s) Cred 11/13/2024 (b) Payee addre 1519 Oddfello Conroe, TX 7	lit Card Issuer ess; ww St	Office held		Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF EXPENDITURE	Candidate/Officeholder in Candidate/Officeholder in \$800.00 (a) Payee name Childrens Safe Harb (a) Category (See Categories listed at the top of Contributions/Donation Candidate/Officeholder (c) Check if travel outside of	name Office (b) Date of Charge 08/14/2024 or f this schedule) as Made By r/Political Committee Texas, Complete Schedule T.	(c) Date(s) Cred 11/13/2024 (b) Payee addre 1519 Oddfello Conroe, TX 7 (b) Description Donation	lit Card Issuer ess; ww St 7301	Office held	State,	Zip Code
Complete ONLY if direct expenditure to benefit C/OH PAYMENT PAYEE PURPOSE OF EXPENDITURE X Political	Candidate/Officeholder in Candidate/Officeho	name Office (b) Date of Charge 08/14/2024 or If this schedule) IS Made By I	(c) Date(s) Cred 11/13/2024 (b) Payee addre 1519 Oddfello Conroe, TX 7 (b) Description Donation	lit Card Issuer ess; ww St 7301	Office held Paid City,	State,	Zip Code

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Constilling Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	y - Gift/Award al Committee Legal Serv		Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a cat		bove)
4. Total varias Cahadula E4:		raction Guide explains	how to complete this form.	la Elimin		
' ~	2 FILER NAME			3 Filer ID		
Sch: 5/31 Rpt: 36/68	Ligon, Brett					
4 CREDIT CARD ISSUER	1	ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid		•
	\$800.00	08/14/2024	11/13/2024			
7 PAYEE	(a) Payee name	<u></u>	(b) Payee address;	City,	State,	Zip Code
	Childrens Safe Har	hor	1519 Oddfellow St			
	Childrens Sale hai	DOI				
		···	Conroe, TX 77301			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodule)	(b) Description			
	Contributions/Donation	•	Donation			
X Political	Candidate/Officehold		ee			
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule	e T. Check if Austir	n, TX, officeholder living	expense	
9 Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$656,50	08/21/2024	11/13/2024			
	,					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			25 Waterway			
	Morton's					
			The Woodlands, TX 7	7380		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	,	Office Staff Meeting			
X Political	Food/Beverage Expe	nse				
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule	e T. Check if Austin	n, TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder	<u>'</u>	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$360.30	08/24/2024	11/13/2024			
	φουιου	0012412024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	(5) 1 5) 2 1 1 1 1 1		410 Terry Ave N	0.01	510.15,	
	Amazon.com		TAG TONY 7 WO IV			
			Seattle, WA 98109			
PURPOSE OF	(a) Category		(b) Description			<u> </u>
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Event Deco	orations		
X Political	Event Expense			- · · ·		
Non-Political	(a) Charlettermal	of Towns Complete Call 11		. TV official-1-1 tr.		
	(c) Check if travel outside Candidate/Officeholder	of Texas, Complete Schedule	e T. Check if Austir Office sought	n, TX, officeholder living Office held	expense	
Complete ONLY if direct	Candidate/OfficeHolder	name C	ուլեե ծնա <u>կ</u> լլե	OHICE HEID		
expenditure to benefit C/OH			· ·			

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Accounting/Banking Consulting Expense Food/Beverage Expense Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F4: FILER NAME 3 Filer ID Sch: 6/31 Rpt: 37/68 Ligon, Brett Name of financial institution TOTAL OF UNITEMIZED **CREDIT CARD** ISSUER **EXPENDITURES** see previous CHARGED TO A CREDIT CARD **6 PAYMENT** (a) Amount Charged (c) Date(s) Credit Card Issuer Paid (b) Date of Charge 11/13/2024 \$90,85 08/30/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 1418 North Loop 336 West Anita's Restaurant Conroe, TX 77304 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense x Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH **PAYMENT** (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 11/13/2024 \$91,63 09/10/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 107 West Alamo St Must Be Heaven Brenham, TX 77833-3668 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense

x Political

PAYMENT

PAYEE

PURPOSE OF

X Political

EXPENDITURE

Non-Political

expenditure to benefit C/OH

Complete ONLY if direct

Non-Political

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Office sought

Office sought

11/13/2024

(b) Payee address;

(b) Description

1616 W Dallas St Apt 335

Houston, TX 77019-2321

Office Event Photo Booth

(c) Check if travel outside of Texas. Complete Schedule T.

(b) Date of Charge

09/12/2024

Candidate/Officeholder name

(a) Amount Charged

(a) Payee name

(a) Category

Event Expense

\$200.00

Htx Photo Booth

(See Categories listed at the top of this schedule)

Candidate/Officeholder name

(C) Check if travel outside of Texas, Complete Schedule T.

State,

Zip Code

Check if Austin, TX, officeholder living expense

(c) Date(s) Credit Card Issuer Paid

Office held

City,

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made B Candidate/Officeholder/Politic	y - Gift/Award al Committee Legal Ser	ds/Memorials Expense vices	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a cate	gory not listed al	bove)		
	The Ins	truction Guide explains	how to complete this form.					
 Total pages Schedule F4: 	2 FILER NAME			3 Filer ID	· · · · · · · · · · · · · · · · · · ·			
Sch: 7/31 Rpt: 38/68	Ligon, Brett							
4 CREDIT CARD	Name of fina	incial institution	5 TOTAL OF UNITEMIZ	ED				
ISSUER	see p	revious	EXPENDITURES	EXPENDITURES \$ CHARGED TO A CREDIT				
	·		CARD	:511				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
	\$104.88	09/12/2024	11/13/2024					
	Ψ104.00	03/12/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City	State,	Zip Code		
				303 2Nd Street				
	Doordash							
			San Francisco, CA 94.	107				
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	•	Office Staff Meeting					
X Political	Food/Develage Expe	ilise						
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule	T. Check if Austin	, TX, officeholder living e	xpense			
9 Complete ONLY if direct	Candidate/Officeholder	r name C	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
	\$143.87	09/23/2024	11/13/2024					
••								
PAYEE	(a) Payee name	-	(b) Payee address;	City,	State,	Zip Code		
	*** • 6		503 Interstate 45 N					
	Target							
			Conroe, TX 77304-233	31				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memoria	•	Gift Baskets For Staff					
X Political	Onto Wood do Mioniona	io Experiod						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder living e	expense			
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid	· · · · · · · · · · · · · · · · · · ·			
	\$26,49	09/23/2024	11/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
			Suite K 1408 N Loop 3	336 W				
	Karen's Hallmark							
į			Conroe, TX 77304					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial	·	Office Staff Gifts					
X Political								
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule	T. Check if Austin	, TX, officeholder living e	xpense			
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
expenditure to benefit C/OH								

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	r - Gift/Award	is/Memoriais Expense	Polling Expense Printing Expense Salaries/Wages/Contract Lab	Trav-	ei in District el Out of District IER (enter a categoi	y not listed al	ove)
	The Inst	truction Guide explains h	ow to complete this form	n.			
1 Total pages Schedule F4:	2 FILER NAME			[3	Filer ID		
Sch: 8/31 Rpt: 39/68	Ligon, Brett						
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UN				
ISSUER	see p	revious	EXPENDITURI CHARGED TO		\$		
			CARD	ACKEDII			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer F	Paid		
	\$9.97	09/23/2024	11/13/2024				
	·						
7 PAYEE	(a) Payee name	•	(b) Payee address	s¦	City,	State,	Zip Code
	Mara man		2222 Interstate	45 North			
	Kroger						
			Conroe, TX 773	301			
8 PURPOSE OF	(a) Category (See Categories listed at the top	of the mark and the	(b) Description				
EXPENDITURE	Office Overhead/Ren	•	Office Supplies				
X Political		ı					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule 1	Chec	ck if Austin, TX, of	ficeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought		Office held		
expenditure to benefit C/OH	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit 11/13/2024	Card Issuer F	Paid		
	\$92.12	09/26/2024	11/13/2024				
PAYEE	(a) Payee name		(b) Payee address		City,	State,	Zip Code
	Babin's		19533 Interstate	e 45 South			
			Chanandaak T	V 7700F 07	F0		
PURPOSE OF	(a) Category		Shenandoah, T. (b) Description	X 77385-87	ეკ		
EXPENDITURE	(See Categories listed at the top	of this schedule)	Office Staff Mee	etina			
X Political	Food/Beverage Expe	nse	Gillos Glasii Wick	-ung			
Non-Political	/ . []						
	(c) Check if travel outside Candidate/Officeholder	of Texas, Complete Schedule T	ice sought		ficeholder living exp Office held	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Carididate/Oniceriolide	name on	ice sought		Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer F	Paid		
	-	1	11/13/2024				
	\$79.23	09/26/2024					
PAYEE	(a) Payee name		(b) Payee address	S:	City,	State,	Zip Code
	(,,		4130 Fm 1488 I	- T	,,		
	Bubba Ts		1.200				
			Conroe, TX 773	884			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	•	Office Staff Mee	eting			
X Political	Food/Beverage Expe	IISC					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	, Chec	ck if Austin, TX, of	ficeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought		Office held		
expenditure to benefit C/OH							
							-,

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - EXPENDITURE CATEGORIES FOR BOX 10(a)
vent Expense Loan Repayment/Reimburs

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Serv	vices S	rinung Expense alaries/Wages/Con	tract Labor OT	avel Out of District THER (enter a categ	jory not listed al	bove)
		ruction Guide explains ho	w to complete ti	his form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID		
Sch: 9/31 Rpt: 40/68	Ligon, Brett						
4 CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED			
ISSUER	see p	revious		DITURES ED TO A CREDIT	 \$		
			CARD	LD TO A ONLDIT			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		• .
	\$129.89	10/01/2024	11/13/202	24			
	Ψ120,00	15/01/202-					
7 PAYEE	(a) Payee name	<u> </u>	(b) Payee a	iddress;	City,	State,	Zip Code
			1	avis St Ste I	7,	,	•
·	Fedex						
			Conroe. T	X 77304-2338			
8 PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top	•	Campaigr	Shipping Fees			
X Political	Office Overhead/Ren	tal Expense		., .			
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule T.	<u> </u>	Check if Austin, TX,	officeholder living o	vnonco	
9 Complete ONLY if direct	Candidate/Officeholder		ce sought	Check if Austin, 1A,	Office held	xpense	
expenditure to benefit C/OH		name Om	ce sought		Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$88.35	10/01/2024	11/13/202	:4			
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	V-1b 5 t		3902 Riley	/ St			
	Kolache Factory						
			Houston,	TX 77005			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE 	(See Categories listed at the top Food/Beverage Expe	· ·	Office Sta	ff Meeting			
X Political	1 oodi botolago Expoi	1100					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$717.35	10/06/2024	11/13/202	24			
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	1		3400 Farn	n To Market 292	20		
	Dannys Trix & Kix						
			Spring, TX	(77388			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Office Eve	nt Supplies			
X Political	Event Expense						
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule T.	_ <u>l</u>	Check if Austin, TX,	officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder		ce sought	Shoot a Addung TA,	Office held		
expenditure to benefit C/OH							
							,

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 10/31 Rpt: 41/68 Ligon, Brett **CREDIT CARD** Name of financial institution TOTAL OF UNITEMIZED ISSUER **EXPENDITURES** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 12/11/2024 \$360,24 10/13/2024 PAYEE Zip Code (a) Payee name (b) Payee address; City, State, 410 Terry Ave N Amazon,com Seattle, WA 98109 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Campaign Event Decorations **Event Expense** X Political Non-Political (C) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 12/11/2024 \$375.71 10/14/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 410 Terry Ave N Amazon,com Seattle, WA 98109 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Campaign Event Decorations **Event Expense** X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (c) Date(s) Credit Card Issuer Paid (a) Amount Charged (b) Date of Charge 12/11/2024 \$121.24 10/15/2024 PAYEE (a) Payee name (b) Payee address; City, State Zip Code 107 Old River Rd Ste J Pean Hill Florist Montgomery, TX 77356-2852 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Campaign Constituent Flowers Gift/Awards/Memorials Expense X Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officabloide/(Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award	erage Expense Is/Memorials Expense vices	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a categ	gory not listed al	oove)
	The Inst	ruction Guide explains l	how to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID		
Sch: 11/31 Rpt: 42/68	Ligon, Brett					
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEM	IZED		
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CF	SEDIT \$		
	·		CARD	CEDIT		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$81.50	10/17/2024	12/11/2024			
	Ψ01.50	10/1//2024	İ			
7 PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code
	· · ·		410 Terry Ave N		-	•
	Amazon.com		, ,			
			Seattle, WA 98109			
8 PURPOSE OF	(a) Category		(b) Description		•	•
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Event Dec	corations		
X Political	Event Expense					
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule	T Chack If Aus	stin, TX, officeholder living e	vnence	
9 Complete ONLY if direct	Candidate/Officeholder	·	Office sought	Office held	Apon30	
expenditure to benefit C/OH	-		ino sough	Jiijo Iida		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$81,20	10/17/2024	12/11/2024			
	Φ01.20	10/1/12024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	, ,		18035 Interstate 45	_		•
	Chuys			_		
			Shenandoah, TX 773	385-8717		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Office Staff Meeting			
X Political	Food/Beverage Expe	nse				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	stin, TX, officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	Office sought	Office held		
expenditure to benefit C/OH			J			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$190.38	10/18/2024	12/11/2024			
	Φ130'30	10/10/2024				
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code
	, , , , , , , , , , , , , , , , , , , ,		410 Terry Ave N		•	•
	Amazon.com		1.25 . 5, 7 5			
			Seattle, WA 98109			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Event De	corations		
X Political	Event Expense					
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule	T. Check if Aus	stin, TX, officeholder living e	xpense	· · · · · · · · · · · · · · · · · · ·
Complete ONLY if direct	Candidate/Officeholder		Office sought	Office held		
expenditure to benefit C/OH						

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

	Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award	erage Expense Is/Memorials Expense vices	Printing Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a categ	jory not listed a	bove)
		The Ins	truction Guide explains h	ow to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME		•	3 Filer ID		
	Sch: 12/31 Rpt: 43/68	Ligon, Brett					
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITER			
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A C	REDIT \$		
				CARD			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer Paid	•	
ļ		\$191.84	10/18/2024	12/11/2024			
7	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
ĺ		A		410 Terry Ave N			
ľ		Amazon.com		1			
				Seattle, WA 98109			
8	PURPOSE OF	(a) Category	of the polyales	(b) Description	_		
	EXPENDITURE	(See Categories listed at the top Event Expense	or mis schedule)	Campaign Event De	ecorations		
	X Political	'					
	Non-Political	(c) Check if travel outside	of Texas, Complete Schedule	T, Check if Ar	ustin, TX, officeholder living e	xpense	
	Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held	-	
e)	penditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer Paid		
		\$146.00	10/20/2024	12/11/2024			
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		2nd And Charles		1306 West Davis St	treet		
		Zila Alla Cilanes					
				Conroe, TX 77304			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign Books			
		Office Overhead/Ren	· ·	Campaign Books			
	X Political						
	Non-Politicaí	``.' —	of Texas, Complete Schedule		ustin, TX, officeholder living e	kpense	
	Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held		
ех	penditure to benefit C/OH	(-) A	(I) D.A. of Observe	[(-) D. (-) O E(O			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card 12/11/2024	i issuer Paid		
		\$42.89	10/20/2024	12,11,2024			
	PAYEE	(a) David a mana		(1) 1	O't.	Ot - 1-	
	FRICE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		Amazon.com		410 Terry Ave N			
				Seattle, WA 98109			
	PURPOSE OF	(a) Category		(b) Description		 	
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Event De	ecorations		
	X Political	Event Expense					
	Non-Political	(a) Charle if the real and the	of Toyon Complete Calcadate	T	under TV/ alter to the state of		
	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas, Complete Schedule	fice sought	ustin, TX, officeholder living e Office held	rhense	<u> </u>
	penditure to benefit C/OH	Cartanauro, Officer folder	nanc O	noo sougin	Office field		
	,				<u> </u>		

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politica			Salaries/Wages/Contract		THER (enter a cate	ory not listed al	bove)
	The Inst	ruction Guide explains h	ow to complete this	form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID		
Sch: 13/31 Rpt: 44/68	Ligon, Brett				1		
4 CREDIT CARD	Name of fina	ncial institution	4	UNITEMIZED			
ISSUER	see p	revious	EXPENDIT!	JRES TO A CREDIT	_ \$		
			CARD	TONONLON			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issue	r Paid		
	\$1,238.68	10/20/2024	12/11/2024				
	Ψ ω ,ωσσισσ	1 20/20/2021					
7 PAYEE	(a) Payee name	l	(b) Payee addi	ess;	City,	State,	Zip Code
	' '		14135 Laram		•		,
	The Springs Events	3					
			Montgomery	TX 77316			
8 PURPOSE OF	(a) Category	·	(b) Description		 		
EXPENDITURE	(See Categories listed at the top	of this schedule)	Office Event	Facilities Re	ntal		
X Political	Event Expense						
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule 1		Theck if Austin TX	, officeholder living e	ynense	
9 Complete ONLY if direct	Candidate/Officeholder	 	fice sought	THE OK II FLOODING TA	Office held	^poiloo	
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issue	r Paid		
	\$1 21.16	10/21/2024	12/11/2024				
	φιζί.10	10/21/2024					
PAYEE	(a) Payee name	l	(b) Payee addr	ess;	City,	State,	Zip Code
			18101 I-45 S		•		
	Pappasito's Cantina	a.	-				
			Conroe, TX 7	7385			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	· ·	Office Staff N	leeting			
X Political	Food/Deverage Expe	1156					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule 1	r. 🗖 с	Check if Austin, TX,	, officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issue	r Paid		
	\$73.59	10/22/2024	12/11/2024				
PAYEE	(a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code
			410 Terry Av	e N			
	Amazon.com				•		
			Seattle, WA	98109			·
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Campaign Ev	ent Decorati	ions		
X Political	Event Exhense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T	·	Check if Austin, TX,	, officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought		Office held		
expenditure to benefit C/OH							
					·		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Co	counting Barking onsulting Expense ontributions/ Donations Made B Candidate/Officeholder/Politica	y - Glft/Award al Committee Legal Sen		Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equip Travel in District Travel Out of District OTHER (enter a cate		
			truction Guide explains	how to complete this form.			
1	tal pages Schedule F4:	ſ			3 Filer ID		
Sc	h: 14/31 Rpt: 45/68	Ligon, Brett					
	EDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE			
ISS	SUER	see p	revious	EXPENDITURES CHARGED TO A CRED	,T \$		
i				CARD	''		
6 PA	YMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ıer Paid		
		\$1 03,79	10/22/2024	12/11/2024			
		Ψ100.79	10/22/2024				
7 PA	YEE	(a) Payee name	<u></u>	(b) Payee address;	City,	State,	Zip Code
		(-, -, -,		410 Terry Ave N	9,		
		Amazon.com		- Factorial Process			
				Seattle, WA 98109			
8 PU	RPOSE OF	(a) Category		(b) Description			
	PENDITURE	(See Categories listed at the top	of this schedule)	Campaign Event Decora	ations		
X	Political	Event Expense					
	Non-Political	/->			24 - 15 - 1-1-1 - 1-2		
9 Cor	<u></u>	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedul	Office sought	X, officeholder living of Office held	expense	
	nplete <u>ONLY</u> if direct	Carlaidate/Officeriolder	name C	Office addgrit	Office field		
	YMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	4 101	, ,		12/11/2024	ici i aid		
		\$128.76	10/22/2024				
ΡΔ	YEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
• • • •	:	(a) Fayee name		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City,	State,	Zip Code
		Amazon.com		410 Terry Ave N			
				Coattle MA 00100			
DU	RPOSE OF	(a) Category		Seattle, WA 98109 (b) Description			
	PENDITURE	(See Categories listed at the top	of this schedule)	Campaign Event Decora	atione		
T V	Political	Event Expense		Campaign Event Decora	auons		
X	_						
	Non-Political	`	of Texas, Complete Schedule		X, officeholder living	expense	
	mplete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held		
	diture to benefit C/OH						
PA	YMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$61.33	10/22/2024	12/11/2024			
PA	YEE	(a) Payee name	,	(b) Payee address;	City,	State,	Zip Code
		LIED com		646 South Flores St			
		HEB.com					
				San Antonio, TX 78204			
	RPOSE OF PENDITURE	(a) Category	of this school (-)	(b) Description			
		(See Categories listed at the top Event Expense	of this schedule)	Campaign Event Supplie	es		
X	Political						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin, T	X, officeholder living	expense	
Con	nplete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought	Office held		
expen	diture to benefit C/OH						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Accounting/Banking Event Expense Fees

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor			Rental Expense Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related	
Ŀ			ruction Guide explains h	now to complet	te this form.			
1	Total pages Schedule F4:					3 Filer ID		
_	Sch: 15/31 Rpt: 46/68	Ligon, Brett	ncial institution	E TOTA		·r.		
4	CREDIT CARD ISSUER		revious	EXPE	AL OF UNITEMIZE ENDITURES RGED TO A CREE O	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date	(s) Credit Card Iss	uer Paid	-	
		\$85.78	10/22/2024	12/11/2	2024			
7	PAYEE	(a) Payee name		(b) Paye	e address;	City,	State,	Zip Code
		Spirit Outlet		37129	Fm 1774 Rd Ste	E		
				Magnoi	lia, TX 77355			
8	PURPOSE OF	(a) Category		(b) Desc	ription			
	EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Office B	Event Supplies			
	X Political	Event Expense						
	Non-Political	(c) Check if travel outside	of Texas, Complete Schedule	Т,	Check if Austin,	TX, officeholder living ex	pense	
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		٠
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		(s) Credit Card Iss	uer Paid	· · · · ·	
		\$10.71	10/23/2024	12/11/2	2024			
	PAYEE	(a) Payee name	<u></u>	(b) Pave	e address;	City,	State.	Zip Code
				1	rry Ave N	,	·	•
		Amazon.com			,			
				Seattle	, WA 98109			
	PURPOSE OF	(a) Category		(b) Desc	•			
	EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Campa	ign Event Decor	ations		
	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin,	TX, officeholder living exp	pense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH	· · · · · · · · · · · · · · · · · · ·						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(12/11/2	s) Credit Card Iss	uer Paid		
		\$34.31	10/23/2024	12/11/2	:024			
	DAVEE	() 5		45-				
	PAYEE	(a) Payee name			e address;	City,	State,	Zip Code
		Amazon,com		410 Tel	rry Ave N			
				Contilo	, WA 98109			
	PURPOSE OF	(a) Category		(b) Desc				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	1	ign Event Decor	ations		
	X Political	Event Expense			= = 321			
	Non-Political	(c) Check if travel outside	of Texas, Complete Schedule	<u></u>	Chack if Austin	TX, officeholder living ex	nense	
	Complete ONLY if direct	Candidate/Officeholder		ffice sought	CHECK II AUSUII,	Office held	polise	
ex	openditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politica	· ·		Salaries/Wages/Contract Labor ow to complete this form.	OTHER (enter a categ	ory not listed a	bove)
1 Total pages Schedule F4:		addon Saide explains it		3 Filer ID		
Sch: 16/31 Rpt: 47/68	Ligon, Brett			3 File ID		
		ncial institution	LE TOTAL OF UNITEMIZE			
4 CREDIT CARD ISSUER	1		5 TOTAL OF UNITEMIZED EXPENDITURES	ິ s		
	see p	revious	CHARGED TO A CRED	IT		
0 5000000	() ()	1 (1) 5 (5)	CARD	<u></u>		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 12/11/2024	ier Paid		
	\$18,01	10/23/2024	12/11/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	HEB.com		646 South Flores St			
	TILD.COM					
	*****		San Antonio, TX 78204			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description			
	Event Expense	or this scriedule)	Campaign Event Supplie	es		
X Political	•					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living e	xpense	
9 Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$26.10	10/23/2024	12/11/2024			
·						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Kalacha Eactony		3902 Riley St			
	Kolache Factory					
			Houston, TX 77005			0
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description			
	Food/Beverage Expe	-	Office Staff Meeting			
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	Γ. Check if Austin, T.	X, officeholder living e	xpense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	fice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$9.59	10/23/2024	12/11/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			420 North Frazier St			
	Walgreen's					
			Conroe, TX 77301			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	•	Office Supplies			
X Political	Onioc Overricadir tem	a Expense				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule 1	Check if Austin, T.	X, officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder		fice sought	Office held		··
expenditure to benefit C/OH						
					,	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	y - Glft/Awarı al Committee Legal Ser	erage Expense ds/Memorials Expense vices truction Guide explains I	Polling Expense Printing Expense Salaries/Wages/Contra	Tr act Labor O	ravel in District ravel Out of District THER (enter a categ	jory not listed al	oove)
1 Total pages Schedule F4:		Tradition Carde explains i	1000 to complete the		3 Filer ID		
Sch: 17/31 Rpt: 48/68	Ligon, Brett				a Fliet ID		
4 CREDIT CARD ISSUER		ncial institution previous	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$69.06	(b) Date of Charge 10/24/2024	(c) Date(s) C 12/11/2024	redit Card Issue	r Paid		
7 PAYEE	(a) Payee name Hunan Village		(b) Payee ad 1402 N Loc Conroe, TX	pp 336 W Ste A	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Food/Beverage Expe	ense	(b) Description Office Staff	Meeting			
	(c) Check if travel outside Candidate/Officeholde	of Texas, Complete Schedule		Check if Austin, TX,	, officeholder living e	xpense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Onicenoide	rname O	ffice sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(a) Data(a) C	redit Card Issue	r Daid		
PATMENT	\$128.11	10/24/2024	12/11/2024		i Palu		
PAYEE	(a) Payee name Walgreens		(b) Payee ad 420 North F	Frazier St	City,	State,	Zip Code
	(a) Cataway		Conroe, TX				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Office Supp				
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule	т. Г	Check if Austin, TX.	, officeholder living e	xpense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholde		ffice sought		Office held	,	
PAYMENT	(a) Amount Charged \$148.45	(b) Date of Charge 10/25/2024	(c) Date(s) C 12/11/2024	redit Card Issue	r Paid		
PAYEE	(a) Payee name Mckenzies Bbq	•	(b) Payee ad 17099 Wald		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	nse	(b) Description Office Staff	n Meeting			
Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living e	xpense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	rname O	ffice sought		Office held		
							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District at lietad abova)

Candidate/Oniceriolder/Politica	-	ruction Guide explains how	•		THER (ellier a caleg	ory not listed at	oovej
1 Total pages Schedule F4:	2 FILER NAME			·	3 Filer ID		
Sch: 18/31 Rpt: 49/68	Ligon, Brett						
4 CREDIT CARD ISSUER		ncial institution revious	EXPE	IL OF UNITEMIZED NDITURES RGED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		s) Credit Card Issue	r Paid	·	
	\$462.60	10/26/2024	12/11/2	2024			
7 PAYEE	(a) Payee name		(b) Paye	e address;	City,	State,	Zip Code
	Hobby Lobby		1217 N	orth Loop 336 We	st		
			•	, TX 77301			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this pahadula)	(b) Desc	· ·			
X Political	Event Expense	or this screedule)	Office 1	hanksgiving Deco	orations		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	xpense	. 4, 4
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH	·						
PAYMENT	(a) Amount Charged	(b) Date of Charge		s) Credit Card Issue	r Paid		•
	\$99.57	10/27/2024	12/11/2	024			
PAYEE	(a) Payee name		(b) Paye	e address;	City,	State,	Zip Code
	Amazon.com		410 Tei	ry Ave N			
	Amazon.com						
				WA 98109			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Desc	ription ign Event Decorat	ione		
X Political	Event Expense	•	Campa	gii Evenii Decorai	IUIIS		
Non-Political		 	<u> </u>				
	(c) Check if travel outside Candidate/Officeholder	of Texas, Complete Schedule T.	e sought	Check if Austin, TX	officeholder living ex Office held	kpense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeroide)	name Onice	e sougni		Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$702.14	10/27/2024	12/11/2	•			
	\$102.14	10/2/12024					
PAYEE	(a) Payee name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) Paye	e address;	City,	State,	Zip Code
	, ,		1 ' '	arm To Market 29	=		·
	Dannys Trix & Kix						
			Spring,	TX 77388			
PURPOSE OF	(a) Category (See Categories listed at the top	-646	(b) Desc	•			
EXPENDITURE	Event Expense	or this schedule)	Office E	vent Supplies			
X Political	•		<u> </u>				
Non-Politica!		of Texas, Complete Schedule T.		Check if Austin, TX	officeholder living ex	xpense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH		·					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees
Food/Beverage Expense
Glft/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Polltica	·	rices Sa ruction Guide explains how	laries/Wages/Co		"HER (enter a categor	y not listed al	bove)
1 Total pages Schedule F4:					3 Filer ID		
Sch: 19/31 Rpt: 50/68	Ligon, Brett				o riici ib		
4 CREDIT CARD ISSUER	Name of fina	ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$556.67	10/28/2024	12/11/20	24			
7 PAYEE	(a) Payee name Htx Photo Booth		(b) Payee 1616 W I	address; Dallas St Apt 335	City,	State,	Zip Code
			Houston	TX 77019-2321			
8 PURPOSE OF	(a) Category		(b) Descrip		.		
EXPENDITURE	(See Categories listed at the top	of this schedule)	1,,	ent Photo Booth			
X Political	Event Expense						
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule T.	1	Check if Austin, TX	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officehoider		e sought	Oncor it / Account, 174	Office held	- Child	
expenditure to benefit C/OH			J				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	· Paid		
	\$70.76	10/28/2024	12/11/20	24			
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Spirit Outlet		37129 Fr	n 1774 Rd Ste E			
	Spirit Outlet						
	(-) (0-1			, TX 77355			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	ent Supplies			
X Political	Event Expense		Onice Lv	ent Supplies			
Non-Political	/\ —		<u> </u>	F			
	(c) Check if travel outside Candidate/Officeholder	of Texas, Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeriolide	mante Office	e sought		Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$10.83	10/30/2024	12/11/20				
	φ10,63	10/30/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
			18640 Fr	n 1488 Suite A			-
	The Ups Store						
				, TX 77354			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this eshadulo)	(b) Descrip				
	Office Overhead/Rent	•	Campaig	n Shipping Fees			
X Political			ļ				
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas, Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH					·		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Award al Committee Legal Serv	is/Memorials Expense l vices :	Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category i	not listed ai	bove)
4. Tabella and Ocharles Edu		truction Guide explains ho	ow to complete this form.	la etteria		
1 Total pages Schedule F4: Sch: 20/31 Rpt: 51/68	Ligon, Brett			3 Filer ID		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED! CARD	\$		
6 PAYMENT	(a) Amount Charged \$1,137.50	(b) Date of Charge 10/30/2024	(c) Date(s) Credit Card Issu 12/11/2024	er Paid		
7 PAYEE	(a) Payee name Corn And Rye		(b) Payee address; 10963 Cutten Road Suit Houston, TX 77066	City, e A	State,	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
X Political	Food/Beverage Expense			+ Catering		
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule T	. Check if Austin, T	X, officeholder living expen	se	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		ice sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
, , , , , , , , , , , , , , , , , , ,	\$732.59	10/31/2024	12/11/2024	or raid		
PAYEE	(a) Payee name W. Bradshaw Bone	y Consulting	(b) Payee address; 18333 Egret Bay Blvd St	City, re	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Solicitation/Fundraisin	•	Houston, TX 77058 (b) Description Campaign Fundraising In	nvitations		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T	. Check if Austin, T	K, officeholder living expen	se	•
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Off	ice sought	Office held		·
PAYMENT	(a) Amount Charged \$375.09	(b) Date of Charge 10/31/2024	(c) Date(s) Credit Card Issur 12/11/2024	er Paid		
PAYEE	(a) Payee name Cavender's		(b) Payee address; 2557 Interstate 45 N Conroe, TX 77304-4658	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Polish Delegation Gifts			
Non-Political	(c) Check if travel outside			K, officeholder living expen	se	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Off	ce sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Glft/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 F4:	2 FILER NAME			3 Filer ID			
Sch: 21/31 Rpt: 52/68	Ligon, Brett						
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		·
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	Paid		
	\$298.09	11/03/2024	12/11/2024	4			
7 PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code
	Walmart.com			West 8Th St			
				, AR 72712-620	09		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Office Overhead/Ren		Office Sup	piles			
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH	,					-:	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
	\$241.00	11/04/2024	12/11/2022	1			
PAYEE (a) Payee name			(b) Payee ac	ldress;	City,	State,	Zip Code
Walmart.com		702 South	West 8Th St				
L L				, AR 72712-620	09		
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodule)	(b) Description				
EXPENDITURE X Political	Office Overhead/Ren		Office Sup	plies			
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule T.	<u>'</u>	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	ce sought Office held				
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	Paid		
	\$1,462.33	11/06/2024	12/11/2024	1			
PAYEE	(a) Payee name		(b) Payee ad	ldress;	City,	State,	Zip Code
	The Home Donet		1341 W Davis St				
The Home Depot							
Conroe, TX 77304-2309							
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)		(b) Description					
	Event Expense						
X Political							
	Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense						
· ·	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH		*					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

rsement Solicitation/Fundraising Expense

xpense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a extergory not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Glft/Award	fs/Memorials Expense P	Printing Expense Salaries/Wages/Co		Travel Out of District OTHER (enter a categ	jory not listed al	bove)
	The Inst	truction Guide explains ho	w to complete	this form.			
1 Total pages Schedule F4:	2 FILER NAME		·		3 Filer ID		
Sch: 22/31 Rpt: 53/68	Ligon, Brett						
4 CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZE			
ISSUER	see p	revious		IDITURES GED TO A CREDI	_{IT} \$		
		<u>.</u>	CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issu	ıer Paid		
	\$78.42	11/07/2024	12/11/20)24			
7 PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
	HomeDepot.com		2455 Pa	ces Fry Rd Sou	th East		
	, ioinida apatida iii			O A O O O O O O O O O			
8 PURPOSE OF	(a) Category		(b) Descri	GA 30339-1834			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Office St				
X Political	Gift/Awards/Memorial	ls Expense					
Non-Political	(a) Charak if traval autoida	of Texas, Complete Schedule T.	<u> </u>	Chaek if Avetin T	X, officeholder living ex	vaenae	
9 Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder		ce sought	Check II Austili, 1	Office held	kpense	
expenditure to benefit C/OH			g		211,0011.0,0		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issu	er Paid		
	\$148.39	11/07/2024	12/11/20	24			
	φ110.00	11,01,202					
PAYEE	(a) Payee name	L	(b) Payee	address;	City,	State,	Zip Code
	1604 N Frazier St						
	Joe's Pizza & Pasta	i					
				TX 77301			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion aff Meeting			
	Food/Beverage Expe	•	Office St	an weeting			
X Political			<u> </u>				
Non-Political	(*/ 🗀	of Texas, Complete Schedule T.	as sought	Check if Austin, T	X, officeholder living ex	xpense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offi	ce sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issu	er Paid		
7711112141		11/10/2024	(c) Balo(o)) Of Care Gard 1990	or raid		
	\$126.67	11/10/2024					
PAYEE	(a) Payee name	<u> </u>	(b) Payee	address:	City,	State,	Zip Code
				th West 8Th St	,	•	•
	Walmart.com						
			Bentonvi	lle, AR 72712-6	209		
		(b) Descri		- "			
EXPENDITURE	Office Overhead/Rent		Office Supplies				
X Political		,					
Non-Political	· /	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living ex	xpense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought		Office held		
expenditure to benefit C/OH	experiulture to perient G/OH						
					· .		

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Accounting/Banking Fees Food/Beverage Expense Polling Expense Consulting Expense Travel in District 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) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 23/31 Rpt: 54/68 Ligon, Brett CREDIT CARD Name of financial institution TOTAL OF UNITEMIZED **EXPENDITURES ISSUER** see previous CHARGED TO A CREDIT CARD 6 PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$106.47 11/12/2024 7 PAYEE (a) Payee name City, (b) Payee address; State, Zip Code 4130 Fm 1488 Rd Bubba Ts Conroe, TX 77384 (a) Category **PURPOSE OF** (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$137.09 11/13/2024 PAYEE (b) Payee address; (a) Payee name City, State, Zip Code 103 N Thompson St Honor Caf Conroe, TX 77301 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$161.53 11/13/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 702 South West 8Th St Walmart.com Bentonville, AR 72712-6209 (a) Category **PURPOSE OF** (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Supplies Office Overhead/Rental Expense x Political Non-Political (C) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: FILER NAME 3 Filer ID Sch: 24/31 Rpt: 55/68 Ligon, Brett Name of financial institution TOTAL OF UNITEMIZED CREDIT CARD **EXPENDITURES** ISSUER see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$97.53 11/14/2024 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 17825 Interstate 45 Adriatic Caf Shenandoah, TX 77385 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 11/15/2024 \$92.11 PAYEE (a) Payee name Zip Code (b) Payee address; City, State, 103 N Thompson St Honor Caf Conroe, TX 77301 (a) Category PURPOSE OF (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$200,80 11/16/2024 PAYEE (a) Payee name City, State. Zip Code (b) Payee address; 410 Terry Ave N Amazon,com Seattle, WA 98109 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Campaign Event Decorations **Event Expense** x Political Non-Political (C) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Event Expense Transportation Equipment & Related Expense Fees Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Polling Expense Travel in District Travel Out of District Gift/Awards/Memorials Expense Printing Expense Legal Services Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 25/31 Rpt: 56/68 Ligon, Brett **CREDIT CARD** Name of financial institution TOTAL OF UNITEMIZED ISSUER **EXPENDITURES** \$ see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$225.15 11/19/2024 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 1341 W Davis St The Home Depot Conroe, TX 77304-2309 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Supplies Office Overhead/Rental Expense X Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$689,40 11/20/2024 PAYEE (a) Payee name State, Zip Code (b) Payee address; City, 4747 Research Forest #495 Honey-Bee Ham The Woodlands, TX 77381 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Thanksgiving Luncheon Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$69.30 11/21/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 2450 Louisiana St. Ste 40 The Moonshiners Houston, TX 77006 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(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 Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 26/31 Rpt: 57/68 Ligon, Brett Name of financial institution TOTAL OF UNITEMIZED **CREDIT CARD ISSUER EXPENDITURES** see previous CHARGED TO A CREDIT CARD 6 PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$213,46 11/22/2024 7 PAYEE Zip Code (a) Payee name (b) Payee address; City, State, 410 Terry Ave N Amazon.com Seattle, WA 98109 (a) Category PURPOSE OF (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Campaign Event Decorations Event Expense X Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (a) Amount Charged (c) Date(s) Credit Card Issuer Paid (b) Date of Charge \$150.00 11/23/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 5219 Green Springs Dr North Houston Guns Houston, TX 77066 (a) Category **PURPOSE OF** (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Auction Items Contributions/Donations Made By X Political Candidate/Officeholder/Political Committee Non-Political Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$200,70 11/23/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Gun Shows In Texas Armor 4 America Cypress, TX 77433 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Gifts Gift/Awards/Memorials Expense x Political Non-Political (C) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct

expenditure to benefit C/OH

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award al Committee Legal Serv		Printing Expense Printing Expense Salartes/Wages/Contract Labor now to complete this form.	Travel Out of District OTHER (enter a cat		bove)
1 Total pages Schedule F4:		dute explains i	low to complete this form.	3 Filer ID		
Sch: 27/31 Rpt: 58/68	Ligon, Brett			3 Filerin		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$		
6 PAYMENT	(a) Amount Charged \$344.25	(b) Date of Charge 11/23/2024	(c) Date(s) Credit Card Issu	uer Paid		
7 PAYEE	(a) Payee name Make Ready Sports	<u> </u>	(b) Payee address; 13101 Running Doe Ln Cedar Park, TX 78613	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE X Political	(See Categories listed at the top Gift/Awards/Memorial	•	Office Staff Gifts			
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule	T. Check if Austin, 1	TX, officeholder living	expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held	·	·
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
,	\$214.97	11/23/2024				
PAYEE	(a) Payee name Fogo De Chao		(b) Payee address; 1900 Hughes Lndg Blvd Spring, TX 77380	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Description Office Staff Meeting			
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule	T. Check if Austin, 1	TX, officeholder living	expense	•
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held	,	
PAYMENT	(a) Amount Charged \$148.30	(b) Date of Charge 11/25/2024	(c) Date(s) Credit Card Issu	uer Paid		
PAYEE	(a) Payee name Donutwheel		(b) Payee address; 706 W Davis Street	City,	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Exper	,	Conroe, TX 77301 (b) Description Office Staff Meeting			
Non-Political	(C) Check if travel outside	of Texas, Complete Schedule	T. Check if Austin, 1	ΓX, officeholder living	expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: FILER NAME 3 Filer ID Sch: 28/31 Rpt: 59/68 Ligon, Brett Name of financial institution **CREDIT CARD** TOTAL OF UNITEMIZED **ISSUER EXPENDITURES** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$248.93 12/03/2024 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 20168 Eva St Kroger Montgomery, TX 77356 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Christmas Party Supplies **Event Expense** X Political Non-Political (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH PAYMENT (a) Amount Charged (c) Date(s) Credit Card Issuer Paid (b) Date of Charge \$74.51 12/03/2024 PAYEE (a) Payee name (b) Payee address; City. State. Zip Code 406 North Thompson St Paulette Conroe, TX 77301 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$810.79 12/03/2024 PAYEE (a) Payee name (b) Payee address; City, State Zip Code 2455 Paces Fry Rd South East HomeDepot,com Atlanta, GA 30339-1834 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Officer Range Inverter Office Overhead/Rental Expense X Political

Non-Political

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

(C) Check if travel outside of Texas, Complete Schedule T.

Candidate/Officeholder name

Check if Austin, TX, officeholder living expense

Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Food/Beverage Expense Travel in District Travel Out of District Contributions/ Donations Made By -Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 29/31 Rpt: 60/68 Ligon, Brett Name of financial institution TOTAL OF UNITEMIZED **CREDIT CARD EXPENDITURES** \$ **ISSUER** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$178,62 12/04/2024 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 107 Old River Rd Ste J Pean Hill Florist Montgomery, TX 77356-2852 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Campaign Constituent Flowers Gift/Awards/Memorials Expense X Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (c) Date(s) Credit Card Issuer Paid (a) Amount Charged (b) Date of Charge \$87.41 12/04/2024 PAYEE (a) Payee name State, (b) Payee address; City, Zip Code 8800 Six Pines Dr Killens Shenandoah, TX 77380 (a) Category **PURPOSE OF** (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$1.61 12/10/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 420 North Frazier St Walgreen's Conroe, TX 77301 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Supplies Office Overhead/Rental Expense X Political

Non-Political

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

(C) Check if travel outside of Texas. Complete Schedule T.

Candidate/Officeholder name

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	y - Gift/Award al Committee Legal Serv		Polling Expense Printing Expense Salaries/Wages/Contract Labo how to complete this form	•		bove)
1 Total pages Schedule F4:		ruodon Guide explains	note to complete this form	3 Filer ID		
Sch: 30/31 Rpt: 61/68	Ligon, Brett			3 Filerio		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNI EXPENDITURE CHARGED TO CARD	ES (\$		
6 PAYMENT	(a) Amount Charged \$231.42	(b) Date of Charge 12/16/2024	(c) Date(s) Credit	Card Issuer Paid		
7 PAYEE	(a) Payee name 2nd And Charles	<u> </u>	(b) Payee address 1306 West Davi Conroe, TX 773	s Street	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Ren	•	(b) Description Campaign-Book Constitue			
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule		k if Austin, TX, officeholder living	expense	. .
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer Paid		
	\$230.00	12/16/2024				
PAYEE	(a) Payee name Elements Lake Cor	nroe	(b) Payee address 15260 Hwy 105	•	State,	Zip Code
			Montgomery, TX	〈 77356		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Campaign Cons	tituent Gifts		
Non-Political	(a) Check if travel outside	of Texas, Complete Schedule	T Charl	k if Austin, TX, officeholder living		
Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder		office sought	Office held	expense	
expenditure to benefit C/OH	odifidade of the original of t	Traine C	misc sought	Office field		
PAYMENT	(a) Amount Charged \$76.46	(b) Date of Charge 12/16/2024	(c) Date(s) Credit (Card Issuer Paid		
PAYEE	(a) Payee name Pappadeaux Seafo	od	(b) Payee address 18165 Interstate Shenandoah, T	45 S	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	,	(b) Description Office Staff Mee			
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas, Complete Schedule name O	T. Check	k if Austin, TX, officeholder living Office held	expense	

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees Travel in District Consulting Expense Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Travel Out of District Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Ligon, Brett Sch: 31/31 Rpt: 62/68 TOTAL OF UNITEMIZED Name of financial institution **CREDIT CARD ISSUER EXPENDITURES** see previous CHARGED TO A CREDIT CARD 6 PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$286.82 12/17/2024 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 1420 North Loop 336 West Academy Conroe, TX 77304-3565 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Christmas Gifts Event Expense X Political Non-Political (C) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (c) Date(s) Credit Card Issuer Paid (a) Amount Charged (b) Date of Charge \$199.07 12/17/2024 PAYEE (b) Payee address; State, Zip Code (a) Payee name City, 15270 Highway 105 W CVS Montgomery, TX 77356-5684 (a) Category (b) Description PURPOSE OF **EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Gifts Gift/Awards/Memorials Expense X Political Non-Political (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$114.83 12/19/2024 PAYEE (a) Payee name City, State, Zip Code (b) Payee address; 15256 Hwy 105 West Fajita Jacks Montgomery, TX 77356 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Office Staff Meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

				SCHEDULE G			
Accounting/Banking Fees Office C Consulting Expense Food/Beverage Expense Polling I Contributions/ Donations Made By Gift/Awards/Memorials Expense Printing			Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense gs/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 1/6 Rpt: 63/68	2 FILER NAME Ligon, Brett		3 Filer ID			
4	Date 07/22/2024	5 Payee name Best Donuts					
6	Amount (\$) \$76.52 Reimbursement from political contributions Intended	7 Payee address; City; State; Zip 20998 Eva St Montgomery, TX 77356	Code				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description COffice Staff Meet	Check if travel outside of Texas. Complete Schedule T. 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 07/03/2024	Payee name El Bosque					
	Amount (\$) \$91.14	Payee address; City; State; Zip Code 20821 Eva Stste P					
	Reimbursement from political contributions intended	Montgomery, TX 77356					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description C	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
	Date 07/01/2024	Payee name Etsy.Com					
•	Amount (\$) \$217.56	Payee address; City; State; Zip 117 Adams St	Code				
	Reimbursement from political contributions intended	Brooklyn, NY 11201					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description COMPAGE OF CONTROL OF	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Solicitation/Fundraising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense **Event Expense** Transportation Equipment & Related Expense Fees Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Polling Expense Travej in District Gift/Awards/Memorials Expense Travel Out of District Printing Expense Salaries/Wages/Contract Labor Legal Services 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 Filer ID Sch: 2/6 Rpt: 64/68 Ligon, Brett 4 Date Payee name 08/19/2024 Fajita Jacks 6 Amount (\$) Payee address; City; State; Zip Code \$85.10 15256 Hwy 105 West Reimbursement from political contributions intended Montgomery, TX 77356 **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** Office Staff Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/01/2024 Gloria's Payee address; Amount (\$) City; State; Zip Code \$40.00 18484 I 45 South Reimbursement from political contributions intended X Shenandoah, TX 77348 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Office Staff Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/13/2024 Hobby Lobby Amount (\$) Payee address; City; State; Zip Code \$97,90 1217 North Loop 336 West Reimbursement from political contributions intended |X|Conroe, TX 77301 **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 Office Overhead/Rental Expense **EXPENDITURE** Office Supplies Complete ONLY if direct Office sought Office held 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 Advertising Expense Solicitation/Fundraising Expense Event Expense Accounting/Banking Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Consulting Expense Travel in District Contributions/ Donations Made By -Travel Out of District Legal Services 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. Total pages Schedule G: FILER NAME 3 Filer ID Sch: 3/6 Rpt: 65/68 Ligon, Brett 4 Date Payee name 08/08/2024 Hobby Lobby Amount (\$) Pavee address: City: State; Zip Code \$74.65 1217 North Loop 336 West Reimbursement from political contributions lx۱ intended Conroe, TX 77301 8 **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 Office Overhead/Rental Expense **EXPENDITURE** Office Decorations Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/09/2024 Kitchen Tales Amount (\$) Payee address; State; Zip Code City; \$45.14 14543 TX-105 #101 Reimbursement from political contributions intended Х Conroe, TX 77304 **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 Food/Beverage Expense **EXPENDITURE** Campaign Constituent Meeting Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 10/21/2024 Lupe Tortilla Amount (\$) Payee address; City; State; Zip Code \$95,61 20269 Eva St, Montgomery Reimbursement from political contributions intended Montgomery, TX 77356 **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 Food/Beverage Expense **EXPENDITURE** Campaign Constituent Meeting 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 Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Event Expense Fees Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Glft/Awards/Memorials Expense Polling Expense Travei in District Travel Out of District Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID Sch: 4/6 Rpt: 66/68 Ligon, Brett 4 Date Payee name 07/03/2024 Marcos Pizza 6 Amount (\$) Pavee address: City: State; Zip Code 3000 West Davis St Suite 4 \$39.77 Reimbursement from political contributions |X| intended Conroe, TX 77304 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (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** Office Staff Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/29/2024 Montgomery County Republican Party Amount (\$) Payee address; City; State; Zip Code \$2,500.00 18001 Hwy 105 W Ste 101 Reimbursement from political contributions intended X Montgomery, TX 77356 **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 Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/23/2024 Office Max Amount (\$) Payee address: City; State; Zip Code \$49.80 1319 W Davis St Reimbursement from x political contributions intended Conroe, TX 77304 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 Office Overhead/Rental Expense **EXPENDITURE** Office Supplies Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 5/6 Rpt: 67/68	2 FILER NAME Ligon, Brett		3	Filer ID		
4	Date 07/23/2024	5 Payee name Outback Steakhouse					
6	Amount (\$) \$236.61	7 Payee address; City; State; Zip Code 808 Interstate 45 North					
	Reimbursement from political contributions intended	Conroe, TX 77301					
8	OF Food/Beverage Expense				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		
	Date 08/26/2024	Payee name Papa John's	. 6				
	Amount (\$) Payee address; City; State; Zip Code \$129.27 1201 N Loop 336 W A						
	Reimbursement from political contributions intended	Conroe, TX 77301					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Food/Beverage Expense	cheđule)	I	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		
	Date 07/01/2024	Payee name Party City					
	Amount (\$) \$81.78	Payee address; City; Stat 20103 Timberstone Ln	e; Zip Co	ode			
	Reimbursement from political contributions intended	Spring, TX 77379					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Trave in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID Sch: 6/6 Rpt: 68/68 Ligon, Brett 4 Date Payee name 07/02/2024 The Catch 6 Amount (\$) Payee address; State; Zip Code City; \$63.78 2121 West Davis St Reimbursement from political contributions intended |X| Conroe, TX 77304-2050 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** Office Staff Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/06/2024 Tuscany Grill Amount (\$) Payee address; City; State; Zip Code \$87.27 1259 Grand Central Parkway Reimbursement from political contributions intended Х Conroe, TX 77301 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Office Staff Meeting Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 07/06/2024 Willie's Grill Amount (\$) Payee address; City; State; Zip Code \$42.45 16846 Interstate 45 South Reimbursement from political contributions intended X Conroe, TX 77384 **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 Food/Beverage Expense **EXPENDITURE** Office Staff Meeting Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH