CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 Filer ID (Ethica Commission Filers) 2 folal pages filed The C/OH Instruction Guide explains how to complete this form. 22 MS / MRS / MR MI 3 CANDIDATE / OFFICE USE ONLY Daniel **OFFICEHOLDER** NAME Date Received NICKNAME SUFFIX Pena CITY ADDRESS / PO BOX. 4 CANDIDATE / **OFFICEHOLDER** Timber Sapp Dr. Conroe, Tx 77304 MAILING **ADDRESS** Change of Address PHONE NUMBER EXTENSION AREA CODE 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (832) 744-3793 PHONE Receipt # Amount \$ MI MS / MRS / MR CAMPAIGN Melody TREASURER Dale Processed NAME SUFFIX NICKNAME Dale Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; ZIP CODE 7 CAMPAIGN 4054 Timber Supp Dr. Conroe, TX TREASURER 77304 **ADDRESS** (Residence or Business) PHONE NUMBER EXTENSION AREA CODE 8 CAMPAIGN TREASURER PHONE (832) 704 - 0601 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit Day 10 PERIOD COVERED 12 /31 / 2023 07/01/2023 THROUGH ELECTION TYPE **ELECTION DATE** 11 ELECTION Primary Runoff Other Month Day 03/05/2024 General Special 13 OFFICE SOUGHT (If known) OFFICE HELD (If any) Montgomery County Constable Pet 2 12 OFFICE THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE I OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

5 C/OH NAME	iel Peña		16 Filer ID (Ethics Co	ommission Filers)
7 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICATION PLEDGES, LOANS, OR GUAR CONTRIBUTIONS MADE ELECTOR	AL CONTRIBUTIONS (OTHER TH ANTEES OF LOANS, OR CTRONICALLY)	s Ø	
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA	BUTIONS INS. OR GUARANTEES OF LOAN	\$ 20,	000 00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICA	AL EXPENDITURE.	\$ 0	-
	4. TOTAL POLITICAL EXPEND	DITURES		464.86
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBU OF REPORTING PERIOD	TIONS MAINTAINED AS OF THE I	LAST DAY \$ 3,	783· <u>34</u>
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT C LAST DAY OF THE REPORTING	OF ALL OUTSTANDING LOANS AS NG PERIOD	of the \$ 2,	000 00
		Danil 1.	<u></u>	
		Signature of	Candidate or Officehold	ег
	Please com	plete either option bel	ow:	
(1) Affidavit				
NOTARY STAMP/SE	EAL			
O to and author/ha	d balance and but	thin t	ho day of	
	ed before me by		he day of	
20, to certi	ify which, witness my hand and seal of office.			
Signature of officer admini	stering oath Printed name of o	fficer administering oath	Tille of office	r administering oath
		OR		
(2) Unsworn Declara	ation			
My name is		, and my date of birth	n is	
My address is		344.44		
	(street)	(city)	(state) (zip code)	
Executed in	County, State of	, on the day of	onth) (vear)	
		VIII.		
		Signature of Ca	ndidate/Officeholder (Dec	larant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	Dan	iel Pene	a-	20 Filer ID (Ethics Co	mmission Filers)
		LE SUBTOTALS F SCHEDULE			SUBTOTAL AMOUNT
1,	×	SCHEDULE A1:	: MONETARY POLITICAL CONTRIBUTIONS		\$20,000 00
2.		SCHEDULE A2	:: NON-MONETARY (IN-KIND) POLITICAL CO	NTRIBUTIONS	\$
3.		SCHEDULE B:	PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS			\$	
5.	SCHEDULE F1. POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 16,169.43		
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		s		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$		
8.	S. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 295. 41		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$		
11.		SCHEDULE I: N	NON-POLITICAL EXPENDITURES MADE FRO	OM POLITICAL CONTRIBUTIONS	\$
12.		SCHEDULE K:	INTEREST, CREDITS, GAINS, REFUNDS, A	AND CONTRIBUTIONS RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

Date 5	Full name of contributor out-of-state Jerrad Harrell Contributor address; City; 3032 N. Frazier St. Com/Job title (See Instructions)	State; Zip Code	3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$)
/29/2023 6	Jerrad Harrell Contributor address; City; BO32 N. Frazier St. Co		
Principal occupation		State; Zip Code	20,000 00
	on / Job title (See Instructions)		
		9 Employer (See Instruction Texas Profession	tions) Surveying . LL.C
Date	Full name of contributor	ate PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occupation	n / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor	late PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occupation	n / Job title (See Instructions)	Employer (See Instruc	itions)
Date	Full name of contributor out-of-st	late PAC (ID#:)	Amount of contribution (\$)
***	Contributor address; City;	State; Zip Code	
Principal occupation	n / Job title (See Instructions)	Employor (See Instruc	ctions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Amenorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wagnes/Contract Lebes

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

Total pages Schedule F1:	2 FILER NAME Daniel Pena	3 Filer ID (Ethics Commission Filers)
9/8/2023	5 Payee name Wrap Stars	
Amount (\$)	7 Payee address;	City; State; Zip Code
90000	1603 Rayford Rd. Spring	77× 77386
	(a) Category (See Categories listed at the top of this schedule) (b)	Description
PURPOSE OF EXPENDITURE	Printing expense	Zampaign Signs
	(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/O	Candidate / Officeholder name H Daniel Pena Montgomery (Office sought Office held County Constable Pet 2
Date	Payee name	
	Buildasign.com	
Amount (\$)	Payee address;	City; State; Zip Code
\$3,021.66	11525A Stanchollow Dr. :	Suite 100 Austin, Tx 78758
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Day to Every	Campaign Signs
	Printing Expense	The party of the p
OF	Check if Iravel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
OF	Check if Iravel outside of Texas. Complete Schedule T. Candidate / Officeholder name	
OF EXPENDITURE Complete ONLY if direct	Check if Iravel outside of Texas. Complete Schedule T. Candidate / Officeholder name Deniel Pene Montgomery Payee name	Check if Austin, TX, officeholder living expense Office sought Office held
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Check if Iravel outside of Texas. Complete Schedule T. Candidate / Officeholder name OH Deniel Pene Montgomery	Check if Austin, TX, officeholder living expense Office sought County Constable Pet 2.
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date Amount (\$)	Candidate / Officeholder name Deniel Pena Montgomery Payee name Buildabign Payee address:	Check if Austin, TX, officeholder living expense Office sought County Constable Pet 2. City; State; Zip Code
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date Amount (\$)	Check if Iravel outside of Texas. Complete Schedule T. Candidate / Officeholder name Deniel Pena Montgomery Payee name Buildasign	Check if Austin, TX, officeholder living expense Office sought County Constable Pet 2. City; State; Zip Code
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date Amount (\$)	Candidate / Officeholder name Deniel Pena Montgomery Payee name Buildabign Payee address:	Check if Austin, TX, officeholder living expense Office sought County Constable Pet 2. City; State; Zip Code
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date Amount (\$)	Check if Iravel outside of Texas. Complete Schedule T. Candidate / Officeholder name The Deniel Pene Montgomery Payee name Buildasign Payee address: 11525 A Stanehollow Dr. Su	City; State; Zip Code
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date Amount (\$) PURPOSE OF	Candidate / Officeholder name Candidate / Officeholder name Deniel Pene Montgomery Payee name Buildasign Payee address: 11525 A Stanehollow Dr. Su Category (See Categories listed at the top of (his schodule)	City: State: Zip Code Classification County Constable Ret 2.

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officehokter/Politic Credit Card Payment	
1 Total pages Schedule F1	2 FILER NAME Device Pero
4 Date ///16/2023	5 Payee name Montgomery County Republican Party
6 Amount (S)	7 Payec address: Cily; State; Zip Code 921 W. Austin St. Comroe, Tx 77301
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee's Campaign filing fee's
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Candidate / Officeholder name Office sought Office held
Date 9/27/2023	Payee name Signacama
Amount (S)	Payee address: City; State; Zip Code 13210 Interstate 45.5 Suite III Conrue, Tx 77384
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense Push Cards
Complete ONLY if direct expenditure to benefit C/O	Check If Iravel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Danie / Pair Montsomery County Constable Pet 2.
Date ///9/2023	Payee name Signarama
Amount (\$) \$159.44	Payee address; City; State; Zip Code 15210 Interstate 45.5 Suite 111 Conroc, Tx 77384
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense Push Cards in Spenish
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Check if travel outside of Toxas. Complete Schedule T. Candidate / Office holder name Office sought County Constable Pet 2
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

