## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00000029		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	
OFFICEHOLDER	Mr.	Wesley A.				
NAME					Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	07/12/2024	
		Lawrence		0011.00		
		Lawrence				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	TY;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER	10900 Stonebridge Dr.					
MAILING ADDRESS	J J				Receipt #	Amount
Change of Address	El Paso, TX 79934				Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER				1VII		
NAME	Mr.	Wesley				
	NICKNAME	LAST		SUFFIX		
		Lawrence				
6 CAMPAIGN	STREET ADDRESS (NO PO			/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER		BUX PLEASE),	AP	/ SUITE #, CITT,	51A	TE, ZIP CODE
ADDRESS	10900 Stonebridge Dr.					
(Desidence or Rusiness)						
(Residence or Business)	El Paso, TX 79934					
	,					
7 CAMPAIGN	AREA CODE PHON		EXTENSION			
TREASURER	(915) 494-3226					
PHONE	(313) 434-3220					
8 REPORT TYPE					1 450 1. 10	
	January 15	30th day before	election	Runoff	15th day after can appointment (offic	
	X July 15	8th day before	election	Exceeded modified	Final Report (Atta	
				reporting limit		
	Mantha David			Monthe D		
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	01/01/2024	11	HROUGH	06/30/2024	1	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XF	Primary	Runoff	Other	
	11/05/2024		General	Special		
			Beneral	Special		
				i		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	None			-	ncil District 4 Pla	ace El Paso District
				4		
	ļ			I		
		GO T	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	thics.state.tx.u	6	Versio	n V4.1.0.d378aba0

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

#### FORM C/OH COVER SHEET PG 2 2 of 17

13 C / OH NAME	Lawrence, Wesley A.	(Mr.)	14 Filer ID 00000029	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	Dolitical contributions accepted or political expenditures These expenditures may have been made without to I officeholders are required to report this information	he candidate's or office	eholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
16 CONTRIBUTION TOTALS		L ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00	
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	i)	<b>\$</b> 2,600.24	
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	<b>\$</b> 1,445.70	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 0.00	
17 AFFIDAVIT	•			•	
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		Mr. We	esley A. Lawrence		
		Signature of	Candidate or Officeho	lder	
AFFIX NO	TARY STAMP / SEAL ABO	DVE			
Sworn to and subso	cribed before me, by the s	aid	, this the	day	
		ertify which, witness my hand and seal of office.			
Signature of offic	er administering	Printed name of officer administering	Title of office	r administering oath	
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0	

SUB.	TOTALS - C/OH	C	FOR OVER SHE	м C/OH ET PG 3 3 of 17
18 FILER N/ Lawrenc	ME e, Wesley A. (Mr.)	19 Filer ID 00000029	(Ethics Comm	ission Filers)
	LE SUBTOTALS = SCHEDULE		SUBTOT	AL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,350.24
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	250.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,152.38
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/17
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Vesley A. (Mr.)		00000029
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
04/24/2024	Aguilar, Luis		\$200.00
	6 Contributor address; City; State; Zip Code		1
	El Paso, TX 79936		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)
Constable		El Paso County	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/14/2024	Andujo, Jorge		\$20.00
	Contributor address; City; State; Zip Code		1
	El Paso, TX 79912		
	upation / Job title (See Instructions)	Employer (See Instructions	
Teachers As	sistant	UTEP	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/23/2024	Aslam, Muneeb		\$10.00
	Contributor address; City; State; Zip Code		1
	Austin, TX 78702		
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Deputy ED		Non-Profit	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/24/2024	Baca, Andrea		\$50.00
	Contributor address; City; State; Zip Code		1
	El Paso, TX 79930		
	pation / Job title (See Instructions)	Employer (See Instructions	
Peace office	r	County Attorney's Office	e-County of El Paso
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/02/2024	Balderrama, Evangelina		\$10.00
	Contributor address; City; State; Zip Code		1
	El Paso, TX 79912		
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Insurance		Gallagher Basset	

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/17
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Nesley A. (Mr.)		0000029
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
02/02/2024	· · ·		\$10.
	6 Contributor address; City; State; Zip Code		
	El Paso, TX 79912		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	۲ ۵)
Insurance	•	Gallagher Basset	, ,
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/02/2024	Balderrama, Evangelina	/	\$10.
	Contributor address; City; State; Zip Code		
	Continuation address, City, State, Zip Code		
	El Paso, TX 79912		
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	L 3)
Insurance		Gallagher Basset	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
04/02/2024	Balderrama, Evangelina		\$10.
	Contributor address; City; State; Zip Code		
	El Paso, TX 79912		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;) ;)
Insurance		Gallagher Basset	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/02/2024	Balderrama, Evangelina		\$10.
	Contributor address; City; State; Zip Code		
	El Paso, TX 79912		
	upation / Job title (See Instructions)	Employer (See Instructions	;)
Insurance		Gallagher Basset	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
06/02/2024	Balderrama, Evangelina		\$10.
	Contributor address; City; State; Zip Code		
	El Paso, TX 79912		
	upation / Job title (See Instructions)	Employer (See Instructions	;)
Insurance		Gallagher Basset	

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/17
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Lawrence, Wesley A. (Mr.)	0000029
4 Date       5 Full name of contributor       out-of-state PAC (ID#:)         03/27/2024       Bell, Kenneth         6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) 
El Paso, TX 79925	
8 Principal occupation / Job title (See Instructions)       9 Employer (See Instruction US Army Reserves)         Soldier       US Army Reserves	IS)
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/27/2024 Bell, Kenneth	\$5.00
Contributor address; City; State; Zip Code	
El Paso, TX 79925	
Principal occupation / Job title (See Instructions) Employer (See Instruction	IS)
Soldier US Army Reserves	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/27/2024 Bell, Kenneth	\$20.00
Contributor address; City; State; Zip Code El Paso, TX 79925	
Principal occupation / Job title (See Instructions) Employer (See Instruction	 1S)
	,
Soldier US Army Reserves	
	Amount of Contribution (\$)
	Amount of Contribution (\$) \$50.00
Date     Full name of contributor     out-of-state PAC (ID#:)	
Date       Full name of contributor       out-of-state PAC (ID#:)         05/24/2024       Bell, Kenneth         Contributor address; City; State; Zip Code         El Paso, TX 79925	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)         05/24/2024       Bell, Kenneth         Contributor address; City; State; Zip Code	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)         05/24/2024       Bell, Kenneth       Contributor address; City; State; Zip Code         El Paso, TX 79925       Principal occupation / Job title (See Instructions)       Employer (See Instructions)	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)         05/24/2024       Bell, Kenneth       Contributor address; City; State; Zip Code         El Paso, TX 79925       Employer (See Instructions)         Soldier       US Army Reserves	
Date       Full name of contributor       out-of-state PAC (ID#:)         05/24/2024       Bell, Kenneth       Contributor address; City; State; Zip Code         El Paso, TX 79925       Employer (See Instructions)         Soldier       US Army Reserves         Date       Full name of contributor       out-of-state PAC (ID#:)         04/23/2024       Clark, Nathan       Contributor address; City; State; Zip Code	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)         05/24/2024       Bell, Kenneth	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)         05/24/2024       Bell, Kenneth	\$50.00

6       Contributor address; City; State; Zip Code         Fate, TX 75087       9         8       Principal occupation / Job title (See Instructions)       9         Date       Full name of contributor       out-of-state PAC (ID#:					
Lawrence, Wesley A. (Mr.)       00000029         4 Date       5 Full name of contribution	The Instr	uction Guide explains how to complete this	form.		
Lawrence, Wesley A. (Mr.)       00000029         4 Date       5 Full name of contribution	2 FILER NAM	E			Filers)
06/17/2024       Clark, Nathan					
6       Contributor address; City; State; Zip Code         Fate, TX 75087       9       Employer (See Instructions)         1       Date       Coleman, Nathan       ITRA         04/28/2024       Coleman, Nathan       Amount of Contribution (S)       \$25,00         04/28/2024       Coleman, Nathan       Set (Dir.       Amount of Contribution (S)         04/28/2024       Coleman, Nathan       S25,00         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$25,00         Coordinator       Volar Center for independent living       \$25,00         05/14/2024       Full name of contributor       out-of-state PAC (IDE:	4 Date	5 Full name of contributor out-of-state PAC (ID#	) #:)	7 Amount of Contribution (\$)	
6       Contributor address; City: State; Zip Code         7       Fate, TX 75087         8       Principal occupation / Job title (See Instructions)         9       Employer (See Instructions)         04/28/2024       Coleman, Nathan         Contributor address; City: State; Zip Code       Amount of Contribution (\$)         Contributor address; City: State; Zip Code       Amount of Contribution (\$)         Contributor address; City: State; Zip Code       Employer (See Instructions)         Volar Center for Independent living       S25.00         Date       Full name of contributor       out-of-state PAC (ID#         05/14/2024       Full name of contributor       out-of-state PAC (ID#         05/14/2024       Full name of contributor       out-of-state PAC (ID#         05/28/2024       Coleman, Nathan       Contributor address; City: State; Zip Code         EI Paso, TX 79924       Employer (See Instructions)       Volar Center for independent living         Osf/28/2024       Coleman, Nathan       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         05/28/2024       Coleman, Nathan       Col	06/17/2024				\$25.00
8       Principal occupation / Job title (See Instructions) Surveyor       9       Employer (See Instructions) LTRA         Date       Full name of contributor       out-of-state PAC (IDE:					
8       Principal occupation / Job title (See Instructions) Surveyor       9       Employer (See Instructions) LTRA         Date       Full name of contributor       out-of-state PAC (IDE:					
8       Principal occupation / Job title (See Instructions) Surveyor       9       Employer (See Instructions) LTRA         Date       Full name of contributor       out-of-state PAC (IDE:					
Surveyor       LTRA         Date 04/28/2024       Full name of contributor contributor contributor contributor contributor contributor contributor contributor contributor address; City; State; Zip Code       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date 05/14/2024       Full name of contributor control out-of-state PAC (D# Contributor address; City; State; Zip Code       Amount of Contribution (\$) St5.00         Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date 05/14/2024       Full name of contributor control out-of-state PAC (D# Coleman, Nathan       Employer (See Instructions) Volar Center for independent living         Date 05/28/2024       Full name of contributor control out-of-state PAC (D# Coleman, Nathan       Amount of Contribution (\$) Coleman, Nathan         Contributor address; City; State; Zip Code       Employer (See Instructions) Volar Center for independent living         Date 06/28/2024       Full name of contributor cont-of-state PAC (D# Coleman, Nathan       Amount of Contribution (\$) S25.00         Date 06/28/2024       Full name of contributor cont-of-state PAC (D# Coleman, Nathan       Amount of Contribution (\$) S25.00         Date 06/28/2024       Full name of contributor cont-of-state PAC (D# Coleman, Nathan       Amount of Contribution (\$) S25.00         Coleman, Nathan Contributor	0 Dringinglog				
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$25.00         04/28/2024       Coleman, Nathan       Contributor address; City; State; Zip Code       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of C		upation / Job lille (See instructions)		5)	
04/28/2024       Coleman, Nathan       \$25.00         Contributor address; City: State, Zip Code       El Paso, TX 79924         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Volar Center for independent living         Date       Full name of contributor				1	
Contributor address; City; State; Zip Code         EI Paso, TX 79924         Principal occupation / Job title (See Instructions)         Coordinator         Date         05/14/2024         Principal occupation / Job title (See Instructions)         Contributor address; City; State; Zip Code         Date         05/14/2024         Principal occupation / Job title (See Instructions)         Contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions)         Contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions)         Coleman, Nathan         Cordinator         Date         O5/28/2024         Coleman, Nathan         Coleman, Nathan         Coleman, Nathan         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         EI Paso, TX 79924         Principal occupation / Job title (See Instructions)         Contributor address; City; State; Zip Code         EI Paso, TX 79924         Principal occupation / Job title (See Instructions)         Coordinator         Coleman, Nathan         Coordinator         Coleman, Nathan			#:)	Amount of Contribution (\$)	<u>ቀን</u> ር 00
El Paso, TX 79924       Employer (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date 05/14/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S15.00         O5/14/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S15.00         O5/14/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S15.00         Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date 05/28/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S25.00         Of/28/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         O6/28/2024       Full name of contributor       out-of-state PAC (ID#	04/28/2024				\$25.00
Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:					
Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:		FI Paso, TX 79924			
Coordinator       Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         05/14/2024       Coleman, Nathan       \$\$15.00         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$\$15.00         El Paso, TX 79924       Employer (See Instructions)       Amount of Contribution (\$)         Coordinator       Out-of-state PAC (ID#       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         05/28/2024       Coleman, Nathan       S25.00       \$25.00         05/28/2024       El Paso, TX 79924       Amount of Contribution (\$)       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00         Coordinator       Coleman, Nathan       S25.00       \$25.00         Of/28/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         Of/28/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         Of/28/2024       Coleman, Nathan       S25.00       \$25.00         Of/28/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Con	Principal occ		Employer (See Instructions	<u> </u> s)	
05/14/2024       Coleman, Nathan       \$15.00         Contributor address; City; State; Zip Code					
05/14/2024       Coleman, Nathan       \$15.00         Contributor address; City; State; Zip Code	Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         El Paso, TX 79924         Principal occupation / Job title (See Instructions)         Coordinator         Date       Full name of contributor out-of-state PAC (ID#:)         Amount of Contribution (\$)         05/28/2024       Coleman, Nathan         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Contributor address; City; State; Zip Code       Volar Center for independent living         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Out-of-state PAC (ID#:			r,		\$15.00
El Paso, TX 79924         Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)         O5/28/2024       Coleman, Nathan       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         El Paso, TX 79924       Employer (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Principal occupation / Job title (See Instructions)       Employer (See Instructions) Volar Center for independent living       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Coleman, Nathan       coleman, Nathan       \$25.00         06/28/2024       Coleman, Nathan       s25.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         El Paso, TX 79924       Engloyer (See Instructions)       Amount of Contribution (\$)         El Paso, TX 79924       Employer (See Instructions)       Amount of Contribution (\$)         El Paso, TX 79924       Employer (See Instructions)       E					Ŧ -
Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$25.00         El Paso, TX 79924       Employer (See Instructions)       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00         Coordinator       Volar Center for independent living       \$25.00         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$25.00         El Paso, TX 79924       El Paso, TX 79924       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00					
Principal occupation / Job title (See Instructions) Coordinator       Employer (See Instructions) Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$25.00         El Paso, TX 79924       Employer (See Instructions)       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00         Coordinator       Volar Center for independent living       \$25.00         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$25.00         El Paso, TX 79924       El Paso, TX 79924       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00					
Coordinator       Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       El Paso, TX 79924         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/28/2024       Full name of contributor       out-of-state PAC (ID#:)         O6/28/2024       Full name of contributor       out-of-state PAC (ID#:)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         El Paso, TX 79924       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)		El Paso, TX 79924			
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       El Paso, TX 79924         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       Coleman, Nathan       \$25.00         Coordinator       Coleman, Nathan       S25.00         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$25.00         El Paso, TX 79924       El Paso, TX 79924       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
05/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       \$25.00         EI Paso, TX 79924       Employer (See Instructions)         Coordinator       Employer (See Instructions)         Coordinator       Odi/28/2024         Principal occuration / Job title (See Instructions)       Contributor out-of-state PAC (ID#:)         Date       Full name of contributor out-of-state PAC (ID#:)         O6/28/2024       Coleman, Nathan         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Employer (See Instructions)         EI Paso, TX 79924       Employer (See Instructions)         Principal occuration / Job title (See Instructions)       Employer (See Instructions)	Coordinato	r	Volar Center for indepe	ndent living	
Contributor address; City; State; Zip Code         El Paso, TX 79924         Principal occuration / Job title (See Instructions)         Coordinator         Date         Full name of contributor         Odf/28/2024         Coleman, Nathan         Contributor address; City; State; Zip Code         El Paso, TX 79924         Principal occuration / Job title (See Instructions)         El Paso, TX 79924         Principal occuration / Job title (See Instructions)         El Paso, TX 79924         Principal occuration / Job title (See Instructions)         El Paso, TX 79924         Principal occuration / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions)	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       EI Paso, TX 79924         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/28/2024       Coleman, Nathan       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       EI Paso, TX 79924         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	05/28/2024				\$25.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Volar Center for independent living         Date       Full name of contributor out-of-state PAC (ID#:)         06/28/2024       Coleman, Nathan         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         El Paso, TX 79924       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)				]	
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Volar Center for independent living         Date       Full name of contributor out-of-state PAC (ID#:)         06/28/2024       Coleman, Nathan         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         El Paso, TX 79924       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Coordinator       Volar Center for independent living         Date       Full name of contributor out-of-state PAC (ID#:)         06/28/2024       Coleman, Nathan         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         El Paso, TX 79924       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
Coordinator       Volar Center for independent living         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       El Paso, TX 79924       Employer (See Instructions)	Dringinglog		Employer (Coo Instruction	2	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       El Paso, TX 79924         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
06/28/2024       Coleman, Nathan       \$25.00         Contributor address; City; State; Zip Code       \$25.00         El Paso, TX 79924       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)				-	
Contributor address; City; State; Zip Code         El Paso, TX 79924         Principal occupation / Job title (See Instructions)         Employer (See Instructions)			<i>t</i> :)	Amount of Contribution (\$)	Ф <u>Э</u> Е ОО
El Paso, TX 79924       Principal occupation / Job title (See Instructions)       Employer (See Instructions)	UO/20/2U24				\$Z3.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions)		El Paso. TX 79924			
	Principal occ		Employer (See Instructions	<u> </u>	

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The Instru	ction Guide explains how to comple	ete this fo	rm.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/17	
2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
Lawrence, V	Vesley A. (Mr.)				00000029	
4 Date	5 Full name of contributor out-of-state	e PAC (ID#:	)	7	Amount of Contribution (\$)	
04/24/2024	Driscoll, Donald					\$250.00
	6 Contributor address; City; State; Zip Code					
Dringingloccu	El Paso, TX 79930		Employer (See Instructions			
8 Principal occu union organi	pation / Job title (See Instructions)	1	Employer (See Instructions NNOC	)		
_				_	······································	
Date		e PAC (ID#:	)		Amount of Contribution (\$)	<u>ቀን</u> ፍ በበ
04/16/2024						\$25.00
	Contributor address; City; State; Zip Code					
	El Paso, TX 79935					
Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	;)		
Clinical socia	al worker		Private Practice			
Date	Full name of contributor out-of-state	e PAC (ID#:	)		Amount of Contribution (\$)	
01/09/2024	Fierro, Enriqueta					\$25.00
	Contributor address; City; State; Zip Code					
Drincinal occu	El Paso, TX 79925 Ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
Retired			Employer (See Instructions Retired	9		
Date	Full name of contributor out-of-state	e PAC (ID#:	)		Amount of Contribution (\$)	
04/20/2024	Guillen, Dora	e Pac (id#				\$50.00
07/20/202 .	Contributor address; City; State; Zip Code					400.00
	El Paso, TX 79904					
	pation / Job title (See Instructions)		Employer (See Instructions	3)		
Certified Del	ot Specialist		National Debt Relief			
Date	Full name of contributor out-of-state	e PAC (ID#:	)		Amount of Contribution (\$)	
05/24/2024	Guillen, Dora					\$25.00
	Contributor address; City; State; Zip Code	1				
	El Paso, TX 79904					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
Certified Del			National Debt Relief	9		

_				1	Total pages Schedule A1:	
	The Instru	ction Guide explains how to complete this fe	orm.		Sch: 6/10 Rpt: 9/17	
2	FILER NAME				Filer ID (Ethics Commission	n Filers)
	Lawrence, W	Vesley A. (Mr.)			0000029	
4		5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/02/2024	Hennes, Ronald				\$100.00
		6 Contributor address; City; State; Zip Code				
		El Paso, TX 79902				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	CCRN		UMC El Paso			
—	Date	Full name of contributor out-of-state PAC (ID#:	)	$\overline{\Box}$	Amount of Contribution (\$)	
	04/24/2024	Hennes, Ronald				\$100.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79902		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions UMC EI Paso	s)		
	CCRN			—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷ • • • • • • • •
	04/25/2024					\$100.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79925				
<u> </u>	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	IBCLC		Self	- /		
F	Date	Full name of contributor Out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	05/14/2024	Humphreys, Carlos			· · · · · · · · · · · · · · · · · · ·	\$20.24
		Contributor address; City; State; Zip Code		·		
L		El Paso, TX 79930				
		upation / Job title (See Instructions)	Employer (See Instructions			
L	Librarian		El Paso Community Col	llege	9	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	04/24/2024	Limon, Jose				\$50.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79925				
$\vdash$	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>م</u>		
	Retired		Retired	5)		
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	The Instru	ction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 7/10 Rpt: 10/17	
2	FILER NAME				Filer ID (Ethics Commission	n Filers)
		Vesley A. (Mr.)			00000029	
4	Date	5 Full name of contributor out-of-state PAC (ID#	±)	7	Amount of Contribution (\$)	
	05/14/2024	Lugo, Judy				\$25.00
	1	6 Contributor address; City; State; Zip Code		"		
	ļ					
	ļ					
		El Paso, TX 79930				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
Γ	Date	Full name of contributor out-of-state PAC (ID#	:)	Τ	Amount of Contribution (\$)	
	06/30/2024	Lugo, Judy				\$15.00
		Contributor address; City; State; Zip Code				
	ļ					
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		El Paso, TX 79930				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID#	-• :)	Τ	Amount of Contribution (\$)	
	04/24/2024	Maria, Del Socorro Limon				\$100.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ					
		Austin, TX 78723				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#	±)	T	Amount of Contribution (\$)	
	04/24/2024	Paz, Debra				\$10.00
	1	Contributor address; City; State; Zip Code		"		
	ļ					
	ļ					
		El Paso, TX 79930				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Csr		Maximus			
	Date	Full name of contributor out-of-state PAC (ID#	)	Τ	Amount of Contribution (\$)	
	01/16/2024	Roberts, Duane				\$25.00
		Contributor address; City; State; Zip Code		"		
	ļ					
		El Paso, TX 79912				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Registered N	lurse	VA			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/17	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission	ı Filers)
	Nesley A. (Mr.)		0000029	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
04/27/2024	Roberts, Duane			\$50.00
	6 Contributor address; City; State; Zip Code		1	
	El Paso, TX 79912			
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Registered N	Nurse	VA		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/02/2024	Salem, Emad			\$50.00
	Contributor address; City; State; Zip Code		1	
	Euless, TX 76040			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Realtor		Sellstate Metro Realty		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/25/2024	Schulte, Kim			\$50.00
	Contributor address; City; State; Zip Code			
	El Paso, TX 79932			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	
counselor		UHS		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/02/2024	Scudder, Kendall			\$100.00
	Contributor address; City; State; Zip Code		1	
	Dallas, TX 75214			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Self Emoplo	yed	Self		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/22/2024	Staudt, Kathleen (Dr.)			\$250.00
	Contributor address; City; State; Zip Code		1	
	El Paso, TX 79934			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired		Retired		

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 9/10 Rpt: 12/17	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Vesley A. (Mr.)			00000029	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	04/23/2024	Strater, Jeffery				\$50.00
		6 Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Dallas, TX 75204				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Assistant Dir	rector Innovation Special Programs	Ernst & Young			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/07/2024	Sundquist, Tammy				\$25.00
	ļ	Contributor address; City; State; Zip Code	1	1		
	ļ					
	ļ					
		El Paso, TX 79925				
		Ipation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Zoo Collectic	on Supervisor	City of El Paso			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/24/2024	Valdez, Jesus				\$25.00
	ļ	Contributor address; City; State; Zip Code		]		
	ļ					
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	Duincipal casu	El Paso, TX 79922		ŕ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions Retired	3)		
			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷=0.00
	04/26/2024	Vazquez, Victor				\$50.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	El Paso, TX 79912				
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions			
	REALTOR		Self-Employed	<i>&gt;</i> )		
╞				—	t · · · · · · t · f · · · · · · · · · ·	
	Date 04/25/2024	Full name of contributor out-of-state PAC (ID#: Vera, Beatriz	)		Amount of Contribution (\$)	\$100.00
	04/23/2024					ΦT00.00
		Contributor address; City; State; Zip Code				
	ļ	El Paso, TX 79936				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
	Not Employe		Not Employed	"		

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/10 Rpt: 13/17 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Lawrence, Wesley A. (Mr.) 0000029 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 04/24/2024 \$50.00 Williams, Maria 6 Contributor address; City; State; Zip Code El Paso, TX 79925 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) El Paso Community College Professor Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/24/2024 \$50.00 Zielsdorf, Calvin Contributor address; City; State; Zip Code El Paso, TX 79912 Principal occupation / Job title (See Instructions) Employer (See Instructions) EPCAD Appraiser

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/17					
2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Lawrence, \	Nesley A. (Mr.)		0000029				
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
5	Date 06/30/2024	<ul> <li>6 Full name of contributor out-of-state PAC (ID#:Lawrence, Wesley (The Honorable)</li> <li>7 Contributor address; City; State; Zip Code</li> <li>El Paso, TX 79934</li> </ul>	)	8	Amount of contribution (\$) 9 In-kind contribution description \$250.00   T-Shirts, stickers, and buttons			
10	Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-JUDICIAL) (See instructions)					
	Student		Student					
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	16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repaymer Fees Office Overhead Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense		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	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 15/17		Lawrence, Wesley A. (Mr.)					0000029
4	Date	5	Payee name					
	05/30/2024		Aaron Alexanders NICU Club					
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$50.00	5312 Capistrano Dr						
		El Paso, TX 79924						
8	PURPOSE	(a)	Category (See Categories listed at the top of this		(b)	Description		
-	OF		Advertising Expense	schedule)	(,		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense
						Campaign Ac	lve	rtisement
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	06/30/2024		Act Blue					
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode			
	\$27.38							
			Somerville, MA 02144					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Fees	schedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l ught			Office held
	Date Payee name							
	06/18/2024		Campaign Verify					
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode			
	\$95.00		1215 31st Street NW PO Box 3554					
			Washington, DC 20007		1			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(a)	Description	OUTSI	de of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense				, тх,	officeholder living expense
-	Complete ONLY if direct	L(	Candidate/Officeholder name	Office sou	ught			Office held
	expenditure to benefit C/OI	H			~			

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense y - 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 Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Sch: 2/3 Rpt: 16/17		Lawrence, Wesley A. (Mr.)					00000029	,
4	Date 05/16/2024		<sup>5</sup> ayee name Canva						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	le			
	\$100.00	3212 E Cesar Chavez St Austin, TX 78702							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Advertising Expense	e top of this sch	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held	
	Date		Payee name						
	05/21/2024		El Paso Democratic Party						
	Amount (\$)		Payee address; City;	State;	; Zip Co	le			
	\$175.00		1401 Montana Ave suite e El Paso, TX 79902						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Event Expense	e top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense It Sponsor	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held	
	Date		<sup>D</sup> ayee name						
	06/12/2024		Texas Democratic Party						
	Amount (\$) \$605.00	I	Payee address; City; 314 E. Highland Mall Blvd, S		; Zip Coo	le			
			Austin, TX 78752						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Advertising Expense	e top of this sch	iedule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ht		Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overh Food/Beverage Expense Polling Expe Gift/Awards/Memorials Expense Printing Exp						
		The Instruction Guide explains how to com						
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 3/3 Rpt: 17/17	Lawrence, Wesley A. (Mr.)	0000029					
4	Date 05/20/2024	Payee name Texas Progressive Caucus						
6	Amount (\$)     7 Payee address; City; State; Zip Code     \$100.00     PO Box 59     Lampasas, TX 76550							
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	<ul> <li>Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Happy Hour Event Sponsor during TX Dem Convention</li> </ul>					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sough	nt Office held					