APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

Se	ee CTA Instruction Guide for	detailed instructio	ns.	1 Total pages f	2.9
2 CANDIDATE NAME	MS / MRS / MR FIR	RST	Mi	OFFIC	E USE ONLY
NAME	Mr. Re	eed	M	Filer ID #	E OSE ONE
	NICKNAME LAS	sr	SUFFIX		
			SUPPLA	Date Received	
	Bor	nd		155	
3 CANDIDATE MAILING ADDRESS	2741 Costa Mesa Dr.,	Little Elm,	TX 75068	APR	0 3 2023
				Date Hand-delivere	d or Postmarked
4 CANDIDATE PHONE	AREA CODE PHONE NUM	MBER	EXTENSION	Receipt#	Amount \$
	(817) 832-4139			Date Processed	
5 OFFICE HELD (if any)				Date Imaged	
6 OFFICE SOUGHT (if known)	FISD Trustee - Place 4				
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST	М	NICRNAME	LAST	SUFFIX
	Mr. Rodney	M		Bond	
8 CAMPAIGN	STREET ADDRESS	APT/SUITE #	CITY;	STATE.	ZIP CODE
TREASURER STREET ADDRESS (residence or business)	401 Boyd. Dr.	1118	Grapevine,	TX	76051
9 CAMPAIGN	AREA CODE PHONE NUM	BER.	EXTENSION		
TREASURER PHONE	(817) 475-9950		EATERSION		
O CANDIDATE SIGNATURE	I am aware of the Nep				
	I am aware of my res the Election Code.				
	I am aware of the rest from corporations and	rictions in title 18 I labor organizat	5 of the Election C ions,	Code on contr	ibutions
	They	31		4/3/	23

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Reed M Bond			6 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	t.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	s	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,389.02
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	366.59
A	4.	TOTAL POLITICAL EXPENDITURES	\$	7,868.97
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	HE \$	11,000.00

18 SIGNATURE

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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit		
NOTARY STAMP/SEAL		
Sworn to and subscribed before me by	this th	e day of
20, to certify which, witness my hand and se		
Signature of officer administering oath Print	ed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration My name is Reed M Bond	, and my date of birth	is 8/31/1981
My address is 2741 Costa Mesa Dr.	1 1441	TX 75068 USA
Executed in Denton (street) County, State of Ta	X on the 3 day of 1	(state) (zip code) (country)
	Signature of Cano	dioare/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	ed M Bond 20 Filer ID (Ethics 92156901	s Commission Filers)	
	CHEDULE SUBTOTALS AME OF SCHEDULE	SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,389.02	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	s	
4.	SCHEDULE E: LOANS	\$ 11,000.00	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 7,868.97	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	
10.	0. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	S	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	s	

SCHEDULE A1

The	Instruction Guide explains how to complete the	nis form.	1 Total pages Schedule A1:
Reed M E			3 Filer ID (Ethics Commission Filers) 92-15-69017
4 Date	5 Full name of contributor out-of-state P Patrick Wamhoff	AC (ID#:)	7 Amount of contribution (\$)
03/13/2023	6 Contributor address: City: 1136 Churchill Dr., Frisco, TX	State; Zip Code	238.38
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state Pa	AC (ID#)	Amount of contribution (\$)
03/13/2023	Contributor address: City; 9423 Tanyard LN, Frisc	State; Zip Code	50.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PA James Smith	GC (ID#)	Amount of contribution (\$)
03/17/2023	Contributor address; City: 2535 Loch Haven Ct., Frisco,	State; Zip Code	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date		C (ID#)	Amount of contribution (\$)
03/18/2023	Terry D Gooch Contributor address; City;	to streets at	100.00
	1636 Lake Way Dr., Little Elm,	TX 75068	. 00100
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
	ATTACH ADDITIONAL COPIES of the contributor is out-of-state PAC, please see Instru	OF THIS SCHEDULE AS NE	EDED porting requirements.

SCHEDULE A1

e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
	3 Filer ID (Ethics Commission Filers) 92-1569017
5 Full name of contributor out-of-state PAC (ID#) Sue Gamboa	7 Amount of contribution (5)
6 Contributor address, City, State; Zip Code 2675 Calmwood Dr., Little Elm, TX 75068	50.00
and the Color of t	stions)
Full name of contributor out-of-state PAC (ID#:) Joanne M.G. Janssen	Amount of contribution (\$)
Contributor address: City: State: Zip Code 1316 Pelican Dr., Frisco, TX 75033	20.00
pation / Job title (See Instructions) Employer (See Instruc	tions)
Full name of contributor out-ot-state PAC (ID#) Brett McCann	Amount of contribution (\$)
Contributor address: City: State: Zip Code 6295 Larkspur Ln., Frisco, TX 75036	47.70
cation / Job title (See Instructions) Employer (See Instruc	lions)
Full name of contributor out-of-state PAC (ID#) Toni Fabry	Amount of contribution (\$)
Contributor address: City: State: Zip Code	47.70
pation / Job title (See Instructions) Employer (See Instructions)	ions)
	Sond 5 Full name of contributor Sue Gamboa 6 Contributor address. 2675 Calmwood Dr., Little Elm, TX 75068 upation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Joanne M.G. Janssen Contributor address: City: State: Zip Code 1316 Pelican Dr., Frisco, TX 75033 pation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Brett McCann Contributor address: City: State: Zip Code 6295 Larkspur Ln., Frisco, TX 75036 Dation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Brett McCann Contributor address: City: State: Zip Code 6295 Larkspur Ln., Frisco, TX 75036 Employer (See Instructions) Full name of contributor Toni Fabry Contributor address: City: State: Zip Code 7338 Willow Creek Drive, Frisco TX 75703

AL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE A1

The	e Instruction Guide explains how	to complete th	nis form.	1 Total pages Schedule A1:
Reed M				3 Filer ID (Ethics Commission Filers) 92-1569017
4 Date	5 Full name of contributor Scott Fagan	out-of-state P	PAC (ID#:)	7 Amount of contribution (\$)
03/26/2023	6 Contributor address; 4727 Druid Hills Dr.,	City; Frisco TX	State; Zip Code 75034	191.70
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor Vickie Costa	out-of-state PA	AC (ID#:)	Amount of contribution (\$)
03/23/2023	Contributor address; 10521 Chablis Lane,	City; Frisco T	State; Zip Code	47.70
Principal occup	pation / Job title (See Instructions)	The Edward Control of the Control of	Employer (See Instruction	ons)
Date 03/23/2023	Full name of contributor Shirley Robert	out-of-state PA	GC (ID#)	Amount of contribution (\$)
03/23/2023	Contributor address: 6362 Loudoun Spring	City;	State; Zip Code Frisco TX 75036	191.70
Principal occup	pation / Job title (See Instructions)		Employer (See Instruction	ons)
Date	Full name of contributor Howard Akin	out-of-state PAG	C (ID#)	Amount of contribution (\$)
03/21/2023	Contributor address: 44 Armstrong Drive, F	City; Frisco TX	State: Zip Code	959.70
Principal occup	ation / Job title (See Instructions)		Employer (See Instruction	ons)
	ATTACH ADDITIO	NAL COPIES (OF THIS SCHEDULE AS NEI	EDED

SCHEDULE A1

	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
Reed M		3 Filer ID (Ethics Commission Filers) 92-1569017
4 Date 03/21/2023	5 Full name of contributor out-of-state PAC (ID#:	
03/21/2023	6 Contributor address: City: State: Zity: 15039 Spider Lily Rd, Frisco TX 75035	1770
3 Principal occu	upation / Job title (See Instructions) 9 Employer	(See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$)
03/19/2023	Contributor address: City: State; Zig 13167 Cleburne Drive, Frisco TX 75035	47.70
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor out-of-state PAC (ID#	Amount of contribution (\$)
03/18/2023	DeLeon English Contributor address; City: State; Zip 1441 Thornhill Lane, Little Elm TX 75068	
Principal occup		(See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/15/2023	Contributor address: City: State: Zip 7501 Veronica Lane, Frisco TX 75033	
Principal occup	-W ((See Instructions)
W.		

SCHEDULE A1

Reed M Bond 4 Date 5 Full name of contributor Gerald Turner 5 Gerald Turner 6 Contributor address: City: State: Zip Code 7 836 Roundtable Road, Frsico TX 75035 5 Principal occupation / Job title (See Instructions) Date Full name of contributor Amy Snow Contributor address: City: State: Zip Code 14551 Daneway Drive, Frisco TX 75035 Principal occupation / Job title (See Instructions) Date Full name of contributor Sonya Christle Contributor address: City: State: Zip Code 14561 Daneway Drive, Frisco TX 75035 Principal occupation / Job title (See Instructions) Date Full name of contributor Sonya Christle Contributor address: City: State: Zip Code 3746 Elmstead Drive, Frisco TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 47.70 Amount of contribution (\$) Employer (See Instructions)		e Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1:
1	Reed M	_		3 Filer ID (Ethics Commission Filers
Research	4 Date	001 01 31010	9 PAC (ID#:)	· · · · · · · · · · · · · · · · · · ·
Principal occupation / Job title (See Instructions) Date Amy Snow Contributor address: Principal occupation / Job title (See Instructions) Date Sonya Christle Contributor address: City: State: Zip Code Amount of contribution (\$) Amount of contribution (\$) Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Amount of contribution (\$) Amount of contribution (\$) Amount of contribution (\$) Sonya Christle Contributor address: City: State: Zip Code Amount of contribution (\$) Amount of contribution (\$) Amount of contribution (\$) Sonya Christle Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033)3/13/2023	6 Contributor address; City;	State; Zip Code	23 70
Date Amy Snow Contributor address; City: State: Zip Code 14551 Daneway Drive, Frisco TX 75035 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) Amount of contribution (\$) 47.70 Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Amount of contribution (\$) Amount of contribution (\$) Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Employer (See Instructions) Amount of contribution (\$)		7836 Roundtable Road, Frsio	co TX 75035	20.70
Amy Snow	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Amount of contribution (S) Contributor address: City: State: Zip Code 14551 Daneway Drive, Frisco TX 75035 Employer (See Instructions)	Date	231 31 31310	PAC (ID#:)	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Sonya Christle Contributor address: City: State: Zip Code 3746 Elmstead Drive, Frisco TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Amount of contribution (S) State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033	3/08/2023			47 70
Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Sonya Christle Contributor address: City: State: Zip Code 3746 Elmstead Drive, Frisco TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Employer (See Instructions) Amount of contribution (S) Contributor address: City: State: Zip Code 3/07/2023 Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033		Contributor address; City;	State; Zip Code	47.70
Date Full name of contributor Sonya Christle Sonya Christle Contributor address: City: State: Zip Code State: Zip Code State: Zip Code Contributor address: City: State: Zip Code Zip Code State: Zip Code Zip		14551 Daneway Drive, Frisco	TX 75035	
Sonya Christle Contributor address: City: State: Zip Code 3746 Elmstead Drive, Frisco TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (s) 47.70 Amount of contribution (s) 47.70 Amount of contribution (s) 47.70 Amount of contribution (s) Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033	Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Sonya Christle Contributor address: City: State: Zip Code 3746 Elmstead Drive, Frisco TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Keith Groat Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033	Date	The property of the control of the c	PAC (ID#:)	Amount of contribution (S)
Contributor address: City: State: Zip Code 3746 Elmstead Drive, Frisco TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) Keith Groat Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033	3/07/2023	Sonya Christle		22
Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) Keith Groat Contributor address; City; State; Zip Code 4936 Toledo Bend Dr., Frisco TX 75033		AND		47.70
Date Full name of contributor Keith Groat Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033 Amount of contribution (\$) 959.70		3746 Elmstead Drive, Frisco	TX 75034	0
3/07/2023 Keith Groat Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033 Amount of contribution (\$) 959.70	Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Xeith Groat Contributor address: City: State: Zip Code 4936 Toledo Bend Dr., Frisco TX 75033	Date	Full name of contributor out-of-state	PAC (ID#)	Amount of contribution (S)
4936 Toledo Bend Dr., Frisco TX 75033	3/07/2023	Keith Groat		
Principal country () William Bella Dr., Frisco 1X 75033	3/01/2023	Contributes	State; Zip Code	959 70
Principal accounts to 1.1.1.11		4936 Toledo Bend Dr., Frisco	TX 75033	000.70
	Principal occup			ons)

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

SCHEDULE A1

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

Instruction Guide explains how to complete the	his form.	1 Total pages Schedule A1	
	A	3 Filer ID (Ethics Commission Filers) 92-15-6-9017	
5 Full name of contributor put-of-state if	PAC (ID#:)	7 Amount of contribution (\$)	
6 Contributor address. City: 2909 Hagen Drive, Plan	state: Z _{Ip Code} no TX 75025	95.70	
	9 Employer (See Instruct	tions)	
	PAC (ID#:)	Amount of contribution (\$)	
Amy Haynes			
Contributor address; City;	State: Zip Code	47.70	
6308 Brownstone Dr., McKinn	ey TX 75070		
pation / Job title (See Instructions)	Employer (See Instruct	ions)	
	PAC (ID#)	Amount of contribution (S)	
Brenda Rogers	• 1000 1 • 1 × 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.00	
Contributor address; City;	State; Zip Code	9.30	
2251 Feathering Dr. Frisco TX	Feathering Dr. Frisco TX 75036		
pation / Job title (See Instructions)	Employer (See Instruct	ions)	
	AG (ID#)	Amount of contribution (\$)	
***************************************		404 70	
	State; Zip Code	191.70	
	X 75033		
pation / Job title (See Instructions)	Employer (See Instructi	ons)	
	Sond 5 Full name of contributor Julie Greene 6 Contributor address. City: 2909 Hagen Drive, Plan pation / Job title (See Instructions) Full name of contributor Amy Haynes Contributor address: City: 6308 Brownstone Dr., McKinn pation / Job title (See Instructions) Full name of contributor Brenda Rogers Contributor address: City: 2251 Feathering Dr. Frisco TX pation / Job title (See Instructions) Full name of contributor Brenda Rogers Contributor address: City: 2251 Feathering Dr. Frisco TX pation / Job title (See Instructions) Full name of contributor Brenda Rogers Contributor address: City: City	Sond 5 Full name of contributor Julie Greene 6 Contributor address. 2909 Hagen Drive, Plano TX 75025 Upation / Job title (See Instructions) Full name of contributor Amy Haynes Contributor address: City: State: Zip Code 6308 Brownstone Dr., McKinney TX 75070 Dation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Full name of contributor Brenda Rogers Contributor address: City: State: Zip Code Contributo	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

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

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
Reed M E		3 Filer ID (Ethics Commission Filers) 92-1569017
4 Date	5 Full name of contributor out-of-state PAC (ID#: John Rutledge	AND A
03/04/2023	6 Contributor address: City. State: 16417 Ryder Rock Rd., Frisco TX 750	2ip Code 33 95.70
8 Principal occu	ppation / Job title (See Instructions) 9 Employ	yer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$)
03/04/2023	Contributor address; City; State; 11043 Ruidosa Lane, Frisco TX 75033	200.10
Principal occup	pation / Job title (See Instructions) Employ	ver (See Instructions)
Date 03/03/2023	Full name of contributor out-of-state PAC (ID#:	
03/03/2023	Contributor address: City: State: 2	200.70
Principal occup	eation / Job title (See Instructions) Employ	ver (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/03/2023	Contributor address: City: State: Z 3071 Cape Buffalo Trail, Frisco TX 750	303.70
Principal occup	ation / Joh title (See Instruction)	er (See Instructions)
	ATTACH ADDITIONAL COPIES OF THIS SCI	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

- Title reque	sted information is not applicable, DO NOT	include this page in the	report.
The	Instruction Guide explains how to complete t	his form.	1 Total pages Schedule A1:
Reed M E			3 Filer ID (Ethics Commission Filers) 92-15-69017
4 Date	5 Full name of contributor out-of-state Harrison Cohen	PAC (ID#:)	7 Amount of contribution (\$)
03/03/2023	6 Contributor address: City: 6817 Southpoint Drive, Dallas	State; Zip Code	239.70
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor out-of-state f	PAC (ID#:)	Amount of contribution (\$)
03/03/2023	Contributor address; City; 1136 Churchill Dr., Fris	State; Zip Code	47.70
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state F	AC (ID#:)	Amount of contribution (\$)
03/03/2023	Contributor address: City; 8400 Stonebrook Pkwy, Frisco	State; Zip Code O TX 75034	23.70
Principal occup	pation / Job title (See Instructions) #1936	Employer (See Instruction	ions)
Date	Full name of contributor out-of-state P	AC (ID#)	Amount of contribution (\$)
03/03/2023	Contributor address: City: 9338 Cherry Brook Lane, Frise	State: Zip Code	23.70
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ons)
	ATTACH ADDITIONAL COPIES If contributor is out-of-state PAC, please see Insl	OF THIS SCHEDULE AS NE	EEDED

SCHEDULE A1

Th	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Reed M I		9 of 14 3 Filer ID (Ethics Commission Filers) 92-1569017
4 Date	5 Full name of contributor out-of-state PAC (ID#: Justin Harville	
03/03/2023	6 Contributor address; City; State; 3263 Appleblossom Dr., Frisco TX 75	
8 Principal occ	mation / Lab MM (O.)	ployer (See Instructions)
Date 03/03/2023	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
	Contributor address; City; State; 1508 Waterfall Lane, Little Elm TX 75	^{Zip Code} 95.70
Principal occup	pation / Job title (See Instructions) Empl	oloyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/03/2023	Contributor address: City: State; 720 Telemark Trail, Frisco TX 75036	47.70
Principal occup	eation / Job title (See Instructions) Emplo	loyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#	
03/03/2023	Contributor address: City: State: 4029 Veneto Drive, Frisco TX 75033	^{zip Code} 191.70
Principal occup	otion / I-b (it io	oyer (See Instructions)
	ATTACH ADDITIONAL COPIES OF THIS SO	

SCHEDULE A1

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

e Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1
		3 Filer ID (Ethics Commission Filers)
5 Full name of contributor out-of-state PAC (ID#) Frank Deutschmann		7 Amount of contribution (S)
6 Contributor address: City: 9300 DAYSTAR DR., Plano	State: Zip Code	191.70
	9 Employer (See Instruc	tions)
Full name of contributor Out-of-state	PAC (ID#))	Amount of contribution (\$)
Contributor address: City: 10712 Patton Drive, McKinne	State; Zip Code y TX 75070	47.70
pation / Job title (See Instructions)	Employer (See Instruct	ions)
Full name of contributor cet-of-state in Lyndi Linker	PAC (ID#)	Amount of contribution (\$)
Contributor address: City, State; Zip Code 2870 Killdeer Trail, Prosper TX 75078		95.70
pation / Job title (See Instructions)	Employer (See Instruct	ons)
Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
Contributor address: City: 15112 Christopher Lane, Frisc	State: Zip Code	23.70
ation / Job title (See Instructions)	Employer (See Instruction	ons)
	Sond 5 Full name of contributor Frank Deutschmann 6 Contributor address: City: 9300 DAYSTAR DR., Plano upation / Job title (See Instructions) Full name of contributor Summer Elliott Contributor address: City: 10712 Patton Drive, McKinne pation / Job title (See Instructions) Full name of contributor Contributor address: City: 2870 Killdeer Trail, Prosper T. pation / Job title (See Instructions) Full name of contributor Contributor address: City: 2870 Killdeer Trail, Prosper T. pation / Job title (See Instructions) Full name of contributor Jennifer Kent Contributor address: City: 15112 Christopher Lane, Frisce	Sond 5 Full name of contributor Frank Deutschmann 6 Contributor address: City: State: Zip Code 9300 DAYSTAR DR., Plano TX 75025 upation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Summer Elliott Contributor address: City: State: Zip Code 10712 Patton Drive, McKinney TX 75070 pation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Lyndi Linker Contributor address: City: State: Zip Code 2870 Killdeer Trail, Prosper TX 75078 pation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Full name of contributor Jennifer Kent Contributor address: City: State: Zip Code 15112 Christopher Lane, Frisco TX 75035

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

SCHEDULE A1

Th	e Instruction Guide explains how to com	nplete this form.	1 Total pages Schedule A1:
2 FILER NAME Reed M I		*	3 Filer ID (Ethics Commission Filers) 92-1569017
4 Date	5 Full name of contributor out-	-of-state PAC (ID#:)	7 Amount of contribution (\$)
03/03/2023	6 Contributor address: Cit 6817 Southpoint Drive, D		43.86
Principal occ	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)	Amount of contribution (\$)
03/03/2023	Contributor address; City 11771 Capitan Lane, Fris	- Lip Code	21.78
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-o	of-state PAC (ID#)	Amount of contribution (\$)
3/02/2023	Contributor address: City 6503 Eden Valley Drive, F		47.70
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of	f-state PAC (ID#:)	Amount of contribution (\$)
3/02/2023	Contributor address: City: 8101 Bobwhite Drive, Fris	2.p 0000	95.70
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
	ATTACH ADDITIONAL CO		

SCHEDULE A1

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

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1
Reed M E			3 Filer ID (Ethics Commission Filers) $92-1569017$
4 Date 03/01/2023	5 Full name of contributor out-of-state PAC Elizabeth Heinrich 6 Contributor address; City: 1508 Waterfall Lane, Little Elm	State; Zip Code	7 Amount of contribution (S) 95.70
3 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 03/01/2023	Full name of contributor Marsha Flewelling Contributor address; City: City:	State; Zip Code	Amount of contribution (\$) 71.70
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/27/2023	Contributor address; City; 11306 Casa Grande Trl., Frisco	State; Zip Code	Amount of contribution (\$) 95.70
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/26/2023	Full name of contributor Elizabeth Heinrich Contributor address: City: 1508 Waterfall Lane, Little Elm 7	State; Zip Code	Amount of contribution (S) 95.70
	pation / Job title (See Instructions)	Employer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE A1

TI	ne Instruction Guide explains how	to complete i	this form.	1 Total pages Schedule A1:
Reed M				3 Filer ID (Ethics Commission Filers 92-1569017
4 Date 02/20/2022	5 Full name of contributor Marian Maitlen	out-of-state	PAC (ID#:	7 Amount of contribution (\$)
6 Contributor address: City; State; Zip Code 1406 Randy Drive, Weatherford, TX TX 76086				95.70
3 Principal occ	supation / Job title (See Instructions)		9 Employer (See Instru	uctions)
Date	Full name of contributor	out-of-state (PAC (ID#:)	Amount of contribution (\$)
2/20/2022	Lindy Shinn			
	Contributor address;	City;	State; Zip Code	23.70
	3615 Corkwood Drive	, Frisco	TX 75034	20.70
Principal occu	pation / Job title (See Instructions)		Employer (See Instru	ctions)
Date	Full name of contributor	out-of-state P	AC (ID#)	Amount of contribution (\$)
2/17/2022	Rodney M Bond		261	
LITTLOZZ	Contributor address;	City;	State; Zip Code	23.70
	401 Boyd Dr. 1118, G	rapevine	e, TX 76051	20.70
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date	Full name of contributor	Out-of-state Pr	AC (ID#)	▶ 20040000 0000 00000 00 000
04404000	Michelle Milholland	out-of-state Py)	Amount of contribution (\$)
2/10/2022	Contributor address;	City;	State; Zip Code	170 70
	6050 Chamberlyne Di	rive, Frisc	co TX 75034	4/9./0
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
			1	

SCHEDULE A1

The	Instruction Guide explains how to	complete this	s form.	1 Total pages Schedule A1:
Reed M E				3 Filer ID (Ethics Commission Fi
4 Date	5 Full name of contributor out-of-state PAC (ID#) Kaitlyn Mathews		7 Amount of contribution (\$)	
)2/08/2023	6 Contributor address: 2836 Eccleston Street,	23.7		
Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructi	ons)
Date	Full name of contributor unt-of-state PAC (ID#:)		Amount of contribution (\$)	
	Contributor address.	City;	State: Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruction	ons)
Date	Full name of contributor	out-pi-state PAC	(10#)	Amount of contribution (\$)
	Contributor address:	City,	State; Zip Code	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruction	ons)
Date	Full name of contributor	out-of-state PAC	(ID#y	Amount of contribution (\$)
	Contributor address; (City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruction	ns)

LOANS

SCHEDULE E

	e Instruction Guide explains how to com	plete this form.	1 Total pages Schedule E:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Reed M Bon	d		921569017
	NITEMIZED LOANS		\$ 11,000.00
5 Date of loan		te PAC (ID#:)	9 Loan Amount (S)
6 Is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate
YLN			11 Maturity date
12 Principal occupation	ion / Job title (See Instructions)	13 Employer (See Instructions)	1
14 Description of Coll	ateral	Check if personal fun account (See Instruct	nds were deposited into political
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address, City;	State; Zip Code	8
not applicable		SEC CERT SECULIARIES	
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan		PAC (ID#)	Loan Amount (\$)
Is lender a financial Institution?	Lender address, City;	State; Zip Code	Interest rate
YFN		1	Maturity date
Principal occupatio	on / Job title (See Instructions)	Employer (See Instructions)	
Description of Colla	iteral	Check if personal fund account (See Instruction	ds were deposited into political
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
not applicable	Guarantor address; City;	State; Zip Code	
	on (See Instructions)		
· · · · · · · · · · · · · · · · · · ·	n (See instructions)	Employer (See Instructions)	TENERAL POWER AND ADDRESS OF THE PARTY OF TH
	ATTACH ADDITIONAL COP	IES OF THIS SCHEDULE AS NEE	'DED
If ler	nder is out-of-state PAC, please see Ins	struction guide for additional reg	porting requirements.

SCHEDULE F4

	EXPENDITURE	CATEGORIES FOR	3OX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Polit	Event Expense Fees Food/Beverage Expense By Git/Awards/Memorials Ex cal Committee Legal Services	Loan Repayment Office Overhead/	Rembursement Rental Expense Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expe Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4	2 FILER NAME			0 wo
11	Reed M Bond			3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITER	MIZED EXPENDITURES CHA	RGED TO A CREDI	TCARD	\$ 366.59
5 Date	6 Payee name			000.00
01/13/2023	Geeky Beths Marketing			
7 Amount (\$)	8 Payee address:		Char	
550.00	6505 SW 150th St, Augu	ısta, KS 67010	City	State; Zip Code
9 TYPE OF EXPENDITURE	Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Digital Marketing	The second secon	Description signed and	modified website
	(c) Check if travel outside of Texas (Complete Schedule T	Chack if Austin	n. TX, allicahalder living expensa
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder na	ime Office so		Office held
Date 01/17/2023	Payee name Geeky Beths Marketing			
Amount (S)	Payee address,		City;	A
100.00	6505 SW 150th St, Augu	sta, KS 67010		State: Zip Code
100.00				
TYPE OF EXPENDITURE	Political	Non-Political		
TYPE OF	Political Category (See Categories Insted at the to Digital Marketing	op of this schedule)	Description signed and i	modified website
TYPE OF EXPENDITURE PURPOSE OF	Category (See Categories listed at the to	op of this schedule) Des	signed and i	modified website

SCHEDULE F4

	EVENDITUE			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi	Food/Beverage Expense By Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F4:	2 FILER NAME	now to complete this form.	T	
//	Reed M Bond		3 Filer ID (Ethics Commission Filers) 921569017	
4 TOTAL OF UNITER	MIZED EXPENDITURES CHARGED TO	O A CREDIT CARD	\$ 366.59	
5 Date	6 Payee name			
02/03/2023	Geeky Beths Marketing			
7 Amount (\$)	8 Payee address;	61.	_	
150.00	6505 SW 150th St, Augusta, KS	Gity:	State; Zip Code	
9 TYPE OF EXPENDITURE	Political	Non-Political		
10	(a) Category (See Categories listed at the top of this sche	edule) (b) Description		
PURPOSE OF EXPENDITURE	Digital Marketing	A STATE OF THE STA	d modified website	
	(c) Check if travel outside of Texas. Complete Sche	edule T Check if Au	stin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/15/2023	Geeky Beths Marketing			
Amount (s) 145.00	Payee address; 6505 SW 150th St, Augusta, KS	Gity; 67010	State; Zip Code	
TYPE OF EXPENDITURE	Political	Non-Political		
	Category (See Categories listed at the top of this sche	edule) Description		
PURPOSE OF EXPENDITURE	Digital Marketing		d modified website	
	Check if travel outside of Texas, Complete Scheo	dule T. Check if Aus	stin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
		-		
	ATTACHARRITIONAL			
rmo provided by T	ATTACH ADDITIONAL COPIES OF TI	HIS SCHEDULE AS NEE	EDED	

SCHEDULE F4

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

	EXPENDITURE CATEGOR	IES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Madi Candidate/Officeholder/Poli	Event Expense Loa Fues Offi Food/Beverage Expense Polit e By Gift/Awards/Memorials Expense Prin	in Repayment/Reimbursement ce Overhead/Rental Expense ling Expense iting Expense aries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4		w to complete this form.	
	Reed M Bond		3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITE	MIZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 366.59
5 Date	6 Payee name		F
02/21/2023	Geeky Beths Marketing		
7 Amount (S) 332.50	8 Payee address. 6505 SW 150th St, Augusta, KS 6	City:	State; Zip Code
9 TYPE OF EXPENDITURE	■ Political No	on-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Digital Marketing		d modified website
11	(c) Check if travel butside of Texas. Complete Schedule	T Office if Au	stin, TX, afficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 03/23/2023	Payee name Geeky Beths Marketing		
Amount (S)	Payee address		
250.00	6505 SW 150th St, Augusta, KS 6	7010	State: Zip Code
TYPE OF EXPENDITURE	Political No	on-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Digital Marketing		d modified website
	Check if travel culside of Texas, Complete Schedule	T. Check if Aus	itln, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F4

	EXPENDITURE CATEGORIES	S FOR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi	Event Expense Loan R Fees Office C Food/Beverage Expense Polling By Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Dverhead/Rental Expense Expense a Expense s/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Ex Travel In District Travel Out Of District Other (enter a category not listed above		
1 Total pages Schedule F4:	2 FILER NAME Reed M Bond	o complete this form.	3 Filter ID (Ethics Commission Filer 921569017		
4 TOTAL OF UNITER	MIZED EXPENDITURES CHARGED TO A C	CREDIT CARD	\$ 366.59		
5 Date 01/26/2023	6 Payee name First Graphic Services		300.00		
7 Amount (\$) 2,350.00	8 Payee address; 229 Garvon St., Garland, TX 75040	City;	State; Zip Code		
9 TYPE OF EXPENDITURE	Political Non-	Political			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description Printing of cal	mpaign signs		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 02/14/2023	Payee name First Graphic Services				
Amount (\$) 3,769.37	Payee address; 229 Garvon St., Garland, TX 75040	City;	State; Zip Code		
TYPE OF EXPENDITURE	Political Non-F	Political			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Avertising expense	Description Printing of car	mpaign signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expensu Transportation Equipment & Related E

By Gitt/Awards/Memorials Expense Printing E cal Committee Legal Services SalanesA	Wages/Contract Labor	Travel In District Travel Out Of District Other (enter a category not listed above)
	complete this form.	
Reed M Bond		3 Filer ID (Ethics Commission Filers) 921569017
MIZED EXPENDITURES CHARGED TO A CR	REDIT CARD	\$ 366.59
6 Payee name		
First Graphic Services		
8 Payee address.	City	State; Zip Code
229 Garvon St., Garland, TX 75040		Sale, 2p code
Political Non-Po	olitical	
(a) Category (See Categories listed at tim top of this schedule) Advertising expense	(b) Description Printing of ca	mpaign signs
(c) Check if travel mutside of Texas. Complete Schedule T.	Cneck if Au	stin, TX, officeholder living expense
Candidate / Officeholder name C		Office held
Payee name Print Runner		
Payee address:	Gitv	State Zip Code
8000 Haskell Ave., Van Nuys, CA 91		State Zip Code
Political Non-Po	olitical	
Category See Categories listed at the lop of this schedule) Avertising expense	Printing of bu	siness cards
Check if travel outside of Texas, Complete Schedule T.	Check if Au	stin, TX, officeholder living expense
Candidate / Officeholder name O	ffice sought	
	The Instruction Guide explains how to 2 FILER NAME Reed M Bond MIZED EXPENDITURES CHARGED TO A CR 6 Payee name First Graphic Services 8 Payee address. 229 Garvon St., Garland, TX 75040 Political Non-Pr (a) Category (See Categories listed at time top of this schedule) Advertising expense (c) Check it travel in this de of Texas Complete Schedule T. Candidate / Officeholder name Payee name Print Runner Payee address. 8000 Haskell Ave., Van Nuys, CA 91 Political Non-Pr Category (See Categories listed at the top of this schedule) Avertising expense	The Instruction Guide explains how to complete this form. 2 FILER NAME Reed M Bond MIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name First Graphic Services 8 Payee address. City. 229 Garvon St., Garland, TX 75040 Political Non-Political (a) Category [See Categories isted at tim top of this schedulo] Advertising expense Printing of categories and provided of Taxas Complete Schedule T. Check if Au Candidate / Officeholder name Office sought Payee name Print Runner Payee address. City: 8000 Haskell Ave., Van Nuys, CA 91406 Political Non-Political Category [See Categories isted at the top of this schedule] Description Printing of but the category [See Categories isted at the top of this schedule] Political

SCHEDULE F4

		EXPENDITURE	CATEGORIES	FOR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	Office C Polling I pense Printing Salaries	payment/Reimbursement verhead/Rental Expense Expense Expense //Wages/Contract Labor	Travel In District Travel Out Of Distr	ipment & Related Expen
		The Instruction Guide	explains how to	complete this form.		
1 Total pages Schedule F4:	2 FILER Reed M E				3 Filer ID (Ethics 921569017	Commission Filers)
4 TOTAL OF UNITER	1IZED EXP	ENDITURES CHAP	RGEDTOAC	REDIT CARD	\$ 366.5	9
5 Date	6 Payee	name				
02/17/2023	Walmart					
7 Amount (S)	8 Payee	address;		City;	State:	Zip Code
20.44	12220 F	M 423, Frisco, TX	X 75033		S.d.o.	2.0 0000
9 TYPE OF EXPENDITURE	in the state of th	Political	Non-f	Political		
10 PURPOSE OF EXPENDITURE		(See Categories listed at the to XPENSES	op of this schedule)	(b) Description Ralleys, canv	asing, meet 8	greets,
	(c)	Check if travel outside of Texas. C	Complete Schedule T	Check if Au	stin, TX, officeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/OH	Cano	fidate / Officeholder nar	me	Office sought	Office h	neld
2/21/23	Payee i Walmart	name				
Amount (S)	Payee a	address:		City	C	
172.41		M 423, Frisco, TX	X 75033	City;	State;	Zip Code
TYPE OF EXPENDITURE	■ P	olitical	Non-F	Political		
PURPOSE OF EXPENDITURE	Event ex	(See Categories listed at the to Openses	op of this schedule)	Description Ralleys, canv	asing, meet &	greets,
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cand	idate / Officeholder nan	ne (Office sought	Office h	eld
	ATTACI	ADDITIONAL COP	IES OF THIS S	CHEDULE AS NEE	EDED	

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting Banking
Consulting Expense
Contributions/Donations Made By
Cantifating (Clifforbalder (Parking))

Event Expense Fees Food/Beverage Expense Gift/Awards/Memonals Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

1 Total pages Schedule F4	2 FILER NAME Reed M Bond		3 Filer ID (Ethics Commission Filers 921569017		
4 TOTAL OF UNITER	MIZED EXPENDITURES CHARGED TO A C	REDIT CARD	\$ 366.59		
5 Date	6 Payee name		000.00		
02/27/2023	Walmart				
7 Amount (\$) 113.38	8 Payee address; 12220 FM 423, Frisco, TX 75033	City:	State; Zip Code		
9 TYPE OF EXPENDITURE	Political Non-P	olitical			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expenses	(b) Description Ralleys, can	vasing, meet & greets,		
	(c) Check if travel outside of Texas Complete Schedule T Check if Austin, TX officeholder living expense				
11	Candidate / Officeholder name	Office sought			
Complete ONLY if direct expenditure to benefit C/OH Date 03/06/2023	Payee name		Office held		
Date	Payee name Walmart				
Date 03/06/2023	Payee name	City;	Office held State: Zip Code		
Date 03/06/2023 Amount (\$)	Payee name Walmart Payee address.	Gity;			
03/06/2023 Amount (\$) 15.44	Payee name Walmart Payee address. 12220 FM 423, Frisco, TX 75033	Gity; plitical Description			
Date 03/06/2023 Amount (\$) 15.44 TYPE OF EXPENDITURE PURPOSE OF	Payee name Walmart Payee address. 12220 FM 423, Frisco, TX 75033 Political Non-Political Non-Political Non-Political Schedule)	City; plitical Description Ralleys, cany	State: Zip Code		
Date 03/06/2023 Amount (\$) 15.44 TYPE OF EXPENDITURE PURPOSE OF	Payee name Walmart Payee address. 12220 FM 423, Frisco, TX 75033 Political Non-Political Non-Political Non-Political Schedule Non-Political	City; plitical Description Ralleys, cany	State: Zip Code /asing, meet & greets,		

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made (Candidate/Officeholder/Politic		Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel In District Travel Out Of District Other (enter a category not listed above)			
		The Instruction	Guide explain	is how to c	omplete this form.			
1 Total pages Schedule F4:	2 FILER NAME Reed M Bond						Filer ID (Ethics (921569017	Commission Filers)
4 TOTAL OF UNITEM	1IZED EXP	ENDITURES C	HARGED	TOACE	REDIT CARD	\$	366.59	
5 Date 02/27/2023	6 Payee Walmart					l		
7 Amount (\$)	8 Payee address;							
113.31		M 423, Frisco	o, TX 750	33	City;		State;	Zip Code
9 TYPE OF EXPENDITURE	■ F	Political	[·	Non-Po	litical			
10 PURPOSE OF EXPENDITURE	Event e	/ (See Categories listed XPENSES			(b) Description Ralleys, canv	asir	ng, meet &	greets,
	(c)	Check if travel outside of 1	Texas: Complete Se	chedule T.	Check if Aus	tin, T	K. officehalder living	expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cano	didate / Officeholde	er name	Of	ffice sought		Office he	
Date 03/13/2023	Payee r Walmart	name						
Amount (S) 134.13	Payee a 12220 F	nddress. M 423, Frisco	o, TX 750	33	City;		State;	Zip Code
TYPE OF EXPENDITURE	■ Р	olitical	Γ	Non-Pol	litical			
PURPOSE OF EXPENDITURE	Event ex	(See Categories listed a	at the top of this so	chedule)	Description Ralleys, canv	asir	ng, meet &	greets,
		Check if travel outside of Texas. Complete Schedule T. Check if A			Check if Aus	tin, TX	. officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cand	idate / Officeholde	r name	Off	fice sought		Office he	
	ATTACI	d ADDITIONAL (COPIES OF	THIS SC	HEDULE AS NEE	DEC)	

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Solicitation/Fundraising Expense Consulting Expense Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Transportation Equipment & Related Expense Polling Expense Contributions/Donations Made By Travel In District Travel Out Of District Printing Expense Candidate/Officeholder/Political Committee Salanes/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 (Ethics Commission Filers) Reed M Bond 921569017 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 366.59 5 Date 6 Payee name 03/20/2023 Walmart 7 Amount (S) 8 Payee address: City. State, Zip Code 12220 FM 423, Frisco, TX 75033 121.59 TYPE OF -Political EXPENDITURE Non-Political 10 (a) Category (See Categories listed at the top of this schedula) (b) Description Event expenses Ralleys, canvasing, meet & greets, ... PURPOSE EXPENDITURE (c) Check if traveloutside of Toxas Complete Schedule T Check if Austin, TX, officeholder living expense 11 Candidate / Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Date Payee name 03/20/2023 Walmart Amount (S) Payee address. City; State: Zip Code 12220 FM 423, Frisco, TX 75033 40.45 TYPE OF Political EXPENDITURE Non-Political Category (See Categories listed at the log of this schedule) Event expenses PURPOSE Ralleys, canvasing, meet & greets, ... OF EXPENDITURE Check if travel outside of Texas, Complete Schedule 1 Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F4

	EXPENDITURE CATEG	ORIES FOR BOX 10	(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense By Gift/Awards/Memorials Expense ical Committee Legal Services	Loan Repayment/Reimburse Office Overhead/Rental Exp Polling Expense Printing Expense Salaries/Wages/Contract Lai	ement Solicitation/Fundraising Expense pense Transportation Equipment & Related Travel In District Travel Out Of District Other (enter a category not listed abo		
And the same of th	The Instruction Guide explains 2 FILER NAME	s how to complete this fo	orm.		
1 Total pages Schedule F4:	3 Filer ID (Ethics Commission F 921569017	ilers)			
4 TOTAL OF UNITEN	MIZED EXPENDITURES CHARGED 1	TO A CREDIT CAR	s 366.59		
5 Date	6 Payee name				
03/21/2023	Walmart				
7 Amount (\$)	8 Payee address;	City	2 7.0.1		
1.86	12220 FM 423, Frisco, TX 7503	Gity:	State; Zip Code	0.00	
9 TYPE OF EXPENDITURE	Political	Non-Political			
10 PURPOSE OF EXPENDITURE	of				
	(c) Check if travel outside of Texas. Complete Sch	hedula T. Cher	ck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
03/27/2023	Walmart				
Amount (\$)	Payee address,	City:	State: Zin Code		
5.00	12220 FM 423, Frisco, TX 7503		State; Zip Code		
TYPE OF EXPENDITURE	Political	Non-Political			
	Category (See Categories listed at the top of this sch	hedule) Description	ion		
PURPOSE OF EXPENDITURE	Event expenses Ralleys, canvasing, meet & greets,				
	Check if travel outside of Texas. Complete School	nedule T. Chec	ck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
500-3000 WW WEST 2	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS	S NEEDED		

SCHEDULE F4

## TOTAL OF UNITEMIZED 5 Date 6 03/27/2023 Wa 7 Amount (\$) 8 161.43 122 9 TYPE OF EXPENDITURE (a) 0	Fees Cod/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Food/Bev	office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Exper		
## TOTAL OF UNITEMIZED 5 Date 6 03/27/2023 War 7 Amount (\$) 8 122 161.43 122 9 TYPE OF EXPENDITURE EVENDITURE EVENDITURE 10 (a) C EVENDITURE (c) 11 Complete ONLY if direct Complete ONLY if direct 12 Complete ONLY if direct Complete ONLY if direct 13 Complete ONLY if direct Complete ONLY if direct 14 Complete ONLY if direct Complete ONLY if direct 15 Complete ONLY if direct Complete ONLY if direct 16 Complete ONLY if direct Complete ONLY if direct 17 Complete ONLY if direct 18 Complete ONLY if direct 19 Complete ONLY if direct 10 Complete ONLY if direct 11 Complete ONLY if direct 12 Complete ONLY if direct 13 Complete ONLY if direct 14 Complete ONLY if direct 15 Complete ONLY if direct 16 Complete ONLY if direct 17 Complete ONLY if direct 18 Complete ONLY if direct 19 Complete ONLY if direct 10 Complete ONLY if direct 10 Complete ONLY if direct 11 Complete ONLY if direct 12 Complete ONLY if direct 13 Complete ONLY if direct 14 Complete ONLY if direct 15 Complete ONLY if direct 16 Complete ONLY if direct 17 Complete ONLY if direct 18 Complete ONLY if direct 19 Complete ONLY if direct 10 Complete ONLY if direct 10 Complete ONLY if direct 11 Complete ONLY if direct 12 Complete ONLY if direct 15 Complete ONLY if direct 16 Complete ONLY if direct 17 Complete ONLY if direct 18 Comple	imiliee Legal Services S	Food/Beverage Expense Polling Expense			
## A TOTAL OF UNITEMIZED 5 Date 6 03/27/2023 Wa 7 Amount (\$) 8 161.43 122 9 TYPE OF EXPENDITURE 10 (a) C PURPOSE OF EXPENDITURE (c) 11 Complete ONLY if direct	The Instruction Guide explains h		Other (enter a category not listed above)		
5 Date 6 03/27/2023 Was 7 Amount (\$) 8 161.43 122 9 TYPE OF EXPENDITURE (a) C PURPOSE OF EXPENDITURE (c) 11 Complete ONLY if direct					
03/27/2023 Wa 7 Amount (\$) 8 122 161.43 122 9 TYPE OF EXPENDITURE 10 (a) C PURPOSE OF EXPENDITURE (c) 11 Complete ONLY if direct	D EXPENDITURES CHARGED TO	A CREDIT CARD	s 366.59		
161.43 TYPE OF EXPENDITURE 10 PURPOSE OF EXPENDITURE (a) C EV COMPLETE ONLY If direct	Payee name almart				
TYPE OF EXPENDITURE 10 PURPOSE OF EXPENDITURE (c) 11 Complete ONLY if direct	8 Payee address. City: State: Zip Code 2220 FM 423, Frisco, TX 75033				
PURPOSE OF EXPENDITURE (c) 11 Complete ONLY if direct	■ Political	Non-Political			
11 Complete ONLY if direct	Category (See Categories listed at this top of this screen. /ent expenses	vasing, meet & greets,			
Complete ONLY if direct	(c) Check if travel putside of Texas-Complete Schedule T Check if Austin, TX, officeholde				
	Candidate / Officeholder name	Office sought	Office held		
Date 02/21/2023 U-F	Payee name Hall				
	Payee address. 60 Kathryn Ln, Plano, TX 7502	City:	State; Zip Code		
TYPE OF EXPENDITURE	Political	Non-Political			
	Category (See Categories listed at the top at this schedent expenses		ampaign materials		
	Check if travel outside of Texas, Complete ScheduleT Check if Austin TX; officeholder tiving expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
A					