	EXPENDITURE CATEGORII	ES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollin y Gift/Awards/Memorials Expense Printi	Repaymen//Reintxirsement o Overhead/Rental Expense og Expense og Expense des/Wages/Contract Labor to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Peña		3 Filer ID (Ethics Commission Filers)
4 Date 11/12/2023	5 Payee name Vista Print		
6 Amount (\$) # 54 · 12	7 Payee address; 275 Wyman St. W	city:	State; Zip Code A 02451
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Printing Expense	(b) Description Business	Card
	(c) Check if travel outside of Texas. Complete Schedule	T. Check if Aus	lin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date 12/30/2023	Payee name Campaign Partner		
Amount (S) #209 20	Payee address; P.O Box 118 Still	City; Water MA	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Advertising Expense		n Website
	Check if travel outside of Texas, Complete Schedule	T. Check If Aus	tin, TX, officeholder living expense
Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H Daniel PenZ Monte	Somery Court	y Constable Pet 2
Date 12/22/2023	Payee name Home Depot		
Amount (s) \$ 319.23	Payee address: P.O Bux 2/53 Birm	ninshem AL	Slate; Zip Code - 35237
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Credit Card Payment		Sign Stakes
	Check if Iravel outside of Texas. Complete Schedule	T. Check if Aus	ilin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense **Event Expense** Loan Ropayment/Roimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel In District Contributions/Donations Made By Giff/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) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Daniel Pena 3 Filer ID (Ethics Commission Filers) 4 Date 9/27/2023 5 Payee name PK -T shirts 7 Pavee address: 6 Amount (\$) \$ 988.00 1022 Macintosh Dr. 77354 Masnolia TX (a) Category (See Categories listed at the top of this schedule) (b) Description Campaign T-shirts PURPOSE Printing Expose OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Montgomery County Constable Pet 2 Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Daniel Payee name PK-T.shirts 10/25/2023 Amount (S) City; State. 1022 Macintosh Dr. Magnolia # 750°° 77354 Category (See Categories listed at the top of this schedule) Campaign Koozies PURPOSE Printing Expanse Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Mortsomery County Constable expenditure to benefit C/OH Daviel Pera 10/20/2023 San's Club Amount (\$) Payee address; City: State; Zip Code \$290.93 P.O Box 530942 Attenta GA 30353 Category (See Categories listed at the top of this schedule) Description Food and Drinks for Most PURPOSE Food/Beverage Emperse EXPENDITURE and Greet. Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought County Constable Pet 2. Complete ONLY if direct expenditure to benefit C/OH Montgomery Deriel ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Foos
Food/Boverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimburnement Office Overheet/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politic redit Card Payment	y Gift/Awards/Memorials Expense Printing Exper al Committee Legal Services Salanes/Wage The Instruction Guide explains how to com	os/Contract Labor Other (enter a category not listed above)
Total pages Schedule F1	2 FILER NAME PEÃO	3 Filer ID (Ethics Commission Filers)
8/16/2023	5 Payee name Kimberly Sutton	
Amount (\$)	7 Payee address: 235 Pleasent Hill Way	Conroe 7x 77304
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Compaign Pictures
	(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/C	Candidate / Officeholder name H Daniel Pena Mortzon	Office sought Constable Pet 2
Date 10/9/2023	Sheriff Rand Henderson's	7th Annual Golf Tournament
Amount (S) 270 20	Payee address; P.o Box 1678 Cons	City; State; Zip Code
PURPOSE OF	Calegory (See Categories listed at the top of this schedule) Contributions	Golf Tournament Entry plus Muligan purchase
EXPENDITURE	Check if Iravel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete <u>QNLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH Device Pena Montzar	Mery County Constables Pet 2
Date 9/14/2023	Montgomery County Republic	can Party Goft tournament
	Payee address; 921 W. Austin St.	Conroc Tx 7730/
PURPOSE OF EXPENDITURE		- 2730/
539. 44	G2/ W. Austin St. Category (See Categories listed at the top of this schedule)	Conroc Tx 77301 Description Golf Tournament Entry plus

SCHEDULE F1

Validation and American	EXPENDITURE CATEG		La la seria de la compania del compania de la compania del compania de la compania del la compania de la compan
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic	[20] [10] [10] [10] [10] [10] [10] [10] [1	Loan Repayment/Roinbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salanes/Wages/Contract Labor	Solicitation/Fundratsing 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	s how to complete this form.	
1 Total pages Schedule F1	2 FILER NAME Pena		3 Filer ID (Ethics Commission Filers)
9/26/2023	5 Payee name Tommy McRee Com	peisn	
6 Amount (\$)	7 Payee address:	City;	State; Zip Code
\$ 3000	P. 0 Box 31	Conroe	Tx 77305
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s	The state of the s	fundraiser
	(c) Check if travel outside of Texas. Complete So	chedule T. Check if Au	stin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Daviel Perse	Office sought Montgonery Court	ty Constable Pet 2
Date	Payee name		1
10/20/23	Krogers		
Amount (S) \$105.53	Payee address; 2222 7-45	Conroc	State; Zip Code 77303
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s		rase for Meet and Greet
	Check If travel outside of Texas. Complete S	chedule T. Check if Au	ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/G	Candidate / Officeholder name DH Daniel Pena M.	Office sought extsomery County	Constable Pet 2
Date	Payee name		
11/4/2023	Rivershire Building	Pental	
Amount (\$)	Payee address;	City;	State; Zip Code
\$ 100°°	206 Scarborough Dr	· Conrue	Tx 77304
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this to		Greet Rental
	Check if travel outside of Texas, Complete S	Schedule T. Chock if A	ustin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH Daniel Pena A	Office sought	1
	ATTACH ADDITIONAL COPIES		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Boverage Expense Giff/Awards/Memorials Expense Loan Repayment/Reinibursement Office Overhead/Rental Expenso Polling Expense Prinling Expense Solicitation/Fundraising Exponse Transportation Equipment & Related Expense Travel in District Travel Out Of District

Total pages Schedule F1:	2 FILER NAME PETA	3 Filer ID (Ethics Commission Filers)
Date 11/21/2023	5 Payee name Kiwanis Christmas Parade	
Amount (\$)	7 Payee address; City;	State; Zip Code
\$ 10000	P. O Box 872 Corre	Tx 77305
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Event Expense Christia	mas Parade Entr-1
	(c) Check if travel outside of Texas, Complete Schedule T. Check	if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H Deniel Pera Montsomery Count	ty Constable Pet Z
Date	Payee name	
11/10/2023	Pollar Tree Stores	
Amount (S)	Payee address; City;	State; Zip Code
\$48.71	2022 I. 45 N. Conroc	Tx 77301
	Category (See Categories listed at the top of this schedule) Description	on .
PURPOSE OF EXPENDITURE	Event Expense Perade	Float Decorations
	Check if Iravel outside of Texas. Complete Schedule T. Check	if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Office holder name Office sour Denied Pena Montgomery Cou	ght Office held Put 2.
Date	Payee name	
10/21/2023	H. E. B	
Amount (\$)	Payee address; City;	State; Zip Code
\$ 16.13	3875 W. Davis St. Conroe	Tx 77304
	Category (See Categories listed at the top of this schedule) Description	on
DUDDOOF	Food/Beverage Expense Meet	and Greet
PURPOSE OF EXPENDITURE		
OF	Check if travel outside of Texas. Complete Schedule T. Check	k If Austin, TX, officeholder living expense
OF	Candidate / Officeholder name Office soil	ught Office held

SCHEDULE F1

	EXPENDITURE CATEG	OKIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credi Card Payment	그렇게 그 사람이 가는 사람이 어느 아는 사람들은 사람들이 아름다면 하는데 아들이 아름다면 하는데 아름다면 아름다면 하는데 아름다면 아름다면 아름다면 아름다면 아름다면 아름다면 아름다면 아름다면	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor s how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	and the same of th	3 Filer ID (Ethics Commission Filers)
4 Date 11/8/2023	5 Payee name Home Depot		
6 Amount (S)	7 Payce address; P. O Box 2153	Birminsham	State; Zip Code AL 35287
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Advertising Expense (c) Check if travel outside of Texas. Complete Sc	Compaign	Sign Stakes
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Devid Person Mo	Office sought	Constable Office held 2
Date 10/20/2023	Apricity Foundation		
Amount (S) # 263.73	Payee address; 2257 N. Loop 336	City; W. Suite #140	State: Zip Code Conrue, Tx 77304
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so	4	ins Event
	Check If travel outside of Texas. Complete So	chedule T. Check if Aus	stin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held
Date 11/30/2023	Apricity Foundation he	osts National K	Peview Event
Amount (\$)	Payee address; 2257 Ν. Loop 336 ω. :	City; Suite #140 Co	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of this s		ins Event
	Check if travel outside of Texas, Complete S	chedule T. Check If Au	slin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Denie/ Pene A	Office sought Montsomery County	Constable Pet 2
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS NE	EEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1,	2 FILER NAME Deniel Pena 3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2023	5 Payee name Apricity Tea Foundation
6 Amount (\$) \$ 4000	7 Payee address; City: State; Zip Code 2257 N. Loop 336 W. Suite#740 Conroc, Tx 77304
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Solicitation Expense Campaisning Event (c) 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 12/24/2023	Payee name Face Book
Amount (\$)	Payee address: City: State; Zip Code 1 Hacker Way Menlo Park, CA 94025
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense Ad on Facebook
	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 / Office holder name Office sought Office held Daniel Pena Montsomery County Constable Pet 2
Date 11/11/2023	Payee name Bis Lots
Amount (\$) \$ 126.54	Payee address; City; State; Zip Code 1404 N. Loop 336 Conroe 7× 77304
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Fund Funds Parada float Decorations
	Check if Iravel 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 Daniel Penz Montgomery County Constable Pet 2.
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (extense person to Heled above)

Contributions/Donations Made B Candidate/Officeholder/Politics Credit Card Payment	
Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Date 11/7/2023	5 Payee name Braden Bailess Memorial
Amount (\$)	7 Payee address; City; State; Zip Code
# 100°°	15 N. Spring Brook Ct. The Woodlands, Tx 77382
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Contribution Expense Donation
En Ellerion	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Office sought Office held Office hel
Date	Payee name
11/4/2023	Enchantral Party Rental
Amount (\$)	Payee address; City; State; Zip Code
50000	4054 Timber Supp. Dr. Conroe Tx 77304
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Meet and Greet Rentals
	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/O	Candidate / Office holder name Office sought Office held Daniel Pera Montgomery County Constable Pet 2
Date 1//11/2023	Payee name Enchanted Perty Rental
Amount (\$)	Payee address; City; State; Zip Code
\$50000	4054 Timber Sepp. Dr. Conroe Tx 77304
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Event Expense Meet and Greet Rentals
	Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officultoider living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Office sought Office held OH Deniel Pene Montsomery County Constable Pet
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Other (not on the property and the property)

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME Deniel Pena 3 Filer ID (Ethics Commission File
4 Date 10/22/2023	5 Payee name Enchanted Party Rental
6 Amount (\$)	7 Payce address; City; State; Zip Code 4054 Timber Sepp Dr. Conroc Tx 77304
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expose Meet and Greet Rental
9 Complete ONLY if direct expenditure to benefit C/O	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense. Candidate / Officeholder name Office sought Office held
Date 10/13/2023	Payee name Catfish Effective Event (Ben Blakenship)
Amount (\$) \$\frac{1}{250}\$	Payee address: City: State; Zip Code 219 Simonton St. Conruc Tx 77301
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Advertisins Expense Marketins
Complete <u>QNLY</u> if direct expenditure to benefit C/O	Check If Travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Daiel Pene Montsomery County Constable Pet 2
Date 11/4/2023	The Table at Medeley Event (Ben Blankenship)
Amount (\$)	Payee address: City; State; Zip Code 219 Simonton St. Conroe Tx 7730/
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Advertising Expense Marketins
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Check If Iravel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Daviel Pena Mostgomery County Constable Pet
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

		EXPENDITURE CATE	GORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica CreditCard Payment	y Il Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reinbursement 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)
O'COTOGO AT ANY		The Instruction Guide explain	ins how to complete this form.	La Til ID ITIL Complete Ellery
1 Total pages Schedule F1.	2 FILER N	AME		3 Filer ID (Ethics Commission Filers)
4 Date 10/19/2023	5 Payee no	T-Shirts		
6 Amount (S)	7 Payce at	Macintosh Pr.	Magnolia	State; Zip Code 7× 77354
8 PURPOSE OF EXPENDITURE		y (See Categories listed at the lop of thi	(b) Description Campaign	Apron's printing
	(c)	Check if travel outside of Texas. Complete	Schedule T. Check if Aus	tin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candid	date / Officeholder name	Office sought entsomery County	Constable Pet 2
Date	Payee na			
10/26/2023	Bret	+ Lison Fundre	iser	
Amount (\$)	Payee a	2 404	city: S Montgomery	State; Zip Code 7.356
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this btion Expense Check If travel outside of Texas. Complete:	So Cam	peisning Event
Complete ONLY if direct expenditure to benefit C/OH		ate / Officeholder name	Office sought Montsomery Count	Office held Yet 2.
Date 16/21/20 3 3	Payee na	r General St	-ore	
Amount (\$)	Payee ac	ddress;	City;	State; Zip Code
\$ 20.08	2495	N. Loop 336 L). Conroc	Tx 77304
PURPOSE OF EXPENDITURE	Category	(See Categories listed at the top of this	Meet and	Greet Exponse
		Check if travel outside of Texas, Complete S	Schedule T. Check If Aus	lin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candid	ate / Officeholder name	Office sought	Office held
	AT	TACH ADDITIONAL COPIES	S OF THIS SCHEDULE AS NE	EDED

SCHEDULE F1

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

	EXPENDITURE CATE	GORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wagos/Contract Labor lins how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 9/22/2023	5 Payee name Montgomery County	Republican Wom	e1
6 Amount (\$) # 85 **	7 Payee address; P. 0 Box 1766	Conroe ,	State; Zip Code 7 × 77305
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Food / Bournes Expens (c) Check if travel outside of Texas. Complete	e Monthly M	neeting w/mea/x2
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Montgomery County	Constable Pet 2
Date 10/23/2023	Montgomery County	Republican We	men
Amount (S) \$ 54.84	Payee address; P. 0 Box 1766	Corve, Tx	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Food / Bevers c Exper	use Monthly me	eeting W/med in. TX. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held Constable Pet 2
8/24/2023	Rep Montgomery Cour	ty Republican (Jomen Event
# 200 ° 0	Payee address; P. o Box 1766	Conroc	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the lop of this	Schedule) Description Cupcake	Donation

expenditure to benefit C/OH

Complete ONLY if direct

Check if travel outside of Texas, Complete Schedule T.

Candidate / Officeholder name

Pena

Pet 2

Office held

Check if Austin, TX, officeholder living expense

Office sought

Montsomery County Constable

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Foos Food/Beverage Expense Grit/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overheat/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)

Credit Card Payment	The Instruction Guide explains how to complete this form	n,
1 Total pages Schedule F1:	2 FILER NAME Daniel Pena	3 Filer ID (Ethics Commission Filers)
4 Date 9/4/2023	5 Payee name Eagle Forum Meeting (Montge	omery County)
6 Amount (\$)	7 Payee address; City;	State; Zip Code
# 9.74	P. 0 Box 9671 Sprins	Tx 77380
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Food / Boveres e Med C	n Wattendance
	(c) 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 sough Dariel Penc Montgomery Count	ty Constable Pet Z
Date	Pavee name	
8/2/2023	Rowdy Hayden Campaign fundra	sec
Amount (\$)	Payee address; City;	State; Zip Code
\$ 1500	P.O Box 529 Splendora	Tx 77372
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution Expense Fundaise	er attendance
	Check if travel outside of Texas. Complete Schedule T. Check i	if Austin, TX, officeholder living expense
Complete <u>QNLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sough Daried Peric Montgomery Co	ounty Constable Pet 2
Date	Payee name	
8/29/2023	Liberty Belles Republican Wor	160
Amount (\$)	Payee address: City;	State; Zip Code
\$ 19°°	P.O Box 108/ Conroc	Tx 77305
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Food / Beverage Meetins	w/med purchase
	Check if Iravel 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 sough Deniel Pena Montsomery Co	ounty Constable Pet 2
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS	NEEDED

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic Cred (Card Payment	
1 Total pages Schedule F1	3 Filer ID (Fibics Commission Filers)
4 Date 11/2/2023	5 Payee name
6 Amount (\$)	7 Payee address: City: State: Zip Code P. 0 Box 1081 Conroe Tx 77365
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Brusse Meetins/w meal purchase
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name Candidate / Penc Candidate / Penc Candidate / Officeholder name Office sought Constable Pet 2
Date 12/10/2023	Payee name Top Shelf Storase
Amount (\$) # 660	Payee address: City; State; Zip Code 3130 Supp Rd Conroe 7x 77304
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Rental Expense Material Description Storage fee for Campaign
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Candidate / Officeholder name Office sought Office held Davie Pena Montsomery County Constrable Pet 2
Date 10/26/2023	Montgomery County Republican Women
Amount (\$) \$1,27.42	Payee address: City; State; Zip Code P. O Box 1766 Conroc Tx 77305
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Mea
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Candidate / Pena Candidate / Pena Candidate / Constable Pet 2 Constable Pet 2
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense **Event Expense** Solicitation/Fundralsing Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel In District Contributions/Donations Made By Gift/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) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David 5 Payee name Re - Elect Judge Sentini 10/2/2023 Pinehurst 6 Amount (\$) 7 Pavee address: Zip Code P. 0 Box 558 \$ 3000 77362 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE Contributions Fundraiser Ticket OF EXPENDITURE 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 Daniel Pena Montgomery County Constable Pet 2. Date Payee name Amount (\$) Payee address; City; State; Zip Code Category (See Categories listed at the top of this schedule) Description **PURPOSE** EXPENDITURE 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 Date Payee name Amount (\$) Payee address; City; State; Zip Code Category (See Categories listed at the top of this schedule) Description PURPOSE OF **EXPENDITURE** Check if Iravel 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

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political	al Committee Legal Services Salaries/Wages/Contract Labor Other (enter a		
	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME Device Pene 3 Filer ID (Ethics Commission File)		
4 TOTAL OF UNITEMI	IZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 293	5.41	
5 Date 12/10/2023	6 Payee name CGNG		
7 Amount (S) # 27.47	8 Payee address; City; State 75 East Senta Clara St. Sen Jose Ct		
9 TYPE OF EXPENDITURE	Political Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense Flyer design		
Date 12/4/2023	Daniel Pera Montgomery County Constable Payee name Amazon		
Amount (S)	Payee address; City; State 4/0 Terry Ave N. Seattle WA	e; Zip Code 9 8/09	
TYPE OF EXPENDITURE	Political Non-Political		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the lop of this schedule) Description Advertising Expense Campaign mailers		
	Check if travel outside of Texas. Complete Schedulo T. Chock if Austin, TX, officehold	ar living oxpanso	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Daniel Pere Montgomery County Constable	flice hold Pc+ 2.	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel In District Consulting Expense Gift/Awards/Memorials Expense Travel Out Of District Contributions/Donations Made By Printing Expense Legal Services Salarles/Wages/Contract Labor Other (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule F4. Pena 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date 6 Payee name 10/5/2023 7 Amount (\$) 8 Payee address; State: Zip Code \$ 29.98 Scattle WA 98/09 410 Terry Ave N. TYPE OF > Political Non-Political **EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) (b) Description 10 Campaign Aprons PURPOSE Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date Amount (\$) Payee address; City; State: Zip Code TYPE OF Non-Political EXPENDITURE Political Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED