		TE / OFFICEHON FINANCE RE				FORM C/OH COVER SHEET PG 1
Th	e C/OH Instruction	Guide explains how to c	omplete this form.	1 Filer ID		2 Total pages filed: 67
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Robert		MI	OFFICE USE ONLY Date Received
		NICKNAME	LAST Walker		SUFFIX	AECEIVED ROLL
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; PO Box 2145	APT / SUITE #; (CITY;	ZIP CODE	Date Bind-delivered or Date Postmarked SA JAN 1 5 2025 RA Redelig# 20 Armount SS
	Change of Address	Willis, TX 77378				Date Processed Date Imaged
	CAMPAIGN TREASURER NAME	MS/MRS/MR	Tanet	PROJECT OF THE PROPERTY OF THE	MI	
		NICKNAME	LAST Walker		SUFFIX	
	CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO.		,	PT/SUITE#; CITY	STATE; ZIP CODE
	CAMPAIGN TREASURER PHONE	AREA CODE P	HONE NUMBER	EXTENSION 2572	2_	
	REPORT TYPE	X January 15 July 15	30th day befo	<u></u>	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
	PERIOD COVERED	Month Day Yo 07/01/2024	ear	THROUGH	Month Day 12/31/202	Year 24
10 1	ELECTION	ELECTION DATE Month Day Yo 11/05/2024	ear	Primary General	ELECTION TYPE Runoff Special	Other
L1 (OFFICE	OFFICE HELD (if any) County Commissioner	r Pct 1 Montgome	ry	12 OFFICE SOUGHT County Commis	
			GO	TO PAGE 2		
orn	ns provided by Te	cas Ethics Commission	www.	ethics.state.tx	us	Version V4.1.0.5dd2ace

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

SUPPORT	& IUIALS				2 of 67
13 C / OH NAME	Walker, Robert		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	eholder's k	nowledge or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME			
	SPECIFIC	COMMITTEE ADDRESS	<u></u>		<u></u>
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	ss	Martin Market	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		1.	
TOTALS	<u></u>	CAL CONTRIBUTIONS	e (NONICAELT)	\$	0.00
		PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$	77,327.23
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES CAL EXPENDITURES	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	0.00
				\$	101,890.43
CONTRIBUTION BALANCE	REPORTING PE	· · · · · · · · · · · · · · · · · · ·		\$	147,254.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT	KIMA WHEELER NOTARY PUBLIC, STATE OF TEX Notary ID #12976220 Expires January 15,20	lat CU		o be report	
	TARY STAMP / SEAL ABO	Robert a Wallan	, this the 15		day
or January	M	ertify which, witness my hand and seal of office.	uns ure		uay
Signature of office) Cer administering	Printed name of officer administering	Almin. A	SSS. 3	ering oath

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 3 of 67 **18 FILER NAME** 19 Filer ID Walker, Robert 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE Х SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 77,327.23 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2, \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE E: LOANS 4. \$ X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. \$ 101,890.43 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 7. \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 4,722.16 TO FILER

	MONET	ARY POLITICAL CONTRIBU	JTIC	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete	this f	orm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/67	
2	FILER NAME Walker, Rob		······································		3	Filer ID	
4	Date 11/23/2024	5 Full name of contributor out-of-state PAG Allen Boone Humphries Robinson LLP 6 Contributor address; City; State; Zlp Code 3200 Southwest Freeway Suite 2600 Houston, TX 77027	C (ID#:_		7	Amount of Contribution (\$)	\$1,500.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date 11/23/2024	Full name of contributor out-of-state PAG Barfield, Larry Contributor address; City; State; Zip Code 10827 Painted Crescent Ct Cypress, TX 77433				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/31/2024 Barnhart, Peter Contributor address; City; State; Zip Code 15330 Hilltop View Dr. Cypress, TX 77429					Amount of Contribution (\$)	\$1,250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions) Caldwell Companies)		
	Date 11/23/2024	Full name of contributor out-of-state PAC Binkley, Brett Contributor address; City; State; Zip Code 9209 Stagecoah Dr. Houston, TX 77042				Amount of Contribution (\$)	\$500.00
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions))		
	Date 10/31/2024	Full name of contributor out-of-state PAC Caldwell, Fred Contributor address; City; State; Zip Code 14002 Blanco Falls Lane Cypress, TX 77429				Amount of Contribution (\$)	\$1,250.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions) Caldwell Companies	•		

	MONET	TARY POLITICAL (CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 5/67	
2	FILER NAME Walker, Rob				3	Filer ID	
4	Date 10/31/2024	5 Full name of contributor Cobb FendleyPAC 6 Contributor address; City; S 4424 W Sam Houston Pa Houston, TX 77041	·		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	pation / Job title (See Instructions	<u>;)</u>	9 Employer (See Instructions)		,
	Date 10/31/2024	Full name of contributor Cowgirl Holdings LLC Contributor address; City; St 4818 Harbor Glen Lane Houston, TX 77084	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$2,627.23
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		···
	Date 10/31/2024	Full name of contributor Creel, Chad Contributor address; City; St)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	TX pation / Job title (See instructions)	Employer (See Instructions)	, , . , . ,	
	Date 10/31/2024	Full name of contributor DEC PAC Contributor address; City; St 1 Greenway Plaza Houston, TX 77046	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$1,750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/31/2024	Full name of contributor ERHA PAC Contributor address; City; St 10011 Meadowglen Lane Houston, TX 77042	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions))		
		, , , , , , , , , , , , , , , , , , ,					

	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 6/67	
2	FILER NAME			3	Filer ID	
	Walker, Rob	pert				
4	Date 10/31/2024	 Full name of contributor out-of-state PAC (ID#:_Eastwood, David Contributor address; City; State; Zip Code 17407 US Highway 59 N 		7	Amount of Contribution (\$)	\$500.00
		Houston, TX 77396			 	
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions Geotech)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ Ellaham, Rana Contributor address; City; State; Zip Code 23230 Sumners Creek Ct Katy, TX 77494			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor			Amount of Contribution (\$)	
	10/11/2024	Ghali, Christian Contributor address; City; State; Zip Code	[p. 1 x x x x 1 4 4 7 4 5 7 4 9 7 4 4 4 4 5 5 4 4 4 4 4 4 4 4 4 4 4 4 4		THIS CONTROL OF THE PARTY OF TH	\$1,750.00
		тх				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) North County Profession		Firefighters	
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_ HOME PAC Contributor address; City; State; Zip Code 9511 W Sam Houston Pkwy Houston, TX 77064			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
_	Date	Full name of contributor	}		Amount of Contribution (\$)	
	10/31/2024	Haiff State PAC	,		· · · · · · · · · · · · · · · · · · ·	\$1,750.00
		Contributor address; City; State; Zip Code 1201 N Bowser Road				
		Richardson, TX 75081				
	Principal occuj	pation / Job title (See Instructions)	Employer (See Instructions))		
		······································				

	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/67	
2	FILER NAME Walker, Rot			3	Filer ID	*
4	Date 11/23/2024	5 Full name of contributor out-of-state PAC (ID#: Hamilton, David 6 Contributor address; City; State; Zip Code 12315 Woodthorpe Ln Houston, TX 77024)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#: Harrison, Bill Contributor address; City; State; Zip Code 502 W Montgomery #146 Montgomery, TX 77378			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See instructions)		
	Date 08/05/2024	Full name of contributor out-of-state PAC (ID#: Howes, Renee Contributor address; City; State; Zip Code PO Box 261 Skull Valley, AZ 86338			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	, , , , , , , , , , , , , , , , , , ,	
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ Hutchins, Greg Contributor address; City; State; Zip Code 8556 Majestic Lake Ct Montgomery, TX 77316			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Storm Water Solutions)		
	Date 10/29/2024	Full name of contributor			Amount of Contribution (\$)	\$1,200.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	TARY POLITICAL (CONTRIBUTIO	DNS		SCHEDU	LE A1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/67	
2	FILER NAME				3	Filer ID	
	Walker, Rob	pert					
4	Date 10/11/2024	5 Full name of contributor MCLEA 6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$500.00
		PO Box 7889 The Woodlands, TX 7738	37				
8	Principal occu	I pation / Job title (See Instructions		9 Employer (See Instructions	L ()		
	Date 10/31/2024	Full name of contributor Manners, Michael	Out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,750.00
		Contributor address; City; Si 2505 N. Frazier St.	tate; ZIp Code				
	Principal occur	Conroe, TX 77303 pation / Job title (See Instructions	-7	Employer (See Instructions			
	Fincipal occu			Stalwart Ranch	,		···· v
	Date 10/31/2024	Full name of contributor Matt Gray Campaign	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	LUIOLIL OL.	1	tate: Zin Code		•		φ500.00
		PO Box 1469					
		Porter, TX 77365					
	Principal occu	pation / Job title (See Instructions	;)	Employer (See Instructions)	,	·
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/31/2024	Mendiola, Joe					\$5,000.00
	l	Contributor address; City; St	ate; Zip Code				
		9686 Adcock Acres					
		Conroe, TX 77303					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
				Top Star Construction			
	Date	Full name of contributor	ut-of-state PAC (ID#;_			Amount of Contribution (\$)	4500.00
	10/31/2024		namananian	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$500.00
		Contributor address; City; St 1146 Gardencrest	ate; Zip Code				
	!	Houston, TX 77077					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	and the same and the same transfer and the s	, , ,, ,, <u></u>
_	·		ļ	RG Miller			
				, the state of the			***************************************

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/9 Rpt: 9/67 FILER NAME 3 Filer ID Walker, Robert 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/31/2024 Nelson, Wade \$1,750.00 6 Contributor address; City; State; Zip Code 101 Fairwater Dr. Montgomery, TX 77356 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 07/17/2024 \$2,500.00 Pape-Dawson PAC Contributor address; City; State; Zip Code 2000 NW Loop 410 San Antonio, TX 78213 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 10/31/2024 \$1,750.00 Pape-Dawson PAC Contributor address; City; State; Zip Code 2000 NW Loop 410 San Antonio, TX 78213 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#; 10/31/2024 **Ouiddity PAC** \$2,000.00 Contributor address; City; State; Zip Code 6330 West Loop S Suite 150 Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/31/2024 \$1,750.00 **RS&H Engineers** Contributor address; City; State; Zip Code 3200 Southwest Frwy Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL CONTRIE	BUTIC	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complet	te this fo	orm.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/67	
2	FILER NAME Walker, Rob			- 	3	Filer ID	
4	Date 11/29/2024	 Full name of contributor	PAC (ID#:_		7	Amount of Contribution (\$)	\$1,750.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date 11/23/2024	Full name of contributor out-of-state Reddish, Harold Contributor address; City; State; Zip Code 1.302 Cedar Terrace Court Sugar Land, TX 77479	PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/29/2024	Full name of contributor out-of-state I Reed, Don A. Contributor address; City; State; Zip Code 13444 Swift Creek Pearland, TX 77354				Amount of Contribution (\$)	\$3,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/29/2024	Full name of contributor out-of-state I Signorelli, Danny Contributor address; City; State; Zlp Code 1.401. Woodlands pkwy The Woodlands, TX 77380				Amount of Contribution (\$)	\$1,750.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	And the state of t	<u>, , , , , , , , , , , , , , , , , , , </u>
	Date 11/23/2024	Full name of contributor out-of-state F Smith, Bob Contributor address; City; State; Zip Code 86 Murphy Farm Rd Huntsville, TX 77320				Amount of Contribution (\$)	\$2,000.00
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		······

	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/67	
2	FILER NAME Walker, Rob			3	Filer ID	
4	Date 10/31/2024	5 Full name of contributor out-of-state PAC (ID#: Stoecker, Michael 6 Contributor address; City; State; Zip Code PO Box 247 Conroe, TX 77305		7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#: TCS Engineering LLC Contributor address; City; State; Zlp Code 1999 Calloway Lane Frisco, TX 75036			Amount of Contribution (\$)	\$2,500.00
•	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	The second section of the second seco	
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ TNP PAC Contributor address; City; State; Zip Code 5237 N. Riverside Dr. Ft Worth, TX 76137			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	,		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ TNP PAC Contributor address; City; State; Zip Code 5237 N. Riverside Dr. Ft Worth, TX 76137			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	1		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#: Terracon PAC Contributor address; City; State; Zip Code 10841 S Ridgeview Road Olathe, KS 66061			Amount of Contribution (\$)	\$1,750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	.E A 1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/67	
	FILER NAME Walker, Rob	ert		3	Filer ID	
4 [Date 10/11/2024	 Full name of contributor out-of-state PAC (ID#:_ Westwood Political Action Committee Contributor address; City; State; Zip Code 12701 Whitewater Dr., Suite 300 Minnetonka, MN 55343 		7	Amount of Contribution (\$)	\$2,500.00
8 F	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions			
	Date 11/29/2024	Full name of contributor out-of-state PAC (ID#:_ Whitney, Matt Contributor address; City; State; Zip Code 2040 N Loop 336 Suite 305 Conroe, TX 77304			Amount of Contribution (\$)	\$1,750.00
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 1.0/11/2024	Full name of contributor out-of-state PAC (ID#:_ Zeve, Matthew Contributor address; City; State; Zip Code 907 Nicholson Street Houston, TX 77008			Amount of Contribution (\$)	\$2,500.00
	Principal occuj Principal	oation / Job title (See Instructions)	Employer (See Instructions) Gauge Engineering)		

SCHEDULE F1

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

Loan Repayment/Relmbursement Office Overhead/Rental Expense Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

	Candidate/Officeholder/Politic Credit Card Payment	al Committee	Legal Services The instruction Guide e		_	/Contract Labor ete this form,	OTHER (enter a category not ils	ted above)
1	Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID	
	Sch: 1/53 Rpt: 13/67	Walker, Ro	obert			ļ		
4	Date	5 Payee name	9			, , , , , , , , , , , , , , , , , , ,		
	11/13/2024	105 Cafe						
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip Co	de			
	\$105.55	3010 West	t Davis					
		:						
		Conroe, TX	X 77304					
8	PURPOSE	(a) Category (a	See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE		erage Expense				ide of Texas, Complete Schedule	т,
		_				Campaign Meet	, officeholder living expense	
					l	Campaign week	ung	
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	aht	······································	Office held	
•	expenditure to benefit C/O		ncenduel name	Office 300	yını		Office field	
	Date	h						
	10/10/2024	Payee name 4 Imprint)					
			- Aller of	States 7in De				
	Amount (\$) \$290.38	Payee addre	ess; City; ierce Street	State; Zip Co	ue			
	Ψ230.50	LOT COURT	icide duect					
		Ochkoch i	A# #4001					
		Oshkosh, \					,	
	PURPOSE OF	Ī	See Categories listed at the top		(0)	Description Check If travel outs	ide of Texas, Complete Schedule	r.
	EXPENDITURE	Solicitation	/Fundraising Expense	8		اسبا	, officeholder living expense	•
						Fundraiser 10/2	6/24 Clay Shoot	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office sou	ght		Office held	
	experialitie to beliefit C/O	1						
	Date	Payee name)					
	10/17/2024	4 Imprint						
	Amount (\$)	Payee addre	· ·	State; Zip Co	de			
	\$1,802.73	101 Comm	erce Street					
		Oshkosh, V	VI 54901					
	PURPOSE	(a) Category (S	iee Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE	Solicitation	/Fundraising Expense	e		LI	de of Texas, Complete Schedule	г.
							, officeholder tving expense Fundraiser Clay Shooet	
							and a second and a second as	
	Complete ONLY If direct	Candidate/Off	iceholder name	Office sou	aht		Office held	
	expenditure to benefit C/OF				J			
		······································	<u> </u>					· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement 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 Co	mmittee	Legal Services The Instruction	Guide explains i		_	/Contract Labor ete this form.	•	OTHER (enter a category not listed abo	ve)
1	Total pages Schedule F1:	2	FILER NAM	1E				3	3	Filer ID	
	Sch: 2/53 Rpt: 14/67		Walker, Ro	obert							
4	Date	5	Payee name	е		.,					
	10/03/2024		ABLES SF	ORTING INC							
6	Amount (\$)	7	Payee addr	ess; City;	State;	Zip Co	de				
	\$100.00		357 FM 17	'91 North							
			Huntsville,	TX 77320							
8	PURPOSE	(a)	Category (See Categories listed a	at the top of this sche	edule)	(b)	Description			
Ì	OF EXPENDITURE		Solicitation	ı/Fundraising E	xpense			<u></u>		e of Texas, Complete Schedule T,	
								Fundraiser 10/2		fficeholder living expense	
İ								Tanaraiser 2011		er only officer	
9	Complete ONLY if direct	<u> </u>	Candidate/Of	ficeholder name	0	ffice sou	aht			Office held	
ľ	expenditure to benefit C/Ol			noonologi name	J		9				
	Date		Payee name	9							
	10/03/2024		ABLES SP	ORTING INC							
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de				
	\$331.20		357 FM 17	'91 North							
			Huntsville,	TX 77320	•						
_	PURPOSE	(a)	Category (See Categories listed a	t the top of this sche	dule)	(b)	Description		······································	,·,,,,·, ·
	OF EXPENDITURE			/Fundraising E				L.,.!		of Texas, Complete Schedule T.	
	· · · · · · · · · · · · · · · · · · ·							Fundralser 10/2		fficeholder living expense	
								1 0110101301 1011	20,	24 Olay Onool	
	Complete ONLY if direct	L	Candidate/Of	ficeholder name	<u></u>	ffice sou	aht	,		Office held	
	expenditure to benefit C/OI										
	Date	-	Payee name				****		.,		
	10/03/2024		-	ORTING INC							
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de			<u></u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	\$930.94		357 FM 17	91 North							
			Huntsville,	TX 77320							
	PURPOSE	(a)	Category «	See Categories listed a	t the top of this echo	dula	(b)	Description			
	OF EXPENDITURE			ns/Donations Λ		Jane)	•	Check if travel out		of Texas, Complete Schedule T.	
	EXPENDITORE		Candidate/	Officeholder/Po	olitical Commi	ttee				fficeholder Eving expense	
								Skeet Shoot Do	ona	ation	
	A					rn .		 		5" L.L.	
	Complete <u>ONLY</u> If direct expenditure to benefit C/OH		:andidate/Off	ficeholder name	Oi	ffice sou	gnt			Office held	
			 		······································					· · · · · · · · · · · · · · · · · · ·	

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SCHEDULE F1

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

Loan Repayment/Relmbursement Event Expense Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Polling Expense Printing Expense

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

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: FILER NAME 3 Filer ID Sch: 3/53 Rpt: 15/67 Walker, Robert 4 Date Payee name 10/04/2024 ABLES SPORTING INC 6 Amount (\$) Payee address; City; State; Zip Code \$1,623.74 357 FM 1791 North Huntsville, TX 77320 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Auction Shot Gun 10/26 Clay Shoot Fundaiser ck 798 Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 10/19/2024 ABLES SPORTING INC Amount (\$) Payee address; State; Zip Code \$631.06 357 FM 1791 North Huntsville, TX 77320 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense 10/26 Clay Shoot Fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/28/2024 ABLES SPORTING INC Amount (\$) Payee address; City; State; Zip Code \$23,666.66 357 FM 1791 North Huntsville, TX 77320 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense 10/26 Clay Shoot Fundraiser and guns ck # 817 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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SCHEDULE F1

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

Event Expense Loan F
Fees Office
Food/Beverage Expense Polling

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 B Candidate/Officeholder/Politic		Gift/Awards/Memorials Ex Legal Services	pense Printin	g Exper	ise es/Contract Labor	Travel Out of District OTHER (enter a category	y not listed above)
	Credit Card Payment		The Instruction Guid	e explains how to	comp	lete this form,		
1	Total pages Schedule F1:	2 FILER NAM	E	•			3 Filer ID	
L	Sch: 4/53 Rpt: 16/67	Walker, Ro	bert					
4	Date	5 Payee name)					
	11/15/2024	AMAZON.	COM AMZN.COM/	BI SEATTLE W	/A			
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip	Code			
	\$121.23	440 Terry /	Avenue North					
		Seattle, W	A 98109					
8	PURPOSE OF	(a) Category (s	See Categories listed at the t	top of this schedule)	(b)	Description		
	EXPENDITURE	Event Expe	ense			<u> </u>	outside of Texas, Complete Sci n, TX, officeholder living expens	
						Chili Appreci		-
ĺ						• •		
9	Complete ONLY if direct		iceholder name	Office s	ought		Office held	
	expenditure to benefit C/O	H						
	Date	Payee name	!					
	11/19/2024	AMAZON.0	COM AMZN.COM/	BI SEATTLE W	Ά			
┢	Amount (\$)	Payee addre	ess; City;	State; Zip	Code			
	\$584.52	440 Terry A	Venue North					
		Seattle, W	98109					
	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description		
	OF EXPENDITURE	Event Expe				لسبينا	outside of Texas. Complete Sch	
						Chili Appreci	ı, TX, officeholder fving expensi aton Dinner	#
								
	Complete ONLY if direct	Candidate/Off	iceholder name	Office s	ought		Office held	
	expenditure to benefit C/OI	H			-			
	Date	Payee name						
	12/09/2024		OM AMZN.COM/	BI SEATTLE W	Ά			
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code			
	\$16.23	440 Terry A	venue North					
		Seattle, WA	98109					
	PURPOSE	(a) Category (s	ee Categories listed at the t	on of this schedule)	(b)	Description		
	OF EXPENDITURE		head/Rental Exper			Check if travel	outside of Texas. Complete Sch	
	EXI ENDITORE	:				Province 4	, TX, officeholder living expense	2
						office supplie	15	
	Complete ONLY if direct	Candidate/Off	ceholder name	Office s	ought		Office held	
	expenditure to benefit C/OI		Centique Haine	Office 5	ougin		Office field	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Printing Expense

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment		Legal Services The Instruction Guide		•	ete this form.
1	Total pages Schedule F1: Sch: 5/53 Rpt: 17/67	2 FILER NAME Walker, Rob				3 Filer ID
4	Date 10/15/2024	5 Payee name AMAZON.C	OM AMZN.COM/B	I SEATTLE WA		<u></u>
6	Amount (\$) \$272.68	7 Payee addres 440 Terry Av Seattle, WA	enue North	State; Zip C	ode	
8	PURPOSE OF EXPENDITURE	1	e Categories listed at the top Fundraising Expens		(b)	Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder Eving expense 10/26 Clay Shoot Fundraiser Supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic	eholder name	Office sou	ight	Office held
	Date 08/08/2024 Amount (\$)	Payee name Able's Huntii Payee addres		State; Zip Co	ode	
	\$1,000.00	357 FM 179: Huntsville, T	1.	,		
	PURPOSE OF EXPENDITURE	(a) Category (See Event Exper	e Categories listed at the top ISE	of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Deposit for Fall Clay Shoot Fundralser
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office sou	ight	Office held
	Date 10/08/2024	Payee name Abundant Lif	e Church			
	Amount (\$) \$2,500.00	Payee addres 12165 TX HV		State; Zip Co	ode	
		Willis, TX 77	378		-	
	PURPOSE OF EXPENDITURE	Contributions	categories listed at the top s/Donations Made l fficeholder/Political	Ву	(b)	Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Ck 799 Christmas Event Contribution
	Complete <u>ONLY</u> If direct expenditure to benefit C/O	Candidate/Offic	eholder name	Office sol	ght	Office held
			, . ,			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travei In District Travei Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 6/53 Rpt: 18/67	Walker, Robert	
4 Date	5 Payee name	,
11/22/2024	Academy Sports & Outdoors	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$161.28	1414 N Loop 336 W	
	,	
	Conroe, TX 77304	
8 PURPOSE		Paraula Jan
OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Check if travel outside of Texas, Complete Schedule T.
EXPENDITURE	On DAW and STWEIT OF IAS EXPENSE	Check if Austin, TX, officeholder living expense
		Holiday Gifts
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	H	
Date	Payee name	
07/23/2024	Alive Church	•
Amount (\$)	Payee address; City; State; Zip Code	
\$250.00	2758 I45 S	
	·	
	New Waverly, TX 77358	
PURPOSE		Description
OF	(a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Donation to fundraiser
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	r;	
Date	Payee name	
07/16/2024	Always in Bloom	
Amount (\$)	Payee address; City; State; Zip Code	
\$101.70	13731 FM 1097 Ste 200	
	Willis, TX 77318	
PURPOSE		Description
QF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Short Wald Control of the Control	Check if Austin, TX, officeholder living expense
		Memorial Flowers
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/Ol	T	

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

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a estangar not listed above)

	Candidate/Officeholder/Politic Credit Card Payment	
1	Total pages Schedule F1;	2 FILER NAME 3 Filer ID
	Sch: 7/53 Rpt: 19/67	Walker, Robert
4	Date	5 Payee name
	08/31/2024	Apricity Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$841.19	2257 N Loop 336 W Ste 140 372,
L		Conroe, TX 77304
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder fiving expense Donation to Fundraiser
ł		Donation to Fundraise
L	Consulate ONLY & Book	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	08/20/2024	Bealls
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.58	27714 TX-249
Ì		
		Conroe, TX 77304
Į	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
i	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austlin, TX, officeholder IIVing expense
		Candidate/Officeholder/Political Committee
		Fundraiser
 	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
_	expenditure to benefit C/OI	
	Date	Payee name
	08/28/2024	Bealls
	Amount (\$)	Payee address; City; State; Zip Code
ł	\$64.95	27714 TX-249
		Tomball, TX 77375
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee
ŀ		Fundraiser
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	~	
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement 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 Credit Card Payment	al Committee	Legal Services The Instruction Guide exp		-	/Contract Labor ete this form.	Ö	THER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAM	E				3 Fil	ler ID	
Sch: 8/53 Rpt: 20/67	Walker, Ro	bert						
4 Date	5 Payee name	9						
09/11/2024	Bealls							
6 Amount (\$)	7 Payee addre	ess; City; 5	State; Zip Co	ode				
\$27.05	27714 TX-:	249						
	[
	Tomball, T	X 77375						
8 PURPOSE	(a) Category (s	See Categories listed at the top of the	his schedule)	(b)	Description			
OF EXPENDITURE	Contributio	ns/Donations Made By					of Texas. Complete Schedule T.	
	Candidate/	Officeholder/Political Co	ommittee				ceholder living expense	
					Auction items Fundraiser	Dona	ation to Commissioner Riley	,
	<u> </u>			Ļ	, unaccioci	·		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office held	
					 			
Date	Payee name)						
12/17/2024	Best Buy							
Amount (\$)	Payee addre	ess; City; S	State; Zip Co	ode				
\$573.70	501 Interst	ate 45 South						
							•	
	Conroe, TX	(77301						
PURPOSE	(a) Category (s	See Categories listed at the top of th	nis schedule)	(b)	Description		······································	
OF EXPENDITURE		rhead/Rental Expense			L		f Texas. Complete Schedule T.	
							ceholder living expense	
					Printer Compu	ner		
Complete ONLY if direct	Candidate (Off	Hackelder towns	Office con	alo*			Office hold	
expenditure to benefit C/O		liceholder name	Office sou	grit			Office held	
								·
Date	Payee name							
09/11/2024	Brett Ligon	 			·	 ,		
Amount (\$)	Payee addre	*	State; Zip Co	de				
\$5,000.00	PO Box 558	8						
	Pinehurst, [*]	TX 77362						
PURPOSE	(a) Category (s	see Categories listed at the top of th	ils schedule)	(b)	Description	<u> </u>		
OF EXPENDITURE		ns/Donations Made By					f Texas, Complete Schedule T.	
	Candidate/	Officeholder/Political Co	mmittee				ceholder living expense	
					Donation to Ar	muai	runuraiser	
Consider ON Visiting of	0	San In all an areas					Office ballet	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	-	iceholder name	Office sou	gnt			Office held	
					 			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donati

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 9/53 Rpt: 21/67	2 FILER NAME 3 Filer ID Walker, Robert
	Date 08/10/2024	5 Payee name Bubba's Cajun Kitchen
6	Amount (\$) \$67.65	7 Payee address; City; State; Zip Code 4130 FM 1488 Conroe, TX 77384
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date 12/20/2024	Payee name CIRCLE K #2741471 WILLIS TX
	Amount (\$) \$10.58	Payee address; City; State; Zip Code 25 Calvary Rd Willis, TX 77318
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Vehicle gas
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 08/03/2024	Payee name Conroe Chamber
!	Amount (\$) \$2,000.00	Payee address; City; State; Zlp Code 505 W Davis St Conroe, TX 77301
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Donation to Fundraiser
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donation one Made Du

Event Expense Food/Beverage Expense
Gitt/Awarde/Mamorials Evpense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politic Credit Card Payment		mmiltee	Legal Services The Instruction Guide	Salarles/	Wage	s/Contract Labor	OTHER (enter a	category not listed above)	
1	. Total pages Schedule F1:	2	FILER NAM	E			3	Filer ID	<u> </u>	-
	Sch: 10/53 Rpt: 22/67		Walker, Ro							
4	Date	5	Payee name	9						
	09/09/2024		Conroe Ch	amber						
6	Amount (\$)	7	Payee addre	ess; City;	State; Zip C	ode				
	\$80.00		505 W Dav	ris St						
ļ		ŀ								
L			Conroe, TX	〈 77301						_
8		(a)	Category (s	See Categories listed at the top	of this schedule)	(b)	Description			
l	OF EXPENDITURE		Fees				LJ	tside of Texas, Com	•	
								X, officeholder living	J expense	
		1					Memberhsip Di	ues		
L		<u>L.,.</u>	 			<u>L</u>	· . · · · · · · · · · · · · · · · · · ·			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ficeholder name	Office so	ught		Office he	eld	
F	Date	Ī	Payee name							=
l	10/08/2024		~	ights of Columbus						
┝	Amount (\$)	╁	Payee addre	 	State; Zip Co	ode		 		
l	\$660.00	ŀ	2655 FM 14			J 4.1 U				
l	4000.00	ŀ	2000 1 101 2	100114						
l		l		/ 7700 /						
L		L	Conroe, TX	(77384						
ĺ	PURPOSE	(a)	Category (S	See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE			ns/Donations Made E			السط	side of Texas, Com	•	
			Candidate/	Officeholder/Political	Committee		Donation to Ful	X, officeholder living	expense	
							Donauon to Fu	Huraiser		
L		<u> </u>				<u>L</u>			· · · · · · · · · · · · · · · · · · ·	_
	Complete ONLY if direct expenditure to benefit C/OI		:andidate/Offi	iceholder name	Office sou	ıght		Office he	eld	
	Date		Payee name	1			••			
	10/26/2024		Conroe Kni	ights of Columbus						
	Amount (\$)		Payee addre	ess; City;	State; Zip Co	ode			······································	_
	\$100.00	1	2655 FM 14	488 Rd	•					
			Conroe, TX	777004						
				. / / 304						
	PURPOSE OF	(a)		ee Categories listed at the top	of this schedule)	(b)	Description		La colondala T	
	EXPENDITURE		Fees			ľ		side of Texas, Comp K, officeholder living		
						l	Monthly Membe		САРСНАС	
							monany mona	0,0,0		1
	Complete ONLY Kaling		Invalidate Inte	ionholder nome	O40	(mbs		ME !-	ale a	_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	iceholder name	Office sou	ıgnı		Office he	eia	
	,									

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Relmbursement Office Overhead/Rental Expense Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Polling Expense
Printing Expense
Salarles/Wages/Contract Labor

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

	Candidate/Officeholder/Politice Credit Card Payment	al Committee	Legal Services The Instruction Guide		-	Contract Labor e this form.	OTHER (enter a category not list	ed above)
1	Total pages Schedule F1:	2 FILER NA	ME	· · · · · · · · · · · · · · · · · · ·	,,.	3	Filer ID	
	Sch: 11/53 Rpt: 23/67	Walker, F	Robert					
4	Date	5 Payee nar	ne					
	09/10/2024	Conroe N	loon Lion's Club					
6	\$1,061.00	7 Payee add 1106 Wils Conroe,	son Road	State; Zip Co				
8	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedule)	(b) [Description		
	OF EXPENDITURE		ions/Donations Made e/Officeholder/Politica				de of Texas. Complete Schedule T officeholder living expense a Fundraiser	7.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Officeholder name	Office sou	ght		Office held	
Π	Date	Payee nan	1e	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	09/26/2024	Conroe N	oon Lion's Club					
Г	Amount (\$)	Payee add	ress; City;	State; Zip Co	de			
	\$61.00	1106 Wils	on Road					
	PURPOSE	Conroe, 1	X 77301		<i>(4-)</i> =			<u>,, , , , , , , , , , , , , , , , , , ,</u>
ŀ	PURPOSE OF		(See Categories listed at the top	p of this schedule)	ם נסו) ד	Description 1 Check if travel outsit	de of Texas. Complete Schedule T	•
	EXPENDITURE	Fees			<u>. </u> 2		officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ifficeholder name	Office sou	ght		Office held	
	Date 10/26/2024	Payee nam Conroe N	ne oon Lion's Club					
	Amount (\$) \$61.00	Payee add 1106 Wils	on Road	State; Zip Co	de			
		Conroe, T	X 77301					
	PURPOSE OF EXPENDITURE	(a) Category Fees	(See Categories listed at the top	o of this schedule)			de of Texas. Complete Schedule T officeholder tvlng expense rship	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name	Office sou	ght		Office held	
!	* * * * * * * * * * * * * * * * * * *			····		· · · · · · · · · · · · · · · · · · ·		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Office/holder/Political Comm 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 Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politic Credit Card Payment		Legal Services The Instruction Guide e	Salaries/	Wages	s/Contract Labor	OTHER (enter a category not listed above	e)
1	Total pages Schedule F1:	2 FILER NAM	/ F			3	Filer ID	
	Sch: 12/53 Rpt: 24/67	Walker, R					1 1101 110	
4	Date	5 Payee nam	6					
	11/09/2024	t .	oon Lion's Club					
6	Amount (\$) \$100.00	7 Payee addr 1106 Wilso		State; Zip Co	ode			
	4100.00	1100 001130	JII NOUG					
L		Conroe, T	X 77301					
8	PURPOSE OF	(a) Category (See Categories listed at the top o	of this schedule)	(b)	Description		
	EXPENDITURE	Fees				l-c-l	side of Texas, Complete Schedule T.	
					l	ш	X, officeholder living expense	
						Monthly Memb	ersnip	
L	Complete ONII V if alignet	Canalisiate (Ot		Office	l ar bet		Office held	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ığnı		Office field	
Г	Date	Payee name						
	11/26/2024	Conroe No	on Lion's Club					
<u> </u>	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode			
	\$61.00	1106 Wilso	on Road					
							•	
		Conroe, T	X 77301	···				
	PURPOSE	(a) Category (s	See Categories listed at the top o	f this schedule)	(b)	Description		
1	OF EXPENDITURE	Fees				لبسنا	side of Texas. Complete Schedule T.	
						l-n-mi	K, officeholder living expense	
						Membership		
_	Complete ONLY if direct		ficeholder name	Office sou	ght		Office held	
	expenditure to benefit C/OI	H	······································					
	Date	Payee name						
	11/30/2024	Conroe No	on Lion's Club					
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	de			
	\$464.00	1106 Wilso	n Road					
		Conroe, T	(77301	· · · · · · · · · · · · · · · · · ·				
	PURPOSE OF	(a) Category (s	See Categories listed at the top o	f this schedule)	(b)	Description		
	EXPENDITURE	Fees					side of Texas, Complete Schedule T. K, officeholder living expense	
						Membership	dilications; naid exhense	
						Membership		
	Complete ONI V if diseast	CandidatalOf	ficeholder name	Office	nb+	· · · · · · · · · · · · · · · · · · ·	Office held	· · · · · · · · · · · · · · · · · · ·
	Complete ONLY if direct expenditure to benefit C/OF		noenduel hame	Office sou	HIII		Olling Held	
		· · · "·						**************************************

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politice Credit Card Payment		Legal Services The Instruction Guide exp	Salaries/V	Wages	/Contract Labor	OTHER (enter a category no	t listed above)
1	Total pages Schedule F1: Sch: 13/53 Rpt: 25/67	2 FILER NAM Walker, Ro				3	Filer ID	
4	Date 12/27/2024	5 Payee nam Conroe No	oon Lion's Club					
6	Amount (\$) \$61.00	7 Payee addr 1106 Wilso Conroe, T	on Road	State; Zip Co	ode			
8	PURPOSE OF EXPENDITURE	(a) Category (Fees	(See Categories listed at the top of	this schedule)			skie of Texas, Complete Schedi K, officeholder living expense	ule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		fficeholder name	Office sou	ght		Office held	
	Date 07/26/2024	Payee name Conroe No	oon Lions Club					
	Amount (\$) \$55.00	Payee address 1106 Wilso Conroe, T	on Road X 77301	State; Zip Co				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	this achedule)			side of Texas, Complete Schedt (, officeholder living expense I C S	ule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		Office held	
	Date 08/25/2024	Payee name Conroe No	oon Lions Club					
	Amount (\$) \$61.00	Payee addre 1106 Wilso Conroe, T	on Road	State; Zip Co	de			
	PURPOSE OF EXPENDITURE	(a) Category (s Fees	See Categories listed at the top of t	this schedule)			side of Texas, Complete Schedo (, officeholder living expense I CS	.ile Т.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		Office held	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a extension not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment	y - al Co		ift/Awards/Memorials E egal Services	xpense	Printing E Salarles/	Expens Wages	se :/Contract Labor	Travel Out of District OTHER (enter a cate	t egory not listed above)
L.	Credit Card Paymers		1	The Instruction Gui	de explains	how to c	omple	ete this form.		
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID	
	Sch: 14/53 Rpt: 26/67		Walker, Rob	ert						
4	Date	5	Payee name							
	09/05/2024		Constable Ry	/an Gable						
6	Amount (\$)	7	Payee address	; City;	State;	Zip C	ode			
	\$250.00		PO Box 1309	966						
			Spring, TX 7	7393						
8	PURPOSE	(a)		Categories listed at the	top of this sch	odula)	(b)	Description		
	OF	``		:/Donations Mad		enne)	``		outside of Texas, Complete	e Schedule T.
	EXPENDITURE			fficeholder/Politi		ittee		Check if Austin	, TX, officeholder living exp	oense
İ								Donation to F	-undraiser	
9	Complete ONLY if direct		andidate/Office	eholder name	C	Office sou	ught		Office held	
	expenditure to benefit C/Oi	1								
	Date		Payee name							
	10/30/2024		Corn & Rye S	Spirits					•	
	Amount (\$)	<u></u>	Payee address	; City;	State;	Zip Co	ode	·····		
	\$13.80		•	Rd Suite A103	}	·				
			Houston, TX	77066						
		ļ.,								
	PURPOSE OF	(a)		Categories listed at the	top of this sch	edule)	(b)	Description	outside of Texas, Complete	n Cobadula T
	EXPENDITURE		Food/Bevera	ge Expense					, TX, officeholder living exp	
								Celebration	,,	
	Complete ONLY if direct	C	andidate/Office	eholder name		Office sou	ught		Office held	
	expenditure to benefit C/O	4					-			
	Date		Payee name	· · · · · · · · · · · · · · · · · · ·						
	11/20/2024		Costco Whole	esale						
	Amount (\$)		Payee address		State:	Zip Co	ode		· · · · · · · · · · · · · · · · · · ·	
	\$570.04		8185 TX-242		wswswj	_,,, 5,				
	ΨΟ1 0.0-1		0200 170 2-12							
			The Woodlan	ds, TX 77385						
	PURPOSE			Categories listed at the	top of the core	selule\	(b)	Description		
	OF	()	Food/Bevera		wp or ons sch	eutie)	"		outside of Texas. Complete	e Schedule T.
	EXPENDITURE		1 000/D040/W	ge Expense				Check if Austin	, TX, officeholder living exp	oense
								11/21 Chili A	ppreciation Suppe	er
	Complete ONLY if direct		andidate/Office	eholder name	Ċ	Office sou	ight		Office held	
	expenditure to benefit C/OI	1								
					······	7 117				

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundralsing Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services	Po nse Pri Sa	olling Expens inting Expen ularies/Wage	ise is/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not lis			
	•		 -	The Instruction Guide 6	explains how	v to comp	lete this form.	I			
1	Total pages Schedule F1:	2						3 Filer	JD .		
L	Sch: 15/53 Rpt: 27/67		Walker, Rob	oert .				<u> </u>			
4	Date	5	Payee name	W							
	10/10/2024		Cowgirl Hole	······································				<u> </u>			
6	Amount (\$)	7	Payee addres	•	State; Z	ip Code					
	\$2,791.77		4818 Harbor Glen Ln								
			Houston, TX	< 77084							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the top	of this schedule	e) (b)	Description				
	OF EXPENDITURE			Fundraising Expens			L		exas, Complete Schedule T.		
							Check if Austin		older living expense		
							i diididisei T	V, & V & Y	Diay Officer		
9	Complete ONLY if direct	L	Candidate/Offic	ceholder name	Offic	e sought			Office held		
•	expenditure to benefit C/OI	_	zanuruate/Offic	SCHOOL HAITE	Onic	.c adagiil		· · · · · · · · · · · · · · · · · · ·	ZIII OO II OO		
	Date		Payee name								
	09/10/2024		D&D Feed S								
	Amount (\$)		Payee addres	-	State; Z	ip Code					
	\$70.34		16915 Farm	to Market 2920							
			Tomball, TX	77377							
	PURPOSE	(a)	Category (Se	e Categories listed at the top	of this schedule	_{e)} (b)	Description				
	OF EXPENDITURE		Contribution	s/Donations Made &	Зу	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder fiving expense					
			Candidate/C	Officeholder/Political	Committe	e	اسسا			ev	
							Auction Items Donation to Commissioner Riley Fundraiser				
	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	e sought:			Office held		
	expenditure to benefit C/O		rainano, o III		5.70	~ ₂ . N		***			
	Date		Dayes nome			<u></u>				 	
	10/09/2024		Payee name D&M True V	/alue							
	Amount (\$)		Payee addres		State; Zi	in Code					
	\$51.15		_	gomery St APT 8	winiw; Al						
	**************************************		. 20 -7	general en a							
		:	Willis, TX 77	7378							
	PURPOSE			e Categories listed at the top	of this schedule	₃₎ (b)	Description			•	
	OF EXPENDITURE		Appreciation	Luncheon			Li		exas, Complete Schedule T. older living expense		
							Appreciation				
							4-1-1				
-	Complete ONLY If direct	<u> </u>	Candidate/Offic	ceholder name	Offic	e sought	<u></u>	C	Office held		
	expenditure to benefit C/OI	-			-	·a·**					
							<u> </u>	**************************************	, , , , , , , , , , , , , , , , , , ,		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Lagal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salarles/	erhea xpens xpens Wage	se s/Contract Labor		Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
<u> </u>		,		IS HOW TO CL	niihi.	ete kiis iorin.	r <u>. </u>	
1	Total pages Schedule F1:	£ .					3	Filer ID
	Sch: 16/53 Rpt: 28/67		Walker, Robert					
4	Date	5	Payee name					
	11/27/2024		D&M True Value					
6	Amount (\$)	7	Payee address; City; Sta	te; Zip Co	ode	···		
	\$16.22		400 W Montgomery St APT 8					
			Willis, TX 77378					
_	PURPOSE	ļ	<u>, , , , , , , , , , , , , , , , , , , </u>		(1-)	Ph		
8	OF	1	Category (See Categories listed at the top of this s	schedule)	(U)	Description Check if travel is	ntitsi	de of Texas, Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense					officeholder living expense
						Thanksgiving	Co	ounty Luncheon
		1						
9	Complete ONLY if direct	C	andidate/Officeholder name	Office sou	ıght			Office held
	expenditure to benefit C/O		•					
-	Date	i	Poves poves	vana ista si sa				
	10/28/2024		Payee name Dean, John					
<u> </u>		<u></u>						
	Amount (\$)		Payee address; City; Sta	te; Zlp Co	ode			
	\$594.35							
			TX					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Solicitation/Fundraising Expense			<u></u>		de of Texas, Complete Schedule T.
	LA LIMITORL	l	•					officeholder living expense
						Shoot	ımı	oursement10/26 Fundraiser Clay
		<u> </u>				CHOOL		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ıght			Office held
	experience to beliefe or of	•						
	Date		Payee name					
	12/17/2024		El Tapitio					
	Amount (\$)	Ι''''	Payee address; City; Sta	te; Zip Co	ode			
	\$18.75		509 Hwy 75 N.	-				
			•					
		,	Willis, TX 77378					
	W-1 1 W		· · · · · · · · · · · · · · · · · · ·		<i>a</i> \			
	PURPOSE OF		Category (See Categories listed at the top of this s	schedule)	(0)	Description	outeí	de of Texas, Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense			L-1		officeholder living expense
						Campaign Me		
					1			-
	Complete ONLY if direct		andidate/Officeholder name	Office sou	laht	·		Office held
	expenditure to benefit C/OF		on on one of the state of the s	2,,,00 000	9'''			
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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/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a catagony not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment		mmittee	Gift/Awards/Memoria Legal Services The Instruction C			Vages	/Contract Labor	Travel Out of District OTHER (enter a cate	gery not listed above)
$ _1$	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	
	Sch: 17/53 Rpt: 29/67		Walker, Rol	bert						
4	Date	5	Payee name							
	11/12/2024		Engage Rig	jht						
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de			
	\$2,000.00		1530 Sun C	ity Blvd.						
	:		Suite 120							ļ
			Georgetown	n, TX 78633						
8	PURPOSE	(a)	Category (c.	ee Categories listed at	the ten of this ech	adula)	(b)	Description		
	OF	``	Consulting		tite top or tills som	cauc,			side of Texas, Complete	Schedule T,
	EXPENDITURE							Land .	X, officeholder living expe	
l								ck 816 10/26 C	lay Shoot Fundra	aiser
		ŀ								
9	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght		Office held	
	expenditure to benefit C/O	7								
	Date		Payee name		· · · · · · · · · · · · · · · · · · ·					
	12/12/2024		Engage Rig	ht						
H	Amount (\$)	-	Payee addre	ss; Clty;	State;	Zip Co	de		· · · · · · · · · · · · · · · · · · ·	
İ	\$1,000.00		1530 Sun C	ity Blvd.						
			Suite 120	•						
				n, TX 78633						
_							/L\			· · · · · · · · · · · · · · · · · · ·
	PURPOSE OF	lai		ee Categories listed at	the top of this sch	edule)	(10)	Description Check if travel out	slde of Texas, Complete	Schedule T.
	EXPENDITURE		Consulting I	Expense					X, officeholder living expe	
								Campaign Man	agement	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght		Office held	
	expenditure to benefit C/O	1								
	Date		Payee name			· · · · · · · · · · · · · · · · · · ·				
	11/10/2024		•	nise of Montgo	mery County	/				
┝	Amount (\$)	\vdash	Payee addre	ss; City;	State:	Zip Co	de			
	\$1,475.00		109 Comme	_	·	•				
	T-1, 1. 0.00									
			Conroe, TX	77301						
-	PURPOSE	(a)	Category (Se	ae Categories listed at	the top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Contribution	ns/Donations M	ade By			LI	side of Texas. Complete	
	EXPENDITURE		Candidate/0	Officeholder/Po	litical Comm	ittee		<u></u>	X, officeholder Iving exp	ense
								Donation spons	sorsnip	
						- /"		····	6# 1 11	
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	C	Office sou	ght		Office held	
	The contract of the contract of the									

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
Travel in Dieter

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment	
 -	Total pages Schedule F1:	
	Sch: 18/53 Rpt: 30/67	Walker, Robert
4	Date	5 Payee name
	11/12/2024	Family Promise of Montgomery County
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	109 Commercial Circle
		Conroe, TX 77301
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee
		CK 013 Dolladou
Ļ	A I AND YET BY	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	08/30/2024	Flip Flop Bling
├	Amount (\$)	Payee address; City; State; Zip Code
	\$168.00	10598 FM 1097
	4100.00	10030 1-10 1031
		Willis, TX 77318
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
		Embroidered Elected Official Shirts
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	200100000000000000000000000000000000000
	Date	Payee name
	08/09/2024	Flower Shop Network
	Amount (\$)	Payee address; City; State; Zip Code
	\$291.62	103 Monroe St
		Paragould, AR 72450
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVDENDITUDE	Gift/Awards/Memorials Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Flowers for Pct 1 Employee Family Member Death
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 19/53 Rpt: 31/67	Walker, Robert
4	Date	5 Payee name
	11/08/2024	GF Store 2960
6	Amount (\$) \$63.98	7 Payee address; City; State; Zip Code Spring, TX
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Eving expense
		Campaign Meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	11/23/2024	Gibbs, Billy
	Amount (\$)	Payee address; City; State; Zip Code
	\$860.00	125 April Waters Dr. West
		Montgomery, TX 77356
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule 1. Check if Austin, TX, officeholder living expense
		ck 822 Fall Chili Supper
	······	
!	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/25/2024	Gordon Food Service
	Amount (\$) \$145.04	Payee address; City; State; Zip Code 536 Sawdust Road
		Spring, TX 77380
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) [b) Description Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule 1. Check if Austin, TX, officeholder living expense
		Thanksgiving County Luncheon
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought 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 Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		t.egal Services The Instruction Guid	pense Printing E Salaries/v ie explains how to co	Wages	s/Contract Labor	OTHER (enter a category ho	ot listed above)
 -	Total pages Schedule F1:	2 EH ED N	IAME			<u> </u>	3 Filer ID	
	Sch: 20/53 Rpt: 32/67		, Robert				o inclip	
4	Date	5 Payee n	ame					
	07/03/2024	H-E-B						
6	Amount (\$) \$332.96		ddress; City; nterstate 45 N "X 77378	State; Zip Co	ode			
8	PURPOSE	(a) Categor	Y (See Categories listed at the	ton of this schedule)	(b)	Description		
	OF		ards/Memorials Exper		l` <i>`</i>		utside of Texas. Complete Sched	dule T.
l	EXPENDITURE	Olivi7500	ards monds Exper	100		Check if Austin,	TX, officeholder living expense	
						Meal for coun	ty employees	
Ì							, , ,	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e/Officeholder name	Office sou	l Ight		Office held	
	Date	Payee na	ame					
l	09/25/2024	HEB W	illis					
┡	Amount (4)	Payee a	ddress; City;	State; Zip Co	nda			
	Amount (\$) \$28.75	1 -	nterstate 45 N	State, Zip CC	Juc			
			X 77318		1			
	PURPOSE OF	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description). d
	EXPENDITURE	Food/Be	everage Expense				utside of Texas, Complete Sched	iule 1.
	MAYOR ENTROPEL WILLIAM				ļ	ш	TX, officeholder living expense	
						celebration		
İ								
	Complete ONLY if direct expenditure to benefit C/O		/Officeholder name	Office sou	ight		Office held	
	Date	Payee n	ame					
	10/09/2024	HEB W						
L			 					
	Amount (\$)	Payee a	=	State; Zip Co	ode			
	\$67.96	12350 I	nterstate 45 N					
		Willis, T	X 77318					
	PURPOSE	(a) Category	/ (See Categories listed at the	top of this schedule)	(b)	Description		
	OF	Food/Be	everage Expense				utside of Texas, Complete Sched	dule T.
	EXPENDITURE						TX, officeholder living expense	
					l	Appreciation I	_uncheon	
	Complete ONLY if direct	Candidata	/Officeholder name	Office sou	Idht	· · · · · · · · · · · · · · · · · · ·	Office held	
	expenditure to benefit C/O		achicentrice Hattie	Office Sur	agrit		Office Held	
i								
								- V// 4 D Edd2

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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
OTHER (enter a category not listed above)

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai		ages	/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
Ì	1 Total pages Schedule F1:	2 FILER NAM	E	:		3	Filer ID	
Į	Sch: 21/53 Rpt: 33/67	Walker, Ro						
ı	4 Date	5 Payee name	;					
l	10/29/2024	HEB Willis						
ľ	6 Amount (\$)	7 Payee addre	ess; City; Sta	ate; Zip Cod	de			
l	\$92.49	12350 Inte	rstate 45 N					
l		<u> </u>						
L		Willis, TX 7	77318					
ſ	8 PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule)	(b)	Description		
l	OF EXPENDITURE	Food/Beve	rage Expense				de of Texas, Complete Schedule T. officeholder living expense	
l						Celebration	ourcevoides living expense	
l		1		[00.007.000		
ŀ	9 Complete ONLY if direct	L Candidate/Of	iceholder name	Office soug	tht	 	Office held	
l	expenditure to benefit C/O		igoriologi fidific	omee boug	,			
F	Date	Payee name						<u> </u>
l	10/31/2024	HEB Willis	•					
ŀ	Amount (\$)	Payee addre	ess; City; Sta	ite; Zip Cod	de			
l	\$132.11	12350 Inte	•	,,				
l	+							
l		Willis, TX 7	7318					
ŀ	PURPOSE				(h)	Description		
l	OF	1	see Categories listed at the top of this rage Expense	schedule)	(~,	•	de of Texas. Complete Schedule T.	
l	EXPENDITURE	. 000, 2010	rago Expondo	j		Check if Austlin, TX,	officeholder living expense	
						Celebration		
L		<u> </u>						
ļ	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office soug	jht		Office held	
L		· ·						
	Date	Payee name	\$					
L	11/22/2024	HEB Willis						
	Amount (\$)	Payee addre	•	ite; Zip Cod	de			
l	\$103.57	12350 Inter	state 45 N					
		Willis, TX 7	7318					
	PURPOSE OF	,	ee Categories listed at the top of this	schedule)	(b)	Description		
	EXPENDITURE	Food/Beve	rage Expense				de of Texas. Complete Schedule T. officeholder living expense	
l						Thanksgiving Lu		
						5 5		
-	Complete ONLY if direct		iceholder name	Office soug	tht		Office held	
	expenditure to benefit C/O	Н		•				
H	······································	 		// 2 2 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			<u> </u>	·····

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees
Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 22/53 Rpt: 34/67	Walker, Robert
4	Date	5 Payee name
	11/22/2024	HEB Willis
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$211.90	12350 Interstate 45 N
		Willis, TX 77318
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVDENDITUDE	Gift/Awards/Memorials Expense Check if travel outside of Texas, Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
	1	Holiday Gift Cards
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	T
	Date	Payee name
	11/26/2024	HEB Willis
	Amount (\$)	Payee address; City; State; Zip Code
	\$114,18	12350 Interstate 45 N
	* ·/ - -	
		Millio TV 77910
_	We am sec	Willis, TX 77318
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Thanksgiving County Luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date 11/20/2024	Payee name HEB Willis
	11/29/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,885.00	12350 Interstate 45 N
		Willis, TX 77318
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPERSITORE	Check if Austin, TX, officeholder living expense
		Gift cards to county employees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Oh	lacksquare
		lacksquare

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 Lenal Services

EXPENDITURE CATEGORIES FOR BOX 8(a) 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 c	-	ete this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID
Sch: 23/53 Rpt: 35/67	Walker, Robert		
4 Date	5 Payee name		
12/12/2024	HEB Willis		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$50.00	12350 Interstate 45 N		
	Willis, TX 77318		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
			Christmas Cards
9 Complete ONLY if direct	Candidate/Officeholder name Office so		Office held
expenditure to benefit C/O	Н		
Date	Payee name		
12/12/2024	HEB Willis		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$151.89	12350 Interstate 45 N		
	Willis, TX 77318		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T, Check if Austin, TX, officeholder living expense
			County Staff Christmas Luncheon
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held
expenditure to benefit C/O	-		
Date	Payee name		
07/28/2024	Home Depot		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$192.18	1341 W Davis St		
	Conroe, TX 77304		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXPENDITURE	Event Expense		Check if travel outside of Texas, Complete Schedule T, Check if Austin, TX, officeholder Iving expense
			Fish Fry Supplies
Complete ONLY if direct	Candidate/Officeholder name Office so	ıght	Office held
expenditure to benefit C/OI	- {		

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Salaries/	Expens Wages	se s/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	. ,,,,, , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·			3 Filer ID	
<u>. </u>	Sch: 24/53 Rpt: 36/67	Walker, Ro	oert					
4	Date	5 Payee name						
	07/28/2024	Home Depo	ot					
6	Amount (\$)	7 Payee addre	ss; City; S	State: Zip C	ode			
	\$187.49	1341 W Da	vis St					
		Conroe, TX	77304					
8	PURPOSE	(a) Category (S	ee Categories listed at the top of t	his schedule)	(b)	Description		
	OF EXPENDITURE	Event Expe		·			outside of Texas. Complete Schedule T,	
	EXPENDITORE					اسسنا	TX, officeholder living expense	
						Fish Fry Supp	lies	
					<u> </u>			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		ceholder name	Office sou	ught		Office held	
	Date	Payee name	 					
	09/05/2024	Honor Cafe						
-	Amount (\$)	Payee addre	ss; City; S	State; Zip Co	ode			
	\$55.08	1	pson St Suite 101					
	Ψ00.00	200111101	ipoon or onto ror					
		Conroe, TX	77301					
	PURPOSE	(a) Category (Se	ee Categories listed at the top of t	his schedule)	(b)	Description		
	OF		age Expense	,			utside of Texas. Complete Schedule T.	
	EXPENDITURE		•			البسا	TX, officeholder living expense	
						Political meet	ing	
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ıght		Office held	
	expenditure to benefit C/Ol	" 						
·**********	Date	Payee name						
	10/24/2024	Honor Cafe						
	Amount (\$)	Payee addres	ss; City; 5	State; Zip Co	ndo.			
	\$75.90 j		•	state, Zip Ct	out			
	\$73.90	T02 M 111011	npson St Suite 101					
		Conroe, TX	77301					
	PURPOSE	(a) Category (Se	e Categories listed at the top of the	ıls schedule)	(b)	Description		
	OF EXPENDITURE	Food/Bever	age Expense				utside of Texas. Complete Schedule T.	
	LA LIEFICIA						TX, officeholder living expense	
						Campaign Me	eung	
					<u> </u>			
	Complete ONLY if direct	Candidate/Offic	ceholder name	Office sou	ıght		Office held	
	expenditure to benefit C/OF							
	experialities to beriefit C/Or			·····		, <u></u>		

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mnittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Vages	se s/Contract Labor		Travel In District Travel Out of District OTHER (enter a category not list	ed above)
1	Total pages Schedule F1:	2	FILER NAME 3 Filer							Filer ID	
	Sch: 25/53 Rpt: 37/67		Walker, Rol								
4	Date	5	Payee name			•					
	12/12/2024		Honor Cafe								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode				
	\$142.31		103 N Thon	npson St Suite 10:	1						
				•							
			Conroe, TX	77301							
8	PURPOSE	(a)	Category (s	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			age Expense						de of Texas. Complete Schedule T	;
								<u> </u>		officeholder living expense	
ļ								Campaign Me	eeu	ng	
	······································						L.				
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	0	ffice sou	ight			Office held	
	Date		Payee name		· · · · · · · · · · · · · · · · · · ·						
	09/11/2024		Houston Ga	ırden Center							
	Amount (\$)	-	Payee addres	ss; City;	State;	Zip Co	ode				
	\$31.90		24800 TX-2	•	,						
			4,1000 111 11								
			Tomball, TX	(77375							
	PURPOSE	(a)	Category (sc	ee Categories listed at the	ton of this sche	rlute)	(b)	Description		 	
	OF			s/Donations Mad		,			outsic	de of Texas. Complete Schedule T	,
	EXPENDITURE			Officeholder/Politic		ttee		<u> </u>		officeholder living expense	
								Auction Items Fundraiser	s Do	nation to Commission	er Riley
								rundiaiser			
	Complete ONLY if direct		Candidate/Offi	ceholder name	O	ffice sou	ght			Office held	
	expenditure to benefit C/O	1									
	Date		Payee name								
	11/21/2024		•	nts & Events							
	Amount (\$)		Payee addres		State	Zip Co	nde				
	\$3,919.13		14820 North	•	Siate,	ZIP CC	/u c				
	Φ0,919.10			i r-rvvy							
			#500								
			Houston, TX	〈 77090							
	PURPOSE	(a)	Category (St	e Categories listed at the t	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Event Exper	nse				Lacard		de of Texas, Complete Schedule T	;
	LA LIBITOIL							——		officeholder living expense	1
								Chili Supper I	⊏ve	at if	
							<u></u>	·			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Office	ceholder name	0	ffice sou	ight			Office held	
	expenditure to benefit C/Or	•							M-P-0		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Polling Expense Printing Expense

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

Food/Beverage Expense Gift/Awards/Memorials Expense 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 Sch: 26/53 Rpt: 38/67 Walker, Robert 4 Date Payee name 10/31/2024 Iggys BBQ joint 6 Amount (\$) Payee address; City; State; Zip Code \$520.95 Willis, TX 77378 **PURPOSE** 8 (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense 10/26 Clay Shoot Fundraiser Breakfast ck # 808 Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 11/04/2024 Inman, Dale Payee address; Amount (\$) City; State: Zip Code \$600.00 Willis, TX 77378 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Watch party food ck # 809 Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 12/09/2024 Johnny Sanchez Amount (\$) Payee address; City; State; Zip Code \$280.32 777 Avenue L'Auberge Lake Charles, LA 70601 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) X Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Political Luncheon Sponsorship Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 Expens

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politice Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 27/53 Rpt: 39/67	Walker, Robert	
4	Date	5 Payee name	
	12/19/2024	Johnson, Ladon	
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code TX	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.	
	EXPENSITIONE	Candidate/Officeholder/Political Committee Christmas for county kids	:
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	10/24/2024	KC Meat Processing	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$321.75	1124 Durden St	
		Navasota, TX 77858	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Processing of Fair animals processed ck # 804	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/02/2024	KC Meat Processing	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$479.00	1124 Durden St	
		Navasota, TX 77858	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Meat Processing for future events	,
		model roodshig for ratio 5-5-no	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	<u></u>		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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 fisted above)

	Credit Card Payment	The Instruction Guide explains how to con	-	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 28/53 Rpt: 40/67	Walker, Robert		
4	Date	5 Payee name		
	12/19/2024	KC Meat Processing		
6	Amount (\$) \$175.60	7 Payee address; City; State; Zip Cod 1124 Durden St	le	
		Navasota, TX 77858		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meat Processing future events
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ht	Office held
	Date	Payee name		
	09/25/2024	LOS PERICOS RESTAURANT		
	Amount (\$) \$84.10	Payee address; City; State; Zip Cod 508 S Danville St Willis, TX 77378	le	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Meeting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date	Payee name		
	11/02/2024	LOS PERICOS RESTAURANT		
	Amount (\$) \$68.42	Payee address; Clty; State; Zip Cod 508 S Danville St	le	
		Willis, TX 77378		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Check if travel outside of Texes, Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
!				

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			By - Gift/Awards/Memorials Expense Printing				ense ges/Contract Labor		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	
	Sch: 29/53 Rpt: 41/67		Walker, Ro	bert						
4	Date	5	Payee name					•		
	11/09/2024		LOS PERIO	COS RESTAURANT	٢					
6	Amount (\$)	7	Payee addre	ess; City;	State; Z	ip Cod	e			
ŀ	\$83.06		508 S Dany	/ille St						
		ĺ								
			Willis, TX 7	7378						
8	PURPOSE	(a)	Category (s	ee Categories listed at the top	p of this schedule	e) (b) Description			
	OF EXPENDITURE			rage Expense					ide of Texas, Complete Schedule T.	
							Campaign M		, officeholder living expense inc	
						1	Campaign			
9	Complete ONLY if direct		Candidate/Offi	iceholder name	Offic	e soug	nt		Office held	
-	expenditure to benefit C/O					.				
	Date		Payee name							
	12/23/2024		Lewis, Keni	ny						
	Amount (\$)		Payee addre	ss; City;	State; Z	ip Cod	e			
	\$450.00									
			Willis, TX 7	7378						İ
	PURPOSE	(a)	Category (Se	ee Categories listed at the top	o of this schedule	e) (b) Description			
	OF EXPENDITURE		Contribution	ns/Donations Made	Ву		السط		ide of Texas, Complete Schedule T,	
			Candidate/0	Officeholder/Politica	d Committe	e	Christmas C		, officeholder living expense Mach	
							Omiganas O	(J.) Y	(VO.05)	
	Complete ONLY if direct	-	andidate/Offi	iceholder name	Offic	e soug	nt		Office held	
	expenditure to benefit C/O									
	Date	-	Payee name		· · · · · · · · · · · · · · · · · · ·					
	12/04/2024		Lowe's							
	Amount (\$)		Payee addre	ss; City;	State; Z	in Cod	e			
	\$389.51		1920 Westv	-	,					
			Conroe, TX	77304						
	PURPOSE	(a)	Category (s.	ee Categories listed at the top	of this schedule	e) (b) Description			
	OF EXPENDITURE		Office Holid				Check if travel		ide of Texas, Complete Schedule T,	
	EXPENDITORE					f	اليستنا		, officeholder Iving expense	
						1	Office Holida	ıy L	igna	
	Complete ONLY if direct		andidate/Offi	ceholder name	Offic	e soug	nt		Office held	
	expenditure to benefit C/OI		a luiuale/UIII	oonolusi hallis	Oille	o aoug			Office Hold	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Ĺ	Sch: 30/53 Rpt: 42/67	Walker, Robert
4	Date	5 Payee name
	10/06/2024	MEALS ON WHEELS
6	Amount (\$) \$622.08	7 Payee address; City; State; Zip Code 111 S 2nd St Conroe, TX 77301
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Donation to Fundraiser
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/30/2024	Meals on Wheels
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\ '',	111 S 2nd St
	\$1,243.84	111 5 21/0 50
	· · · · · · · · · · · · · · · · · · ·	Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
İ	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Donation to Fundraiser
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/17/2024	Monarca Bar & Grill
<u> </u>	Amount (\$)	
	` '	
	\$88.45	2259 N Loop 336 W
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T.
	MAN PRINCIPLE OF THE	Check if Austin, TX, officeholder living expense
		Campaign Meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
•		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)
Event Expense Loan Repayment/Relimbu

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Relimbursement 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 8) Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex	Salaries/	Nages/Contract	- "	ry not listed above)
1	Total pages Schedule F1;	2 FILER NAM	<u> </u>	 		3 Filer ID	
Ĺ	Sch: 31/53 Rpt: 43/67	Walker, Ro				- 7,55	
4	Date	5 Payee name	;				
	08/04/2024	Montgome	ry County Community	Foundation			
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode		
	\$257.50	2001 Timb	erloch Pl				
		ļ					
		The Woodl	ands, TX 77380		1	<u> </u>	
8	PURPOSE OF	5	See Categories listed at the top o		(b) Descri		t 1.4 =
	EXPENDITURE		ns/Donations Made B Officeholder/Political			ck if travel outside of Texas. Complete So ck if Austin, TX, officeholder living expens	
		Candidate	Omcenoide//Political	Committee		ion to Fundraiser	
9	Complete ONLY if direct	Candidate/Of	iceholder name	Office sou	l idht	Office held	
	expenditure to benefit C/O				.9	2,,,,,,	
-	Date	Payee name					
	08/12/2024	_	ry County Fair Assoc				
-	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode	·	
	\$500.00	9201 Airpo	rt Rd				
		·					
		Conroe, TX	(77303				
	PURPOSE	(a) Category 79	iee Categories listed at the top o	f this schadula)	(b) Descri	otion	
	OF		ns/Donations Made B			ck if travel outside of Texas, Complete Se	chedule T.
	EXPENDITURE		Officeholder/Political		i inneri	ck if Austin, TX, officeholder living expens	se .
					Donat	ion to Organization	
	0			0/2		0.00 - a 1 - 4 1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		iceholder name	Office sou	ignt	Office held	
					,		
	Date	Payee name					
	08/15/2024	Montgome	ry County Food Bank				. :
	Amount (\$)	Payee addre	=	State; Zip Co	ode		
	\$100.00	1 Food For	Life Way				
		Conroe, TX	77385		<u> </u>		
	PURPOSE	(a) Category (S	ee Categories listed at the top o	f this schedule)	(b) Descrip		
	OF EXPENDITURE		ns/Donations Made B			ck if travel outside of Texas, Complete So	
		Candidate/	Officeholder/Political (Committee	أننسننا	ck if Austin, TX, afficeholder living expension to Golf Tournament Fur	
					Donat	TOTAL CONTROLLER COL	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	laht	Office held	
	expenditure to benefit C/OF			J55 500	- G-1-	~ 111.00 11.01.01	
	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·		

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┝	Total pages Schedule F1:	
	Sch: 32/53 Rpt: 44/67	Walker, Robert
4	Date	5 Payee name
	08/15/2024	Montgomery County Women's Shelter Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.66	19073 I-45
		Conroe, TX 77385
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check If travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Auction Items Donation to Commissioner Riley
		Fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	12/11/2024	Montgomery ISD Education Foundation
-	Amount (\$)	Payee address; City; State; Zip Code
	\$1,545.00	20774 Eva Street
		Montgomery, TX 77356
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check If travel outside of Texas, Complete Schedule T. Check If Austln, TX, officeholder living expense
		Donation Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/21/2024	Montgomery Womens Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	1401 Airport Rd
	ψ1 00 100	102711001110
		Conroe, TX 77301
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions (Donations Made By Contributions (Donations Made By)
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check If travel outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense
		ck 802 Flowers On the Lake event
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	l e e e e e e e e e e e e e e e e e e e
	ms provided by Texas E	hics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2
-ui	ms univided by Texas 🖺	101.5 COLUMN 25.01 VEVEN CUIN 3.51AUC.IA.U5 V CI SIVIT V 4.1.U. JUULAUGA

SCHEDULE F1

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

Event Expense Loan Repay
Fees Office Overl
Food/Beverage Expense Polling Expe
Gift/Awards/Memorials Expense Printing Exp

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER fenter a category not listed above)

Candidate/Officenoider/Politic Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 33/53 Rpt: 45/67	Walker, Robert
4 Date	5 Payee name
11/01/2024	Office Depot
6 Amount (\$) \$37.11	7 Payee address; City; State; Zip Code 1319 W. DAVIS STREET Conroe, TX 77304
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check If travel outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense Campaign Expense Log Book
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
10/24/2024	Office Max Depot
Amount (\$) \$216,59	Payee address; City; State; Zip Code 14424 FM 2920 RD
	Tomball, TX 77377
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
11/19/2024	Office Max Depot
Amount (\$) \$17.74	Payee address; City; State; Zip Code 14424 FM 2920 RD
	Tomball, TX 77377
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check If travel outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought 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/Relmbursement Office Overhead/Rental Expense Palling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made by Candidate/Officeholder/Politics Credit Card Payment		
<u> </u>	T-t-l m Cala-did- Ed.		
]*	Total pages Schedule F1: Sch: 34/53 Rpt: 46/67	Walker, Robert	
4	Date	5 Payee name	
ľ	11/19/2024	Office Max Depot	
6	Amount (\$) \$330.42	7 Payee address; City; State; Zip Code 14424 FM 2920 RD	
		Tornball, TX 77377	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
-	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Office Supplies	
ł		Office Supplies	
l			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	11/22/2024	Office Max Depot	
	······································		
	Amount (\$)	Payee address; City; State; Zip Code	
Ì	\$7.79	14424 FM 2920 RD	
ŀ			
		Tomball, TX 77377	
ĺ	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
[EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Office Supplies	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
ĺ	09/24/2024	Party City	
	UV/ 44/ 4U44		
	Amount (\$)	Payee address; City; State; Zip Code	
	\$59.54	1306 W Davis St	ı
		Conroe, TX 77304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Event Expense Check if travel outside of Texas, Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		celebration	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	i
	expenditure to benefit C/OI	H	
	<u> </u>		
i			I

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Saleries/Manes/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER femaler a gatedown and flood of

	Candidate/Officeholder/Polifice Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 35/53 Rpt: 47/67	Walker, Robert
4	Date	5 Payee name
	09/25/2024	Party City
6	Amount (\$) \$10.05	7 Payee address; City; State; Zip Code .1306 W Davis St
		Conroe, TX 77304
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense celebration
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/07/2024	PayPal
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 2211 N 1st St
<u> </u>		San Jose, CA 95131
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 10/26 Clay Shoot Fundraiser Supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/09/2024	PayPal
	Amount (\$) \$43.98	Payee address; City; State; Zip Code 2211 N 1st St
		San Jose, CA 95131
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought 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/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a extension not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	ál Co	mmlitee	Legal Services The Instruct	ion Guide explai		•	s/Contract Labor ete this form.	OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2	FILER NAM	/E				3	Filer ID	
	Sch: 36/53 Rpt: 48/67		Walker, R	obert						
4	Date	5	Payee nam	е		•				
	11/11/2024		PayPal							
6	Amount (\$)	7	Payee add	ess; City;	Sta	te; Zip C	ode			
	\$625.00		2211 N 1s	t St						
 		ļ								
			San Jose,	CA 95131						
8	PURPOSE	(a	Category	(See Categories Is	ted at the top of this :	schedule)	(b)	Description		
l	OF EXPENDITURE		Event Exp	ense				i1	side of Texas, Comp K, officeholder living	
İ								Chili Appreciation		ovberior.
9	Complete ONLY if direct		Candidate/O	fficeholder naı	ne	Office sou	ught		Office he	ld
	expenditure to benefit C/O	Н								
	Date		Payee nam	е		····				
	10/24/2024	ŀ	Pilot # 023	34						
	Amount (\$)		Payee addr	ess; City;	Sta	te; Zip C	ode			
	\$29.45		639 State	Hwy 75 Nort	th					
			Huntsville,	TX 77320						
Г	PURPOSE	(a)	Category (See Categories lis	ted at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Travel Out	t of District					side of Texas. Comp (, officeholder living	
								i i		Fundraiser Clay Shoot
										·
-	Complete ONLY if direct		Candidate/O	fficeholder nar	ne	Office sou	ught		Office he	ld
	expenditure to benefit C/OI	4								
	Date	İ	Payee nam	е						
	09/25/2024		Pizza Sha	ck						
	Amount (\$)		Payee addr	ess; City;	Sta	te; Zip C	ode			<u> </u>
	\$74.69		115 W Mo	ntgomery St						
		ŀ								
			Willis, TX	77378						
	PURPOSE	(a)	Category (See Categories lis	ted at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Food/Beve	erage Expen	se				side of Texas. Comp <pre></pre>	
İ	•							Campaign Mee		expense
									ः <i>च</i>	
\vdash	Complete ONLY if direct	ـــــر	Candidate/O	fficeholder nar	ne	Office sot	ught		Office he	ld
	expenditure to benefit C/OI						•			
			 ' . '		· · · · · · · · · · · · · · · · · · ·					

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Scilicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politice Credit Card Payment	d Comm	Legal Services The Instruction	Guide explains l		_	Contract Labor te this form.	OTHER (enter a categor	y not listed above)
1	Total pages Schedule F1:	2 F	ILER NAME		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3	Filer ID	
	Sch: 37/53 Rpt: 49/67	V	/alker, Robert						
4	Date	5 P	ayee name						
	12/07/2024	F	ancho Grande Conroe						
6	Amount (\$)	7 P	ayee address;	State;	Zip Coo	le			,
	\$110.83	2	207 N Frazier St						
		ţ							
		C	onroe, TX 77303						
8	PURPOSE OF	1	ategory (See Categories listed a	t the top of this sche	edule)	(b) '	Description	lde et Teves Complete Se	hadula T
	EXPENDITURE	F	ood/Beverage Expense		ı	ŀ		lde of Texas, Complete So , officeholder living expens	
						ı	ت Campaign Meet		
					Ì		, , ,	Ü	
9	Complete ONLY if direct		ndidate/Officeholder name	0	ffice soug	ht		Office held	
	expenditure to benefit C/OI	-1					······································		
	Date	P	ayee name						
	11/29/2024	R	eo's Spice & Seasoning	Inc.					:
	Amount (\$)	Р	ayee address; City;	State;	Zip Cod	le			
	\$185.00	6	44 Farm to Market Road	980					
,		Н	untsville, TX 77320						
	PURPOSE OF		ategory (See Categories listed a	t the top of this sche	dule) ((b)	Description)
	EXPENDITURE	F	ood/Beverage Expense			ļ	البسا	ide of Texas, Complete So , officeholder living expens	
						ı,	ck 820 Chili Sup		_
							,	, ,	
	Complete ONLY if direct	Ca	ndidate/Officeholder name	0	ffice soug	ht		Office held	
	expenditure to benefit C/OI	4							
	Date	р	ayee name						
	11/05/2024	R	ichard Hudgens Photogi	pahy					
	Amount (\$)	P	ayee address; City;	State;	Zip Cod	le			
	\$928.00	1.	9 Woodbury Ct						
			-						
		M	agnolia, TX 77355						
	PURPOSE	(a) C	ategory (See Categories listed a	the top of this sche	dule) ((b)	Description		
	OF EXPENDITURE	S	olicitation/Fundraising E	(pense	ł	Į		ide of Texas, Complete So	· ·
					i	Ŀ		, officeholder living expens aphy 10/26 Fundra	
						,	ok ovo miotogra	apily abizo rolluli	agai Gay Shoot
	Complete ONLY if direct	Ca	ndidate/Officeholder name	0	ffice soug	ht		Office held	<u></u>
	expenditure to benefit C/O			_					
	·····				 				
		,							V4 1 0 Edd20002

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services The Instruction Guide		_	s/Contract Labor ete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NA	ME			3	Filer ID
_	Sch: 38/53 Rpt: 50/67	Walker, F	Robert				
4	Date	5 Payee nar	ne				
	11/01/2024	Rudy's C	ountry Store				
6	Amount (\$) \$49.55		ress; City; vy 105 W Unit E ГХ 77304	State; Zip Co	ode		
8	PURPOSE	(a) Category	(See Categories listed at the top	o of this schedule)	(b)	Description	
	OF EXPENDITURE		erage Expense			lo-mod	slde of Texas, Complete Schedule T. K, officeholder living expense ting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Officeholder name	Office sou	ight		Office held
	Date	Payee nan	ne				
	08/06/2024	Rudy's					
 -	Amount (\$)	Payee add	ress; City;	State; Zip Co	de		
	\$50.32	14545 Hv	vy 105 W Unit E				
	04 100 0 000	Conroe, 1			Ta .		
	PURPOSE OF		(See Categories listed at the top	of this schedule)	(a)	Description Check if travel outs	side of Texas, Complete Schedule T.
	EXPENDITURE	Food/Bev	erage Expense		l	h	K, officeholder living expense
						Campaign Mee	ting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		officeholder name	Office sou	ght		Office held
	Date	Payee nan	ne				
	09/23/2024	SAMS CL	UB #6421 CONROE	TX			
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode		
	\$85.16	2000 Wes	stview Blvd				
		Conroe, 1	X 77304	<u> </u>			
	PURPOSE OF		(See Categories listed at the top	of this schedule)	(b)	Description	
	EXPENDITURE	Event Exp	pense			البسا	side of Texas. Complete Schedule T. K, officeholder living expense
						celebration	, and the state of
	Complete ONLY if direct	Candidate/C	Officeholder name	Office sou	ght		Office held
	expenditure to benefit C/O				J		••

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees
Enod/Reverage Excense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:			
	Sch: 39/53 Rpt: 51/67	Walker, Robert		
4	Date	5 Payee name		
	10/08/2024	SAMS CLUB #6421 CONROE TX		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$144.46	2000 Westview Blvd		
ļ				
		Conroe, TX 77304		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Food/Beverage Expense		
l		Check if Austin, TX, officeholder living expense		
l		Appreciation Luncheon		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H		
	Date	Payee name		
<u> </u>	10/23/2024	SAMS CLUB #6421 CONROE TX		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$217.61	2000 Westview Blvd		
ŀ				
		Conroe, TX 77304		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Food 10/26 Fundraiser Clay Shoot		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
	Date	Payee name		
	11/20/2024	SAMS CLUB #6421 CONROE TX		
-	Amount (\$)	Payee address; City; State; Zip Code		
	\$256,47	2000 Westview Blvd		
		Conroe, TX 77304		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		11/21 Chili Appreciation Supper		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		

SCHEDULE F1

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

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

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

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a strongy not listed above)

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/V The Instruction Guide explains how to co	vages/Contract Labor OTHER (enter a category not listed above) mplete this form.
1 Total pages Schedule F1: Sch: 40/53 Rpt: 52/67	2 FILER NAME Walker, Robert	3 Filer ID
4 Date 11/21/2024	5 Payee name SAMS CLUB #6421 CONROE TX	
6 Amount (\$) \$345.49	7 Payee address; City; State; Zip Co 2000 Westview Blvd Conroe, TX 77304	de
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense 11/21 Chilli Appreciation Supper
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O.	Candidate/Officeholder name Office sou H	ght Office held
Date 11/25/2024	Payee name SAMS CLUB #6421 CONROE TX	
Amount (\$) \$60.47	Payee address; City; State; Zip Co 2000 Westview Blvd Conroe, TX 77304	de
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Thanksgiving County Luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held
Date 12/12/2024 Amount (\$) \$69.60	Payee name SAMS CLUB #6421 CONROE TX Payee address; City; State; Zip Co 2000 Westview Blvd	de
43 0.00	Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder fiving expense Appreciation Breakfast
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a catagony not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 41/53 Rpt: 53/67	Walker, Robert
4	Date	5 Payee name
	08/16/2024	Saltgrass
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$80.44	810 Interstate 45 N
		Conroe, TX 77301
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check If travel outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense
		Campaign Meeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/24/2024	Sam Moon
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.46	17945 I-45
		Shenandoah, TX 77385
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
		Candidate/Officeholder/Political Committee
		Fundraiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	09/10/2024	Sam's Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$861.15	2000 Westview Blvd
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
	,	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Food Bank Clay Shoot
		Food Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- 1
	······································	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide explain		Nages	/Contract Labor	OTHER (enter a categor	y not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID	
	Sch: 42/53 Rpt: 54/67	Walker, Ro	obert					
4	Date	5 Payee name	9					
	11/20/2024	San Jacint	o Lodge 106					
6	Amount (\$) \$150.00	7 Payee addro 106 Bell Si Willis, TX	t.	e; Zip Co	ode			
8	PURPOSE	(a) Category (See Categories listed at the top of this s	chedule)	(b)	Description		
	OF EXPENDITURE		ns/Donations Made By				utside of Texas, Complete Sc	
ŀ	EXPENDITORE	Candidate:	/Officeholder/Political Com	mittee			TX, officeholder living expens	še
						ck 801 calend	ar fundraiser	
					<u> </u>			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ight		Office held	
	Date	Payee name	3					
	11/15/2024	Shmantha,	, Harn					
	Amount (\$)	Payee addre	ess; City; Stat	e; Zip Co	de			
l	\$424.63							
i								•
		ΤX						,
ĺ	PURPOSE · OF		See Categories listed at the top of this s	chedule)	(b)	Description		
	EXPENDITURE	Solicitation	/Fundraising Expense				utside of Texas, Complete Sc TX, officeholder Iving expens	
							Clay Shoot Fundrals	
						for supplies pu		301 Tellingaraement
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		ficeholder name	Office sou	ight		Office held	
	Date	Payee name	9					
	07/02/2024	Southern F	leritage Consulting					
	Amount (\$)	Payee addre	ess; City; Stat	e; Zip Co	ode			
ļ	\$350.00	PO Box 55		•				
	, , , , , , , , , , , , , , , , , , , ,							
		Pinehurst,	TX 77362			· · · · · · · · · · · · · · · · · · ·		
	PURPOSE OF		See Categories listed at the top of this se	chedule)	(b)	Description) full per
	EXPENDITURE	Consulting	Expense				utside of Texas, Complete So TX, officeholder living expens	
]		nagement for June	5C
						Campaign ma	inagement for same	
<u> </u>	Camplete ONI V if discust	Com did -t- /Cf	finahaldar nama	Office	ab*		Office held	
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sou	ıyııı		Office field	

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

1 Total pages Schedule F1: Sch: 43/53 Rpt: 55/67 Walker, Robert 3 Filer ID 4 Date	
4 Date 5 Payee name Southern Heritage Consulting 6 Amount (\$) 7 Payee address; City; State; Zip Code	
08/02/2024 Southern Heritage Consulting 6 Amount (\$) 7 Payee address; City; State; Zip Code	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$350.00 PO Box 558	
Pinehurst, TX 77362	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Consulting Expense Check if travel outside of Texas, Complete Sci	
Check if Austin, TX, officeholder living expense Campaign Management for July	.е
Campaign Management of July	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	,
09/02/2024 Southern Heritage Consulting	
Amount (\$) Payee address; City; State; Zip Code	
\$350.00 PO Box 558	
Pinehurst, TX 77362	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense	hedule T.
EXPENDITURE Consulting Expense Check if travel outside of Texas. Complete Scr	
Campaign Management for Augus	st
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
10/13/2024 Subway 20147	
Amount (\$) Payee address; City; State; Zip Code	
\$408.60 13731 FM 1097 RD West	
Willis, TX 77378	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Food/Beverage Expense Check if travel outside of Texas. Complete Sch	
CHECK A AUSTIN, 1 A, Unicellular willing expense	i e
Campaign Meeting	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
orportation to soliton with	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onto a satestory not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gitt/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 44/53 Rpt: 56/67	2 FILER NAME 3 Filer ID Walker, Robert
	Date 07/29/2024 Amount (\$)	5 Payee name Texans United for Freedom Foundation 7 Payee address; City; State; Zip Code
	\$259.07	6606 FM 1488 Suite 148-686 Magnolia, TX 77354
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Condidate/Officeholder/Political Committee Condidate/Officeholder/Political Committee Condidate/Officeholder living expense Donation to Fundraiser
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/28/2024	Payee name The Corral
	Amount (\$) \$98.42	Payee address; City; State; Zip Code 200 E. Powell Street Willis, TX 77378
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/23/2024	Payee name Tribe Design LLC
	Amount (\$) \$121.78	Payee address; City; State; Zip Code 1420 McIhenny St. Houston, TX 77004
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder tiving expense Graphic Design 10/26 Fundraiser Clay Shoot
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees Food/Beverage Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form,
1	Total pages Schedule F1: Sch: 45/53 Rpt: 57/67	2 FILER NAME Walker, Robert 3 Filer ID
4	Date 10/24/2024	5 Payee name Trophies by Gene Simmons
6	Amount (\$) \$536.00	7 Payee address; City; State; Zip Code 17414 Saddle Crk Montgomery, TX 77357
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Check if Austin, TX, officeholder living expense Ck 803 Awards 10/26 Fundraiser Clay Shoot
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H
	Date 10/11/2024	Payee name Universal Sign and Graphics
	Amount (\$) \$647.52	Payee address; City; State; Zip Code 2114 McCaleb Rd Bldg C Ste 100 Montgomery, TX 77316
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense ck 800 NSRW Sign
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 08/28/2024	Payee name Vernon's Kuntry Katfish
	Amount (\$) \$67.35	Payee address; City; State; Zip Code 5901 W Davis St Conroe, TX 77304
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Political meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertishing 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (emer a category not listed above)

	Candidate/Officeholder/Politics Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 46/53 Rpt: 58/67	Walker, Robert	
4	Date	5 Payee name	
	08/13/2024	Wal-Mart	
	Amount (\$) \$1.06.09	7 Payee address; City; State; Zip Code 27650 TX-249 Tomball, TX 77375	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.	
	CAPENDITORE	Candidate/Officeholder/Political Committee	
		Auction Items Donation to Commissioner Riley Fundraiser	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	08/26/2024	Wal-Mart	
	Amount (\$)	Payee address; City; State; Zip Code	·
	\$20.68	1712 E Washington Ave	
	<u> </u>	Navasota, TX 77868	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder/Political Committee	
		Fundraiser	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	08/26/2024	Wal-Mart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$66.29	1712 E Washington Ave	
		Navasota, TX 77868	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.	
	EXPENDITORE	Candidate/Officeholder/Political Committee	
		Auction Items Donation to Commissioner Riley Fundralser	
		rululaisei	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
_			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 47/53 Rpt: 59/67	Walker, Robert
4	Date	5 Payee name
	09/23/2024	Walmart Conroe
6	Amount (\$) \$26.93	7 Payee address; City; State; Zip Code 1407 N Loop 336 W Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Food Bank Clay Shoot Sponsorship
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	10/02/2024	Wayne Mack Campaign
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code PO Box 2234 Conroe, TX 77305
-	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder Check if Austin, TX, officeholder living expense Judge Wayne Mack Campaign Prayer Breakfast Fundraiser ck 795
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	10/02/2024	Wayne Mack Campaign
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code PO Box 2234
		Conroe, TX 77305
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Montgomery Freezer Sale ck 796
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees
Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 48/53 Rpt: 60/67	Walker, Robert
4 Date 10/02/2024	5 Payee name Wayne Mack Campaign
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code PO Box 2234
	Conroe, TX 77305
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense ck 797 Lone Star Gala Contributions split table
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/02/2024	Wildkat Resource Center
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1.2350 Interstate 45 N
	Willis, TX 77378
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation of school supplies
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date 07/24/2024	Payee name Will Metcalf Campaign
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. BOX 454
	Conroe, TX 77305
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austln, TX, officeholder living expense Donation to fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Varion V4.1.0 Edd2gac2

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees
Food/Beverage Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politice Credit Card Payment	i Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 49/53 Rpt: 61/67	Walker, Robert
4	Date	5 Payee name
	12/12/2024	Willis Ag Booster Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	10005 Highway 75 North
		Willis, TX 77378
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAI LIIDII OILL	Candidate/Officeholder/Political Committee
		Donation Gun Raffle
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/23/2024	Willis Ag Booster lub
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,350.00	612 N. Campbell
	+ 1,1	
		Willis, TX 77378
	<u> </u>	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation to the Club
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	12/04/2024	Willis HS Wrestling
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	
		Willis, TX 77378
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services

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 3 Filer ID				
	Sch: 50/53 Rpt: 62/67	Walker, Robert				
4	Date	5 Payee name				
	10/02/2024	Willis Lions Club				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$200.00	PO Box 250				
		Willis, TX 77378				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.				
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Flags ck 794				
l		i laga ok 194				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
ľ	expenditure to benefit C/O					
_	Dato					
	Date 08/31/2024	Payee name Willis Volleyball				
_						
	Amount (\$)	Payee address; City; State; Zip Code				
	\$288.00	12350 Interstate 45 N				
İ	-					
		Willis, TX 77378				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense				
		Donation to Team				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
-	Date	Payee name				
	09/05/2024	Willis Wildkat Football				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$230.00 12350 Interstate 45 N					
		Willis, TX 77378				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Donation to Fundraiser				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH					

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politice Credit Card Payment	al Committee	Legal Services The Instruction Guide ex		_	/Centract Labor ete this form.	OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	VE.			3	Filer ID	
	Sch: 51/53 Rpt: 63/67	Walker, R	tobert					
4	Date	5 Payee nam	ne		-			
	07/20/2024	Woodfore	st Bank					
6	Amount (\$) \$3.00	7 Payee add 18535 FM Magnolia,	•	State; Zip Co	ode			
8	PURPOSE	(a) Category	(See Categories listed at the top o	of this schedule)	(b)	Description		
	OF EXPENDITURE	Fees				level .	de of Texas, Complete Schedule T, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Officeholder name	Office sou	ght		Office held	
	Date	Payee nam	1e					
	08/20/2024	Woodfore	st Bank					
	Аmount (\$) \$3.00	Payee add 18535 FM Magnolia,	· •	State; Złp Co	ode			
	PURPOSE	(a) Category	(See Categories listed at the top of	of this schedule)	(b)	Description		
	OF EXPENDITURE	Fees				 	de of Texes. Complete Schedule T, officeholder living expense	
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
	Date	Payee nam	16					
	10/20/2024	Woodfore	st National Bank					
	Amount (\$) Payee address; City; State; Zip Code \$3.00 18535 FM 1488 #110							
	Magnolia, TX 77355							
	PURPOSE OF EXPENDITURE	1	(See Categories listed at the top o g/Banking	of this schedule)	(b)		de of Texas, Complete Schedule T. officeholder living expense ent fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol-		officeholder name	Office sou	ight		Office held	
								

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Glit/Awards/Memorials Expense
Lenal Services Salaries/Warces/Contract Labor

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Cambidate/Officeriorder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1;						
	Sch: 52/53 Rpt: 64/67	Walker, Robert					
4	Date	5 Payee name					
	11/09/2024	Woodforest National Bank					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$2.00	18535 FM 1488 #110					
		Magnolia, TX 77355					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Fees Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder Iving expense					
		Initial Fee					
İ							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
	Date	Payee name					
	11/20/2024	Woodforest National Bank					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$3.00	18535 FM 1488 #110					
		Magnolia, TX 77355					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas, Complete Schedule T. Check if Austln, TX, officeholder living expense					
		Statement Fees					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
*******	Date	Payee name					
	12/20/2024	Woodforest National Bank					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$3.00	18535 FM 1488 #110					
		Magnolia, TX 77355					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense bank paper statement fee					
		Bulk paper statement rec					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
·							

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ai Committee Legal Services	Polling Expense Printing Expense Salaries/Wages/Contract Labor Lins how to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	<u> </u>		Filer ID			
Sch: 53/53 Rpt: 65/67	Walker, Robert					
12/12/2024	5 Payee name heb					
6 Amount (\$) \$50.00	7 Payee address; City; St.	ate; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Gift/Awards/Memorials Expense	Check if travel out	side of Texas. Complete Schedule T. K, officeholder living expense S			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held			

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

SCHEDULE K

<u></u>	·					
	The Instruction Guide explains how to complete this form					ages Schedule K: /1 Rpt: 66/67
2	FILER NAME 3 Filer ID					
	Walker, Robert					
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	07/29/2024					\$4,700.00
		6	Address of person from whom amount is received; City; State; Zip Code	******		
	j		1106 Wilson Road			
			Conroe, TX 77301			
		ibution returned to filer				
			Refund of duplicate charge			
	Date		Name of person from whom amount is received		· · · · · ·	Amount (\$)
	07/02/2024		Southern Heritage Consulting, LLC			\$22.16
	Address of person from whom amount is received; City; State; Zip Code PO Box 558					
			Dischuret TV 77909			
	Pinehurst, TX 77362					
	Purpose for which amount is received X Check if political cont					ibution returned to filer
	Reimbursed duplicate renewal fee charge from Name.com					
				-		

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 67/67 2 FILER NAME 3 Filer ID Walker, Robert 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Johnny Sanchez 5 Contribution / Expenditure reported on: Schedule D X Schedule F1 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule G Schedule H Schedule COH-UC Schedule F2 Schedule F4 6 Dates of Travel 7 Name of person(s) traveling Walker, Robert 8 Departure city or name of departure location 12/29/2024 Destination city or name of destination location 12/29/2024 Lake Charles 11 Purpose of travel (including name of conference, seminar, or other event) 10 Means of transportation Private Automobile Politcal Luncheon Sponsorship