FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 25 00000035 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Renard U. NAME Date Received **ELECTRONICALLY FILED** 07/11/2025 NICKNAME LAST **SUFFIX** Johnson CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 972081 MAILING Receipt # Amount **ADDRESS** Change of Address El Paso, TX 79997 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Elisa NAME NICKNAME LAST **SUFFIX** Samaniego STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 6376 Franklin Ridge Dr **ADDRESS** (Residence or Business) El Paso, TX 79912 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (915) 546-5209

January 15

Day

Day

OFFICE HELD (if any)

Mayor El Paso

ELECTION DATE

01/01/2025

Year

Year

July 15

Х

Month

Month

PHONE

REPORT **TYPE**

PERIOD

10 ELECTION

11 OFFICE

COVERED

30th day before election

8th day before election

THROUGH

Primary

General

Runoff

Exceeded modified

Month

ELECTION TYPE

Runoff

Special

Day

06/30/2025

12 OFFICE SOUGHT (if known)

Year

Other

reporting limit

15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 25

13 C / OH NAME	Johnson, Renard U.		14 Filer ID 00000035	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have be	political expenditures made by political en made without the candidate's or of ort this information only if they receive	ficeholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREA	SURER NAME	-
		COMMITTEE CAMPAIGN TREA	SURER ADDRESS	
16 CONTRIBUTION TOTALS			NS (OTHER THAN PLEDGES, LOAN ONS MADE ELECTRONICALLY)	\$ 0.00
		AL CONTRIBUTIONS LEDGES, LOANS, OR GUARAN	TEES OF LOANS)	\$ 61,700.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURE	S	\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 114,767.80
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		ED AS OF THE LAST DAY OF THE	\$ 2,022.18
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		DING LOANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		true and corre	irm, under penalty of perjury, that the ct and includes all information require , Election Code.	
			Renard U. Johnson	
			Signature of Candidate or Office	holder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to co	rtify which, witness my hand and	seal of office.	
Signature of office	er administering	Printed name of officer adm	inistering Title of offi	icer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 of 25
	ER NAM		19 Filer ID	(Eth	nics Commission Filers)
		Renard U.	00000035		
		E SUBTOTALS			SUBTOTAL AMOUNT
IN/	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	61,700.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS					
4.	4. X SCHEDULE E: LOANS				40,000.00
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				109,726.00
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	5,041.80
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 RETURNED TO FILER				\$	
ĺ					

MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	_E A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/25		
2	FILER NAME Johnson, Re	nard U.		3	Filer ID (Ethics Commission 00000035	on Filers)	
4	Date 04/27/2025	5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$1,000.00	
8	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)			
	Date Full name of contributor out-of-state PAC (ID#:) 04/27/2025 Armedariz, Barbara Contributor address; City; State; Zip Code 5504 woodfield El Paso, TX 79932			Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date O4/27/2025 Borsch, Gary Contributor address; City; State; Zip Code 5845 cromo drive suite 3			Amount of Contribution (\$)	\$500.00		
	Dringinal occu	El Paso, TX 79912 pation / Job title (See Instructions)	Employer (See Instructions	·,			
	r ilicipai occu	pation / 300 title (See instructions)	Employer (See instructions	•)			
	Date 04/27/2025	Full name of contributor out-of-state PAC (ID#: Bowling, Bobby Contributor address; City; State; Zip Code 457 san clemente El Paso, TX 79912)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 04/27/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)			
		I.					

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/25	
2	FILER NAME Johnson, Re	nard U.		3	Filer ID (Ethics Commission 00000035	on Filers)
4	Date 01/17/2025	Bustillos, Alvaro 6 Contributor address; City; State; Zip Code 121 camino barranca		7	Amount of Contribution (\$)	\$2,000.00
8	Principal occu	El Paso, TX 79912 Dation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 04/08/2025				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/17/2025	Full name of contributor out-of-state PAC (ID#:) Fernandez, Miguel Contributor address; City; State; Zip Code 411 Rim Road			Amount of Contribution (\$)	\$3,500.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 04/27/2025	Full name of contributor out-of-state PAC (ID#:_Folmer, John Contributor address; City; State; Zip Code 4961 vista del monte El Paso, TX 79922			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 04/08/2025	Full name of contributor out-of-state PAC (ID#:_Fox, Paige Contributor address; City; State; Zip Code 765 Meadowlark Dr El Paso, TX 79922			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
			1			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/25	
2	FILER NAME Johnson, Re	nard U.		3	Filer ID (Ethics Commission 00000035	on Filers)
4	Date 04/27/2025			7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	El Paso, TX 79901 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 04/27/2025				Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/27/2025				Amount of Contribution (\$)	\$2,500.00
	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)	Employer (See Instructions	 - s)		
	Date 04/03/2025	Full name of contributor out-of-state PAC (ID#: Houghton, Ted Contributor address; City; State; Zip Code 210 N Campbell St El Paso, TX 79901			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/27/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this for	m.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/25		
2	FILER NAME Johnson, Re	nard U.		3	Filer ID (Ethics Commissi 00000035	on Filers)	
4	Date 01/27/2025	5 Full name of contributor out-of-state PAC (ID#:) Jobe, Stanley 6 Contributor address; City; State; Zip Code 1150 Southview Drive		7	Amount of Contribution (\$)	\$10,000.00	
8	Principal occu	El Paso, TX 79928 pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 04/27/2025				Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))			
	Date 04/27/2025				Amount of Contribution (\$)	\$1,000.00	
	Principal occu	El Paso, TX 79932 pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 04/07/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>			
	Date 05/03/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/25	
2	FILER NAME Johnson, Re	nard U.		3	Filer ID (Ethics Commission 00000035	on Filers)
4	Date 04/27/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ;)		
	Date 04/27/2025				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 04/14/2025	Palacios, Robert Contributor address; City; State; Zip Code 914 W Yandell Dr			Amount of Contribution (\$)	\$100.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
		salion, out the (coo mended)		,		
	Date 04/08/2025	Full name of contributor out-of-state PAC (ID#: Peisen, Lisa Contributor address; City; State; Zip Code 4785 Turtle Dove El Paso, TX 79922)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/08/2025	Full name of contributor out-of-state PAC (ID#:_Robison, J K Contributor address; City; State; Zip Code 4445 N Mesa El Paso, TX 79902			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUL	.E A1	
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 9/25		
2	FILER NAME Johnson, Re	nard U.	3	Filer ID (Ethics Commission 00000035	n Filers)	
4	Date 04/15/2025	5 Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00	
8	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions) 9 Em	ployer (See Instructions)			
	Date 04/27/2025			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	ployer (See Instructions)			
	Date 04/27/2025			Amount of Contribution (\$)	\$500.00	
	Principal occu	El Paso, TX 79922 pation / Job title (See Instructions)	ployer (See Instructions)			
	- Timolpai ooda	Salion, out the (eee mediations)	proyer (eee meaderier)			
	Date 04/27/2025	Full name of contributor out-of-state PAC (ID#: Smith, Bridget Contributor address; City; State; Zip Code 900 via corta ct El Paso, TX 79912		Amount of Contribution (\$)	\$400.00	
	Principal occu	pation / Job title (See Instructions)	ployer (See Instructions)			
	Date 04/27/2025	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$300.00	
	Principal occu	pation / Job title (See Instructions)	ployer (See Instructions)			
		I				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/7 Rpt: 10/25	
2	FILER NAME Johnson, Re			3	Filer ID (Ethics Commission 00000035	on Filers)
4	Date 01/02/2025	 5 Full name of contributor out-of-state PAC (ID#:_goodman, Leonard 6 Contributor address; City; State; Zip Code 4911 Meadowlark Drive El Paso, TX 79922)	7	Amount of Contribution (\$)	\$350.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/27/2025 hunt, woody and gayle Contributor address; City; State; Zip Code Po box 12667 El Paso, TX 79913			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	ppation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/02/2025	Full name of contributor out-of-state PAC (ID#:_smith, Bridget Contributor address; City; State; Zip Code 900 via corta ct El Paso, TX 79912			Amount of Contribution (\$)	\$450.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to com	plete this f	orm.	1	ages Schedule E: ./1 Rpt: 11/25
2	FILER NAME Johnson, Renar	rd U.			3 Filer ID 00000	(Ethics Commission Filers)
4	TOTAL OF UN	NITEMIZED LOANS				\$
5	Date of loan 01/10/2025	7 Name of lender Johnson, Renard	out-of-state PA	C (ID#:		9 Loan Amount (\$) \$40,000.00
6	Is lender a financial institution?	8 Lender address; City; 8600 Boeing Dr	State;	Zip Code		10 Interest Rate 11 Maturity Date
46	N Doine in a Language	El Paso, TX 79925		Lao Essela es (Os a la desse	>	
12	г Рппсіраї оссирац	on / Job title (See Instructions)		13 Employer (See Instruct	ons)	
14	Description of Col X None	lateral		15 Check if personal funds	were deposite	ed into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address; City;	State;	Zip Code		
20	Principal occupati	on		21 Employer (See Instruct	ons)	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/8 Rpt: 12/25	Johnson, Renard U.	00000035
4	Date	5 Payee name	•
	02/07/2025	American Express	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$95.00	200 Vesey Street	
		New York, NY 10285	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
		Credit card	in, 17, one choice living expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H Johnson, Renard Mayor Place El Paso	
	Date	Payee name	
	05/05/2025	American Express	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$116.90	200 Vesey Street	
		New York, NY 10285	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
		Credit card	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H Johnson, Renard Mayor	
	Date	Payee name	
	06/03/2025	American Express	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$53.00	200 Vesey Street	
		New York, NY 10285	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	el outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Gara Fayment	tin, TX, officeholder living expense
		Credit card	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to beriefft C/OI	¹ Johnson, Renard Mayor	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/8 Rpt: 13/25	Johnson, Renard U. 00000035
4	Date	5 Payee name
	01/30/2025	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$220.60	1340 Poydras St
		New Orleans, LA 70112
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	SOFTWARE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Software
		Soliward
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	, and the second
	Date	Payee name
	04/30/2025	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$546.40	1340 Poydras St
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	SOFTWARE Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Software
		Soliware
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	5 .	•
	Date	Payee name
	01/31/2025	Catalyst Advisors
	Amount (\$)	Payee address; City; State; Zip Code
	\$460.80	1108 Lavaca St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	SOFTWARE Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Software
	Complete ONII V if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held Johnson, Renard Mayor Place El Paso
	•	John Son, Rehald Mayor Flace El Faso

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment		The Instruction Guide explains how to co	mple	ete this form.	
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commissio	n Filers)
	Sch: 3/8 Rpt: 14/25		Johnson, Renard U.		00000035	
4	Date	5	Payee name		•	
	01/31/2025		Gear and Level			
6	Amount (\$)	7	Payee address; City; State; Zip Co	de		
	\$984.50		720 Main St,			
			Canon City, CO 81212			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
	EXPENDITURE		Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
					Payroll	
					,	
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	ght	Office held	
	expenditure to benefit C/O	H J	ohnson, Renard Mayor Pl	ace	El Paso	
	Date		Payee name			
	04/28/2025		Johnson, Renard			
	Amount (\$)		Payee address; City; State; Zip Co	de		
	\$38,000.00		8600 Boeing Dr			
			El Paso, TX 79925			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE		Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
					Loan Repayment	
					4.9	
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ght	Office held	
	expenditure to benefit C/OH	H J	ohnson, Renard Mayor			
	Date		Payee name			
	06/25/2025		Johnson, Renard			
	Amount (\$)		Payee address; City; State; Zip Co	de		
	\$2,000.00		8600 Boeing Dr			
			El Paso, TX 79925			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE		Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
					Loan Repayment	
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ght	Office held	
	expenditure to benefit C/OH	H J	ohnson, Renard Mayor Pl	ace	El Paso	
1						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Polling Expense Travel in Dis Printing Expense Travel Out of Salaries/Wages/Contract Labor OTHER (en

l	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 4/8 Rpt: 15/25	2 FILER NAME Johnson, Renard U.	3 Filer ID (Ethics Commission Filers) 00000035
4	Date 01/06/2025	5 Payee name Murphy Nasica	I
6	Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 919 Congress Ave. Austin, TX 78701	
8	PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Johnson, Renard Mayor	Office held
	Date 01/29/2025	Payee name Setforth Strategies	
	Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 3748 Sienna ave	
		Las Cruces, NM 88012	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Johnson, Renard Mayor Place	
	Date 01/29/2025	Payee name Setforth Strategies	
	Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 3748 Sienna ave	
		Las Cruces, NM 88012	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Johnson, Renard Mayor Place	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	ll Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/8 Rpt: 16/25	Johnson, Renard U. 00000035
4	Date	5 Payee name
	01/29/2025	Setforth Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,000.00	3748 Sienna ave
		Las Cruces, NM 88012
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Consulting
		Consuming
_	Complete ONLY if direct	Constitute / Office helds no new Constitute of the constitute of t
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Hayor Place El Paso Office held
	<u> </u>	Johnson, Renard Mayor Place El Paso
	Date	Payee name
	02/28/2025	Setforth Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$18,000.00	3748 Sienna ave
		Las Cruces, NM 88012
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Consulting
		Consulting
	Operation ONLY if allowed	Our stide to 10 ff as health are seen as 10 ff as a sought
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held Mayor Place El Pace
	'	Johnson, Renard Mayor Place El Paso
	Date	Payee name
	04/23/2025	Setforth Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	3748 Sienna ave
		Las Cruces, NM 88012
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Consulting
		Consulting
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Johnson, Renard Mayor Place El Paso
		Juliisuli, ivelialu iviayul Flace El Pasu

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.	-,
1 Total pages Schedule Sch: 6/8 Rpt: 17/2		n Filers)
4 Date 01/15/2025	5 Payee name WestStar	
6 Amount (\$) \$43.	7 Payee address; City; State; Zip Code 601 N Mesa El Paso, TX 79901	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees	
Complete ONLY if dire expenditure to benefit		
Date 02/14/2025	Payee name WestStar	
Amount (\$) \$37.	Payee address; City; State; Zip Code 7.20 601 N Mesa El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees	
Complete <u>ONLY</u> if dire expenditure to benefit		
Date 03/14/2025	Payee name WestStar	
Amount (\$) \$35.	Payee address; City; State; Zip Code 601 N Mesa	
	El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees	
Complete <u>ONLY</u> if dire expenditure to benefit		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

		The instruction dulae explains now to co	iiipic	te tills form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 7/8 Rpt: 18/25	Johnson, Renard U.		00000035
4	Date	5 Payee name		·
	03/31/2025	WestStar		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$14.00	601 N Mesa		
		El Paso, TX 79901		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Fees
				rees
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
"	expenditure to benefit C/O			
⊨	Data	•		2.1 400
	Date	Payee name		
L	04/15/2025	WestStar		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$35.00	601 N Mesa		
		El Paso, TX 79901		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Fees
Г	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OF	Johnson, Renard Mayor Pl	ace	El Paso
F	Date	Payee name		
	05/15/2025	WestStar		
H	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$35.00	601 N Mesa		
		El Paso, TX 79901		
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Fees	(-,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Fees
L				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	ght	Office held
ldash		¹ Johnson, Renard Mayor		
l				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/8 Rpt: 19/25	Johnson, Renard U.	00000035
4	Date	5 Payee name	•
l	05/30/2025	WestStar	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$14.00	601 N Mesa	
l			
l		El Paso, TX 79901	
Ļ	DUDD 0.05		
8	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Fees	Check if days oddside of Texas. Complete Schedule 1.
l			Fees
l			
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
l	expenditure to benefit C/O	^H Johnson, Renard Mayor Plac	
F	Date	Payee name	
l	06/16/2025	WestStar	
┝			
l	Amount (\$) \$35.00	Payee address; City; State; Zip Code 601 N Mesa	;
l	Φ33.00	OUT IN Mesa	
l			
ı		El Paso, TX 79901	
⊢	DUDDOCE	(a) Category (a. a	D) Description
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	OF		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	OF		Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees
	OF	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held
	OF EXPENDITURE Complete ONLY if direct	Fees Candidate/Officeholder name Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/6 Rpt: 20/25 Johnson, Renard U. 00000035 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 01/09/2025 Salgado Photo Amount (\$) Payee address; City; State; Zip Code \$250.00 12173 MISSY YVETTE DR El Paso, TX 79936 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Event Expense** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso Date Payee name 01/18/2025 Nationbuilder Amount (\$) Payee address; City; State; Zip Code \$21.00 6515 WEST SUNSET BLVD Los Angeles, CA 90028 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/6 Rpt: 21/25 Johnson, Renard U. 00000035 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 01/24/2025 **Outreach Circle** Amount (\$) Payee address; State; Zip Code City; \$4,458.60 444 WEST OCEAN LONG BEACH, CA 90802 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso Date Payee name 01/29/2025 **USPS** Payee address: Amount (\$) City; State; Zip Code \$83.00 8401 BOEING DR El Paso, TX 79910 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Postage **EXPENDITURE** Check if Austin, TX, officeholder living expense Other Complete ONLY if direct Candidate/Officeholder name Office sought Office held

expenditure to benefit C/OH

Johnson, Renard

Mayor Place El Paso

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/6 Rpt: 22/25 Johnson, Renard U. 00000035 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 02/18/2025 Nationbuilder Amount (\$) Payee address; City; State; Zip Code \$21.00 6515 WEST SUNSET BLVD Los Angeles, CA 90028 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso Date Payee name 02/19/2025 HOTEL PASO DEL NORTE Amount (\$) Payee address; City; State; Zip Code \$17.30 10 HENRY TROST CT El Paso, TX 79901 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Event Expense** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/6 Rpt: 23/25 Johnson, Renard U. 00000035 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 03/18/2025 Nationbuilder Amount (\$) Payee address; City; State; Zip Code \$21.00 6515 WEST SUNSET BLVD Los Angeles, CA 90028 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso Payee name Date 04/03/2025 Google Amount (\$) Payee address; City; State; Zip Code \$95.90 1600 AMPHITHEATRE PKWY Mountain View, CA 94043 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/6 Rpt: 24/25 Johnson, Renard U. 00000035 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 04/18/2025 Nationbuilder Amount (\$) Payee address; City; State; Zip Code \$21.00 6515 WEST SUNSET BLVD Los Angeles, CA 90028 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Johnson, Renard Mayor Date Payee name 05/18/2025 Nationbuilder Amount (\$) Payee address; City; State; Zip Code \$21.00 6515 WEST SUNSET BLVD Los Angeles, CA 90028 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) 00000035 Sch: 6/6 Rpt: 25/25 Johnson, Renard U. \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 06/01/2025 Google Amount (\$) Payee address; City; State; Zip Code \$32.00 1600 AMPHITHEATRE PKWY Mountain View, CA 94043 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **SOFTWARE EXPENDITURE** Check if Austin, TX, officeholder living expense Software 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Johnson, Renard Mayor Place El Paso