FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR **FIRST** MI OFFICE USE ONLY **OFFICEHOLDER** Matthew NAME NICKNAME LAST **SUFFIX** Beasley CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** 26 Rumplecreek Place MAILING **ADDRESS** Change of Address The Woodlands, TX 77381 Date Proces Date Imaged FIRST CAMPAIGN MI TREASURER NAME NICKNAME SUFFIX LAST CAMPAIGN APT / SUITE #; STATE; ZIP CODE **TREASURER ADDRESS** (Residence or Business) CAMPAIGN PHONE NUMBER **EXTENSION** AREA CODE **TREASURER** PHONE REPORT TYPE 15th day after campaign treasurer 30th day before election Runoff January 15 appointment (officeholder only) Exceeded \$500 limit Final Report (Attach C/OH-FR) July 15 8th day before election PERIOD Month Day Year Month Day Year COVERED 01/01/2018 THROUGH 01/25/2018 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year X Primary Runoff Other 03/06/2018 General Special 12 OFFICE SOUGHT (if known) 11 OFFICE OFFICE HELD (if any) None Justice of the Peace District 3 **GO TO PAGE 2** Version V1.0.5521 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 239. 4. TOTAL POLITICAL EXPENDITURES \$ 6,751. CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 37,912.	SUPPORT	& IUIALS			2 of 14
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I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. DEBORAH ARRAZATE Notary Public, State of Texas My Commission Expires September 17 2018 Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworm to and subscribed before me, by the said Mathew Beaster, this the				OF THE LAST DAY	0.00
Signature of officer administering Printed name of officer administering Title of officer administering oath	AFFIX NOT Sworm to and subscoof Februar	Notary Public, State My Commission E. September 17 2 FARY STAMP / SEAL A cribed before me, by the property of the commission of the commission of the commission of the cribed before me, by the c	true and correct and includes a under Title 15, Election Code. ZATE of Texas 8 pires 8018 Signature 800VE Said Mathew Beasley certify which, witness my hand and seal of office.	Candidate or Officeholder	e reported by me

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 3 of 14 18 FILER NAME 19 Filer ID Beasley, Matthew 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE N SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2,300.00 X 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 300.00 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 4. SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS [X]\$ 6,068.43 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ $|\mathbf{x}|$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 603.96 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS X \$ 79.23 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12. TO FILER Version V1.0.5521

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MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A	
The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/14		
2 FILER NAME Beasley, Ma			3 Filer ID	
4 Date 01/10/2018	 5 Full name of contributor out-of-state PAC (ID#:_ Hintz, James (Mr.) 6 Contributor address; City; State; Zip Code 28340 Woodsons Lake)	7 Amount of Contribution (\$) \$10	
9 Principal accur	Spring, TX 77386 pation / Job title (See Instructions)	S. Employee (Can Instructions	-)	
• Principal occu	padon / Job lide (See Instructions)	9 Employer (See Instructions	sj	
Date 01/19/2018	Full name of contributor out-of-state PAC (ID#:_ Michels Esq., Joe (Mr.) Contributor address; City; State; Zip Code 27117 Paula Lane Oak Ridge, TX 77385		Amount of Contribution (\$) \$10	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	·			
Date 01/16/2018	Full name of contributor out-of-state PAC (ID#: Moore, JR (Mr.) Contributor address; City; State; Zip Code 22 Cape Jasmine Place The Woodlands, TX 77381		Amount of Contribution (\$) \$10	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Date 01/20/2018	Full name of contributor out-of-state PAC (ID#:_Perry, Will (Mr.) Contributor address; City; State; Zip Code 95 N Bacopa Drive The Woodlands, TX 77389		Amount of Contribution (\$) \$2,00	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)))	
orms provided h	y Texas Ethics Commission www.ethics.	etata ty ue	Version V1.0.	

		ONETARY (I	N-KIND) POLITICAI	L	SCHEDULE A2		
The Instruction Guide expl		ction Guide expl	ains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 5/14		
2 FILER NAME Beasley, Matthew			·		3 Filer ID		
4	TOTAL OF	UNITEMIZED IN-	KIND POLITICAL CONTRIBUTIONS		\$		
5	Date 01/10/2018	Full name of contriWang, LinaContributor address3714 W Benders	s; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$300.001 Meet and Greet Food/Bev	′	
40		Spring, TX 7738			Check if travel outside of Texas. Complete Schedule T	_	
10	Principal occi	ipation / Job title (FOR	NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-	N-JUDICIAL) (See instructions)		
12 Contributor's principal occupation (Fo		principal occupation (Fo	OR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)			
14	Contributor's	employer/law firm (FOF	JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
16	If contributor i	s a child, law firm of pa	rent(s) (if any) (FOR JUDICIAL)				
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POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee 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. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 1/3 Rpt: 6/14 Beasley, Matthew 4 Date Payee name 01/03/2018 Beasley, Matthew (Mr.) 6 Amount (\$) Payee address; City: State; Zip Code \$2,562.89 26 Rumplecreek Place The Woodlands, TX 77381 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Reimbursement Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/12/2018 Community Impact Newspaper Amount (\$) Payee address; City; State; Zip Code \$2,946.08 8400 N Sam Houston Pwky Houston, TX 77064 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Mailing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/19/2018 Facebook Amount (\$) Payee address; City; State; Zip Code \$34.91 1 Hacker Way Menlo Park, CA 94025 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Ads -Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Version V1.0.5521 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By -Travel in District Travel Out of District Food/Beverage Expense Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committe 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: 2/3 Rpt: 7/14 Beasley, Matthew 4 Date Payee name 01/16/2018 Facebook Payee address; Amount (\$) City; State; Zip Code \$76.80 1 Hacker Way Menlo Park, CA 94025 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Ads Candidate/Officeholder name Complete ONLY if direct Office held Office sought expenditure to benefit C/OH Date Payee name 01/03/2018 Facebook Amount (\$) Payee address; City; State; Zip Code \$18.75 1 Hacker Way Menlo Park, CA 94025 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Ads Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name MCTP 01/15/2018 Payee address; State; Zip Code Amount (\$) City; \$150.00 2603 East Bluelake Drive Magnolia, TX 77354 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Table Sponsor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Version V1.0.5521 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Polling Expense Printing Expense Salaries/Wages/Contract Labor Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/3 Rpt: 8/14 Beasley, Matthew Date Payee name 01/02/2018 Star Stop 6 Amount (\$) Payee address; City; State: Zip Code \$40.00 16983 Gleneagles Drive Conroe, TX 77385 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Fuel for block walking Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Consulting Expense Office Overhead/Rental Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel in District Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 1/5 Rpt: 9/14 Beasley, Matthew \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name 5 Date Carrabba's Grill 01/07/2018 Payee address; State; Zip Code Amount (\$) City, 25665 I 45 \$49.44 Spring, TX 77380 TYPE OF Non-Political Political **EXPENDITURE PURPOSE** (b) Description 10 (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 volunteers Candidate/Officeholder name Office sought Office held 11 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 01/25/2018 Chu/s Payee address; State; Zip Code Amount (\$) City: 18035 I-45 South \$29.51 Shenandoah, TX 77385 TYPE OF Non-Political Х Political **EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food with constituent Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F4: 2 FILER NAME Sch: 2/5 Rpt: 10/14 Beasley, Matthew \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date 6 Payee name 01/24/2018 Gooses Acre Payee address; State; Zip Code Amount (\$) City; 21 Waterway Ave \$51.14 The Woodlands, TX 77380 TYPE OF Non-Political Political Х **EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) 10 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. OF Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Empower Texans Event 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/20/2018 Grimaldi's Pizza Payee address: State: Zip Code Amount (\$) City; \$42.81 20 Waterway Ave The Woodlands, TX 77380 TYPE OF Political Non-Political Х **EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense food with volunteers Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F4: 2 FILER NAME Sch: 3/5 Rpt: 11/14 Beasley, Matthew TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 6 Payee name 01/06/2018 HEB State; Zip Code 7 Amount (\$) Payee address; City: \$53.52 3601 FM 1488 The Woodlands, TX 77384 TYPE OF Political Non-Political **EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) 10 **PURPOSE** (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense block walk -fuel 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Pacific Yard House 01/12/2018 Payee address; State: Zip Code City: Amount (\$) \$42.18 101 Metcalf Street Conroe, TX 77301 TYPE OF Non-Political Political X **EXPENDITURE 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 political meal Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Fees Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Consulting Expense Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F4: 2 FILER NAME Beasley, Matthew Sch: 4/5 Rpt: 12/14 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name Date 01/24/2018 Randalls State; Zip Code Payee address; City; Amount (\$) 9420 College Park Drive \$37.96 The Woodlands, TX 77385 TYPE OF Non-Political Political Х **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) ΩE Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Block walk Office held 11 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Payee name Date USPS 01/16/2018 State: Zip Code Amount (\$) Payee address: City: \$6.65 9450 Pinecroft Drive Spring, TX 77380 TYPE OF Non-Political Political **EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Fee to mail CFR Tracking 9505 5117 7494 8016 2685 83 Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Version V1.0.5521 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

EXPENDITURE	ES M/	ADE BY CREDIT	CARD		sc	CHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	r I Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp	Office Ov Polling E Printing E Salaries/N	ayment/Reimbursement erhead/Rental Expense opense xpense Vages/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	nt & Related Expense
1 Total pages Schedule F4: Sch: 5/5 Rpt: 13/14 TOTAL OF UNITEMIZ	Beas	R NAME sley, Matthew PENDITURES CHARG	GED TO A CRE	DIT CARD	3 Filer ID	
5 Date 01/05/2018 7 Amount (\$) \$290.75	6 Paye USP 8 Paye 9450	e name	State; Zip Co			
9 TYPE OF EXPENDITURE		X Political	Non-Pol	itical	<u> </u>	
10 PURPOSE OF EXPENDITURE	,	gory (See Categories listed at the tr ertising Expense	op of this schedule)	ı <u>—</u>	el outside of Texas. Complete So tin, TX, officeholder living expens	i
11 Complete ONLY if direct expenditure to benefit C/Oł		late/Officeholder name	Office sou	ght	Office held	
Forms provided by Texas E	hics Cor	nmission www	.ethics.state.tx.u	S		Version V1.0.5521

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Event Expense Transportation Equipment & Related Expense Travel in District Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Consulting Expense Contributions/ Donations Made By -Printing Expense Travel Out of District OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule G: 2 FILER NAME Beasley, Matthew Sch: 1/1 Rpt: 14/14 Date Payee name 01/11/2018 Pappasito's Amount (\$) Payee address; City; State; Zip Code \$36.15 18101 IH 45 Reimbursement from political contributions intended Shenandoah, TX 77385 Check if travel outside of Texas. Complete Schedule T. (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Political meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/06/2018 Pei Wei Amount (\$) Payee address; City; State; Zip Code \$43.08 10868 Kuykendahl Road Reimbursement from political contributions Х The Woodlands, TX 77382 intended PURPOSE Check if travel outside of Texas. Complete Schedule T. Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** food with volunteers Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH