	E / OFFICEHOLDER I FINANCE REPORT	CITY	AL RECORD SECRETARY WORTH, TX		ORM C/OH HEET PG 1		
The C/OH Instruction	Guide explains how to complete this fo	orm. 1 File ID		2 Total pages file			
3 CANDIDATE / OFFICEHOLDER NÅME	MS / MRS / MR FIRST Pamela	1	MI	OFFICE U			
	NICKNAME LAST Bogges	ss	SUFFIX	420 APR 28	REC'D '23 PM5:02		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE # 604 E. 4th St. Ste. 101	#; CITY;	ZIP CODE	Date Hand-delivered or l	Date Postmarked Amount		
Change of Address	Fort Worth, TX 76102			Date Processed Date Imaged			
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mr. Steven NICKNAME LAST	e hardt	MI SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	500 Main S Fort Worth	t, Ste		'; STA'	TE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMB (817) 502-3						
8 REPORT TYPE		lay before election	Runoff Exceeded modified reporting limit	15th day after can appointment (offic Final Report (Atta	eholder only)		
9 PERIOD COVERED	Month Day Year 03/28/2023	THROUGH	Month Day 04/26/20		1.		
10 ELECTION	ELECTION DATE Month Day Year 05/06/2023	Primary General	ELECTION TYPE Runoff Special	Other			
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGH Fort Worth City	T (if known) Council, District 9			
	GO TO PAGE 2						
Forms provided by To	exas Ethics Commission	www.ethics.state.tx.	us	Version	on V3.5.1.7bd706d4		

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

Bonness Pamela			COVER SHEET PG 2			
/ OH NAME Boggess, Pamela 14 Filer ID						
FROM Candidate / officeholder. These expenditures may have been made without the candidate's or officeholder						
Additional Pages COMMITTEE TYPE COMMITTEE NAME						
GENERAL						
	COMMITTEE ADDRESS					
SPECIFIC						
·	COMMITTEE CAMPAIGN TREASURER NAME		ļ.			
	COMMITTEE CAMPAIGN TREASURER ADDRES	s				
1. TOTAL UNITEM	 IZED POLITICAL CONTRIBUTIONS (OTHER THAN	I PLEDGES, LOANS,	T .			
TOTALS OR GUARANTEES OF LOANS, OR CONTRIBUTION'S MADE ELECTRONICALLY)				0.00		
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)						
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS				00,0		
4. TOTAL POLITIC	AL EXPENDITURES		\$	38,426.22		
		ST DAY OF THE	\$	7,713.95		
		OF THE LAST DAY	\$	0.00		
			<u> </u>	····		
TAYLOR MENDEZ otary Public, State of Texa Comm. Expires 11-17-202 Notary ID 134070271	true and correct and includes all under Title 15, Election Code.	information required to l	be reported	eport is by me		
TARY STAMP / SEAL ABO	DVE					
		, this the	^	day		
cer administering	Printed name of officer administering	NOTA Title of officer a	dmilfistering	oath		
	COMMITTEE TYPE GENERAL GENERAL SPECIFIC 1. TOTAL UNITEM OR GUARANTE 2. TOTAL POLITIC (OTHER THAN F 3. TOTAL UNITEM 4. TOTAL POLITIC REPORTING PE 6. TOTAL PRINCIP OF THE REPOR TAYLOR MENDEZ OTHER REPOR	candidate / officeholder. These expenditures may have been made without consent. Candidates and officeholders are required to report this information. COMMITTEE TYPE GENERAL COMMITTEE NAME GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTORY (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR TOTAL UNITEMIZED POLITICAL EXPENDITURES 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAREPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD I SWEAR, or affirm, under penalty true and correct and includes all under Title 15, Election Code. OF THE REPORTING PERIOD I SWEAR, or affirm, under penalty true and correct and includes all under Title 15, Election Code. Notary ID 134070271 TARY STAMP / SEAL ABOVE TRICK STAMP / SEAL ABOVE TRICK STAMP / SEAL ABOVE TARY STAMP / SEAL ABOVE TARY STAMP / SEAL ABOVE	candidate of triceholder. These expenditures may have been made without the candidate's or officer consent. Candidates and officeholders are required to report this information only if they receive not consent. Candidates and officeholders are required to report this information only if they receive not consent. Candidates are required to report this information only if they receive not consent. Candidates are required to report this information only if they receive not consent are required to report this information only if they receive not consent are required to report this information only if they receive not consent are required to report this information only if they receive not consent are required to receive the consent are required to report this information required to report this information required to report this precision. 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL POLITICAL CONTRIBUTIONS 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD 1 swear, or affirm, under penalty of perjury, that the according to require and correct and includes all information required to under Title 1s, Election Code. 1 swear, or affirm, under penalty of perjury, that the according required to under Title 1s, Election Code. 1 swear, or affirm, under penalty of perjury, that the according report of penalty o	GENERAL COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 1. Swear, or affirm, under penalty of perjury, that the accompanying or true and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or true and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or true and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or true and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or true and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or true and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or true and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or a swear and correct and includes all information required to be reported under Title 15, Election Code. 1. Swear, or affirm, under penalty of perjury, that the accompanying or a swear and the code of the code		

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

					3 of 22
	LER NA	··-	.9 Filer ID		
		Pamela			
_	CHEDUL AME OF	SUBTOTAL AMOUNT			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	44,250.00	
2.	×		\$	145,184.48	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	38,426.22
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$		
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$		
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$		
10). <u> </u>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS O	F C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	
12	. X	\$	24.78		
					

MONET	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE	E A1
The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/22	=
2 FILER NAME Boggess, Pa			3 Filer ID	•
4 Date 04/08/2023	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$100.00
8 Principal occu Retired	supation / Job title (See Instructions)	9 Employer (See Instructions Retired	3)	
Date 04/08/2023	Contributor address; City; State; Zip Code 1741 Rio Secco Dr. Fort Worth, TX 76131		Amount of Contribution (\$)	\$50.00
Principal occu Control	upation / Job title (See Instructions)	Employer (See Instructions) Banking	;)	
Date 03/28/2023	Full name of contributor out-of-state PAC (ID#:_ Boggess, Pamela Contributor address; City; State; Zip Code 1933 Chatburn Ct. Fort Worth, TX 76110		Amount of Contribution (\$)	\$100.00
Principal occu Attorn	upation / Job title (See Instructions)	Employer (See Instructions) Cofer Luster Law Firm, P	•	
Date 04/18/2023	Full name of contributor		Amount of Contribution (\$)	\$150.00
	upation / Job title (See Instructions) siness Development, Texas Health Supply Chain	Employer (See Instructions) Texas Health Resources	•	
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:_ Gondek, Denis Contributor address; City; State; Zip Code 2709 Leith Ave. Fort Worth, TX 76133		Amount of Contribution (\$)	\$250.00
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instructions) Retired		
			- Inc.	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/3 Rpt: 5/22 2 FILER NAME 3 Filer ID Boggess, Pamela 5 Full name of contributor Date Out-of-state PAC (ID#; 7 Amount of Contribution (\$) 04/11/2023 Halbohn, Christopher \$50.00 Contributor address; City; State; Zip Code 4210 Lillian St. Houston, TX 77007 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney DLG Inc. Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 04/14/2023 Klick, Donald \$200.00 Contributor address; City; State; Zip Code PO Box 7592 Fort Worth, TX 76111 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Self Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 04/20/2023 Luenser, Brian \$1,000.00 Contributor address; City; State; Zip Code 500 Throckmorton St., Apt. 2804 Fort Worth, TX 76102 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/13/2023 Mallick, Michael \$7,500.00 Contributor address; City; State; Zip Code 3715 Camp Bowie Blvd. Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Principal Mallick Group, Inc. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/06/2023 Micallef, Alfred \$1,000.00 Contributor address; City; State; Zip Code 1401 N. Bowie Dr. Weatherford, TX 76086 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Chairman JMK Holdings Mgmt Co.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 6/22 2 FILER NAME 3 Filer ID Boggess, Pamela Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/06/2023 Miller, Ivan Jack & Ladye Ann \$1,000.00 6 Contributor address; City; State; Zip Code 31 Valley Ridge Rd. Fort Worth, TX 76107 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner Haltom's Jewelers Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/07/2023 Mondick, Taylor \$250.00 Contributor address; City; State; Zip Code 311 Bryan Ave., Apt. 102 Fort Worth, TX 76104 Principal occupation / Job title (See Instructions) Employer (See Instructions) Coach Self-employed Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 04/18/2023 Right for Tarrant PAC \$22,500.00 Contributor address; City; State; Zip Code 3808 Trail Lake Dr. Fort Worth, TX 76019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/07/2023 Right for Tarrant PAC \$10,000.00 Contributor address; City; State; Zip Code 3808 Trail Lake Dr. Fort Worth, TX 76019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#; Amount of Contribution (\$) 03/28/2023 Selinger, Stephen \$100.00 Contributor address; City; State; Zip Code 620 Truelove Trail Southlake, TX 76092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Self-employed

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/10 Rpt: 7/22 2 FILER NAME 3 Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ Date 6 Full name of contributor Amount of contribution (\$) | 9 In-kind contribution description | \$18.72 | Postage out-of-state PAC (ID#: 04/25/2023 Allen, Joseph Contributor address; City; State; Zip Code PO Box 33936 Fort Worth, TX 76162 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) City of Dallas 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution 04/20/2023 contribution (\$) description Committee for Public Safety Fort Worth Police Officers Association \$8,725.14 i Mailer Contributor address; City; State; Zip Code 2501 Parkview Dr., Ste. 600 Fort Worth, TX 76102 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) 03/29/2023 description Fort Worth Excellence PAC \$500.00 | Campaign coordination Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See Instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/10 Rpt: 8/22 2 FILER NAME 3 Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ Date 6 Full name of contributor out-of-state PAC (ID#: 8 Amount of 9 In-kind contribution 04/03/2023 contribution (\$) description Fort Worth Excellence PAC \$1,250.00 | Vantage - Research Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution 04/04/2023 contribution (\$); Fort Worth Excellence PAC description \$500.00 Campaign Coordination Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution 04/06/2023 contribution (\$) Fort Worth Excellence PAC description \$1,582.00 Push cards Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.7bd706d4

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 3/10 Rpt: 9/22 2 FILER NAME Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ Date 6 Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) In-kind contribution description 04/06/2023 Fort Worth Excellence PAC \$6,043.00 i Mailer Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: In-kind contribution Amount of contribution (\$) description 04/06/2023 Fort Worth Excellence PAC \$16,205.00 | Canvassing Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Full name of contributor ut-of-state PAC (ID#; Amount of In-kind contribution 04/10/2023 contribution (\$) description Fort Worth Excellence PAC \$500.00 | Campaign Coordination Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 4/10 Rpt: 10/22 2 FILER NAME 3 Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor ut-of-state PAC (ID#: Amount of 9 In-kind contribution contribution (\$) description Amount of 04/12/2023 Fort Worth Excellence PAC \$4,749.00 | Mailer Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution 04/12/2023 Fort Worth Excellence PAC contribution (\$) description \$1,750.00 Video Production Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution 04/13/2023 contribution (\$) Fort Worth Excellence PAC description \$1,287.00 Vantage - Research Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule 1. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 5/10 Rpt: 11/22 2 FILER NAME 3 Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ 5 Date 6 Full name of contributor out-of-state PAC (ID#; Amount of contribution (\$) In-kind contribution description 04/16/2023 Fort Worth Excellence PAC \$4,359.50 i Mailer Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 04/16/2023 Fort Worth Excellence PAC \$16,205.00 | Canvassing Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) 04/18/2023 description Fort Worth Excellence PAC \$6,043,00 i Mailer Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See Instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 6/10 Rpt: 12/22 2 FILER NAME 3 Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ Amount of contribution (\$) In-kind contribution description 6 Full name of contributor out-of-state PAC (ID#: Amount of 04/18/2023 Fort Worth Excellence PAC \$4,749.00 i Mailer 7 Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution 04/18/2023 contribution (\$) Fort Worth Excellence PAC description \$4,749.00 i Mailer Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution 04/18/2023 contribution (\$) Fort Worth Excellence PAC description \$500.00 Campaign Coordination Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Forms provided by Texas Ethics Commission www.ethics.state.tx.us

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NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 7/10 Rpt: 13/22 2 FILER NAME Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ 5 Date 6 Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) In-kind contribution description 04/24/2023 Fort Worth Excellence PAC \$576.97 i T-shirts Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See Instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#; Amount of In-kind contribution 04/25/2023 contribution (\$) description Fort Worth Excellence PAC \$1,000.00 Campaign coordination Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) 04/26/2023 description Fort Worth Excellence PAC \$1,750.00 Red Productions Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 8/10 Rpt: 14/22 2 FILER NAME 3 Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ 6 Full name of contributor out-of-state PAC (ID#: Amount of 9 In-kind contribution contribution (\$) 04/26/2023 Fort Worth Excellence PAC description \$1,582,00 Push cards Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: In-kind contribution Amount of 04/26/2023 contribution (\$) Fort Worth Excellence PAC \$4,749.00 i Mailer Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution 04/26/2023 contribution (\$) Fort Worth Excellence PAC description \$2,100.00 i Texting Contributor address; City; State; Zip Code P.O. Box 953 Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.7bd706d4

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	uction Guide explains how to complete this	1 Total pages Schedule A2: Sch: 9/10 Rpt: 15/22						
2 FILER NAME		3 Filer ID						
Boggess, P	annela							
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIE	s						
5 Date	6 Full name of contributor out-of-state PAC (ID#:		8 Amount of 9 In-kind contribution					
04/26/2023	1 ST TOTAL ENGERGINGS 1710		contribution (\$) description					
	7 Contributor address; City; State; Zip Code	***************************************	\$500.00 Campaign Coordination					
	P.O. Box 953		!					
1								
	Colleyville, TX 76034		Check if travel outside of Texas, Complete Schedule T.					
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
	,		,					
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law from of contribute	or's spouse (if any) (FOR JUDICIAL)					
		Law in in or community	or a appeared (in array) (if Ort a obtoine)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
	to a simple factor many or parent (s) (in any) (i on sobjective)							
	<u></u>							
Date	Full name of contributor oul-of-state PAC (ID#:		Amount of In-kind contribution contribution (\$) description					
04/18/2023	Fort Worth Excellence PAC	***************************************	\$29,501.50 Television					
	Contributor address; City; State; Zip Code		1					
	P.O. Box 953							
	Callara illa TV 7000 A		_					
	Colleyville, TX 76034	· · · · · · · · · · · · · · · · · · ·	Check if travel outside of Texas. Complete Schedule T.					
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See Instructions)					
			## ***********************************					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of In-kind contribution					
04/15/2023	Fort Worth Republican Women	<u></u>	contribution (\$) description					
	Contributor address; City; State; Zip Code	***************************************	\$300.001Post Card Mailer					
	P.O. Box 101613		į į					
			 					
	Fort Worth, TX 76185		Check if travel outside of Texas. Complete Schedule T.					
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	<u> </u>					
· '			, , , , , , , , , , , , , , , , , , ,					
Contributor's	principal occupation (FOR JUDICIAL)	(FOR JUDICIAL) (See instructions)						
	, , , , , , , , , , , , , , , , , , , ,	(, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL)								
		or a special (ii mity) (if ON additional)						
If contributor is a child law firm of parcet(e) (if any) (EOD NEDICIAL)								
ii comindutor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
ļ 		<u> </u>						

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 10/10 Rpt: 16/22 2 FILER NAME 3 Filer ID Boggess, Pamela TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ Amount of contribution (\$) In-kind contribution description 6 Full name of contributor Date out-of-state PAC (ID#: 04/21/2023 Fort Worth Republican Women \$1,064.01 i Mailer Contributor address; City; State; Zip Code P.O. Box 101613 Fort Worth, TX 76185 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See Instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#; Amount of In-kind contribution contribution (\$) 03/30/2023 O'Shea, John description \$227.00 | Refreshments for Meet & Contributor address; City; State; Zip Code Greet 429 College Ave., Apt. 427 Fort Worth, TX 76110 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) **Business Owner** Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution 04/26/2023 description contribution (\$) Right for Tarrant PAC \$8,725.14 i Mailer Contributor address; City; State; Zip Code 3808 Trail Lake Dr. Fort Worth, TX 76019 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	By - cal Cor		Offic ise Pollir is Expense Print	e Overhei ig Expens ng Expen ies/Wage	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2			•		2	Filer ID
ĺ	Sch: 1/5 Rpt: 17/22	1	Boggess, Pamela				,	LIGITO
4	Date	5	Рауее пате					
	04/26/2023		Anedot					
6	Amount (\$)	7	Payee address; City;	State; Zip	Code	-	_	
	\$110.40		1340 Poydras St.					
ĺ		Ì	Ste. 1770					
			New Orleans, LA 70112					
8	PURPOSE	—			1/65			
	OF		Category (See Categories listed at 6 Fees	he top of this schedule)	(0)	Description	utsi	de of Texas. Complete Schedule T.
	EXPENDITURE		. •••					officeholder living expense
ŀ						Processing fe	es	
_		<u></u>				•		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	sought			Office held
	Date		Payee name				_	
	04/25/2023		Murphy Nasica					
	Amount (\$)		Payee address; City;	State; Zip	Code	-		
	\$8,790.51		PO Box 1648					
			Fort Worth, TX 78767					
	PURPOSE	(a)	Category (See Categories listed at It	e top of this schedule)	(b)	Description		
	OF EXPENDITURE	,	Advertising Expense			•	utsid	le of Texas. Complete Schedule T.
						_	TX,	officeholder living expense
						Canvassing		
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	Office s	ought		_	Office held
	Date	Τ,						
	04/26/2023	•	Payee name Murphy Nasica					
		-						
	Amount (\$)	Į.	Payee address; City;	State; Zip	Code			
	\$2,099.49	'	PO Box 1648					
		F	Fort Worth, TX 78767					
	PURPOSE OF	(a) (Category (See Categories listed at the	e top of this schedule)	(b)	Description		
	EXPENDITURE	(Consulting Expense					e of Texas. Complete Schedulė T.
						Canvassing	ГХ, с	officeholder living expense
						Carryassing		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ndidate/Officeholder name	Office s	ought			Office held
ori	ns provided by Texas Et	thics	Commission was	w ethics state to				Version V2 F 1 7hd706d4

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District **Legal Services** 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: 2/5 Rpt: 18/22 Boggess, Pamela Date Payee name 04/12/2023 Murphy Nasica 6 Amount (\$) Payee address; City; State: Zip Code \$1,000.00 PO Box 1648 Fort Worth, TX 78767 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense April Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/30/2023 Murphy Nasica Amount (\$) Payee address; City; State; Zip Code \$484.27 PO Box 1648 Fort Worth, TX 78767 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Push cards Complete ONLY If direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/04/2023 Murphy Nasica Amount (\$) Payee address; City; State; Zip Code \$436.46 PO Box 1648 Fort Worth, TX 78767 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Push cards Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense AccountingBanking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 3/5 Rpt: 19/22	Boggess, Pamela
4 Date	5 Payee name
04/10/2023	Murphy Nasica
6 Amount (\$) \$1,335.00	7 Payee address; City; State; Zip Code PO Box 1648 Fort Worth, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check it travel outside of Texas. Complete Schedule T. Check it Austin, TX, officeholder living expense Road sign installation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/25/2023	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$4,147.69	PO Box 1648
	Fort Worth, TX 78767
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 Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/11/2023	Murphy Nasica
Amount (\$) \$1,335.46	Payee address; City; State; Zip Code PO Box 1648
	Fort Worth, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if Iravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Fees Food/Beverage Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services 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: 4/5 Rpt: 20/22 Boggess, Pamela Date Payee name 04/10/2023 Murphy Nasica 6 Amount (\$) Payee address; City; State: Zip Code \$6,500.00 PO Box 1648 Fort Worth, TX 78767 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense April Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/14/2023 Murphy Nasica Amount (\$) Payee address; City; State; Zip Code \$8,725.14 PO Box 1648 Fort Worth, TX 78767 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Mailer Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/18/2023 Murphy Nasica Amount (\$) Payee address; City; State; Zip Code \$569.35 PO Box 1648

	Fort Worth, TX 78767						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Printing Expense	chedule) (Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Push cards				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ot Office held				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Advoertising Expense Consulting Expense Contributions/ Donations Made Bi Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services The Instruction Guide explai	Office Over Polling Exp Printing Exp Salaries/Wa	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2			·	3	Filer ID
	Sch: 5/5 Rpt: 21/22		Boggess, Pamela			ľ	THE ID
4	Date	5	Payee name			_	
	03/28/2023		Murphy Nasica				
6	Amount (\$)	7	Payee address; City; Sta	ite; Zip Cod	le		
	\$444.45		PO Box 1648 Fort Worth, TX 78767				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Fees	schedule) (=		de of Texas, Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		Candidate/Officeholder name	Office soug	ht	-	Office held
	Date		Payee name				
	04/19/2023		United States Postal Service				
	Amount (\$)		Payee address; City; Sta	te; Zip Cod	е		
	\$2,400.00		2600 8th Ave.				
			Fort Worth, TX 76110				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this : Advertising Expense	schedule) (=		de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sough	ht		Office held
	Date		Payee name				· · · · · · · · · · · · · · · · · · ·
	04/24/2023		United States Postal Service				
	Amount (\$) \$48.00		Payee address; City; Sta 7101 Bryant Irvin Rd.	te; Zip Code	е		
			Fort Worth, TX 76132				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Advertising Expense	chedule) (I	=		le of Texas. Complete Schedule T, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sough	nt		Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND **CONTRIBUTIONS RETURNED TO FILER** SCHEDULE K 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 22/22 2 FILER NAME 3 Filer ID Boggess, Pamela 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 03/31/2023 Lending Club Bank \$24.78 6 Address of person from whom amount is received; City; State; Zip Code 595 Market St., Ste. 200 San Francisco, CA 94105 Purpose for which amount is received ☐ Check if political contribution returned to filer Interest