

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 36
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Clay	MI
	NICKNAME	LAST Jenkins	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	PO Box 600757 Dallas, TX 75360		
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged </div> <div style="float: right; text-align: center; margin-top: 20px;"> FILED 2024 JAN 12 PM 2:00 JOSEPH HANSEN COUNTY CLERK DALLAS COUNTY TEXAS </div>			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST George	MI
	NICKNAME	LAST Quesada	SUFFIX
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;
	3811 Turtle Creek		Ste 1400
		CITY;	STATE; ZIP CODE
		Dallas	TX 75219
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(214)	720-0720	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	07/01/2023	THROUGH	12/31/2023
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
	Dallas County Judge		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 36

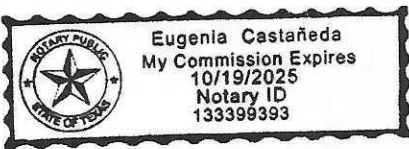
13 C / OH NAME Jenkins, Clay	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.							
<table border="1" style="width:100%"> <tr> <td style="width:20%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td></td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL		<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS	
	COMMITTEE TYPE	COMMITTEE NAME						
	<input type="checkbox"/> GENERAL							
	<input type="checkbox"/> SPECIFIC							
COMMITTEE CAMPAIGN TREASURER NAME								
COMMITTEE CAMPAIGN TREASURER ADDRESS								

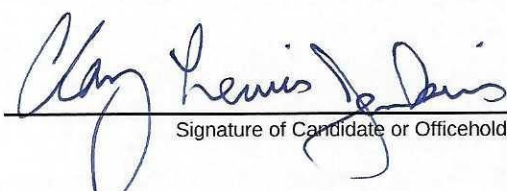
16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	23,672.72
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	93,747.66
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	375,538.19
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

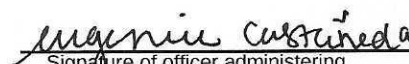


AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Clay Lewis Jenkins, this the 12 day of January, 20 24, to certify which, witness my hand and seal of office.



Signature of officer administering

Eugenia Castañeda

Printed name of officer administering

Notary

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Jenkins, Clay	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,672.72
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 93,747.66
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/17 Rpt: 4/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Robert	7 Amount of Contribution (\$) \$51.83
6 Contributor address; City; State; Zip Code 9111 Ghlen Stone Ln Dallas, TX 75232		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Amy	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code 6846 Chantilly Ln Dallas, TX 75214-2718		
Principal occupation / Job title (See Instructions) stay at home parent		Employer (See Instructions) Not Employed
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beasley, Kathy	Amount of Contribution (\$) \$51.83
Contributor address; City; State; Zip Code 8302 Charles St Greenville, TX 75402-3907		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Garrett	Amount of Contribution (\$) \$5,162.70
Contributor address; City; State; Zip Code 4809 Cole Ave Ste 300 Dallas, TX 75205-3553		
Principal occupation / Job title (See Instructions) Co-Founder		Employer (See Instructions) The Container Store
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Tsuki	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code 2198 Aylesport Dr Dallas, TX 75201-6301		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/17 Rpt: 5/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruegger, Judi	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code PO Box 670344 Dallas, TX 75367-0344		
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Self
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Gloria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1314 Guildford St Garland, TX 75040-3326		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Gloria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1314 Guildford St Garland, TX 75040-3326		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chizeck, Susan P	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code 7617 Meadowhaven Dr Dallas, TX 75254-8014		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) University of Texas - dallas
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Robert	Amount of Contribution (\$) \$103.45
Contributor address; City; State; Zip Code 7039 Westlake Ave Dallas, TX 75214-3545		
Principal occupation / Job title (See Instructions) Retired attorney		Employer (See Instructions) Wilson Elser

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/17 Rpt: 6/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Kevin 6 Contributor address; City; State; Zip Code 500 Shinoak Vly Irving, TX 75063-6832	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Numismatist		9 Employer (See Instructions) Self Employed
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Betty Taylor Contributor address; City; State; Zip Code 3724 Amherst Ave Dallas, TX 75225-7201	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) journalist/film maker		Employer (See Instructions) Retired
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cranford, Suzanne Contributor address; City; State; Zip Code 7200 S R L Thornton Fwy Trlr 65 Dallas, TX 75232-4041	Amount of Contribution (\$) \$3.30
Principal occupation / Job title (See Instructions) Theatrical costume designer and wardrobe manager		Employer (See Instructions) Uptown Players
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cranshaw, Dorie Contributor address; City; State; Zip Code 4722 Stanford Ave Dallas, TX 75209-3118	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Madeleine Contributor address; City; State; Zip Code 5806 Anita St Dallas, TX 75206-5529	Amount of Contribution (\$) \$206.70
Principal occupation / Job title (See Instructions) Association management		Employer (See Instructions) Madeleine Crouch & Co. Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/17 Rpt: 7/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 07/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dingman, Joseph	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 13223 Glad Acres Dr Dallas, TX 75234-5202		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbs, David Elis	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 3849 Brighton Creek Cir Tyler, TX 75707-1676		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dobbs and Porter PLLC
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrhardt, Harryette Bushong	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code 3525 Turtle Creek Blvd Apt 8A Dallas, TX 75219-5516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Charles	Amount of Contribution (\$) \$51.83
Contributor address; City; State; Zip Code 12429 Scofield Farms Dr # D Austin, TX 78758-2640		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forsythe-Lill, Veletta	Amount of Contribution (\$) \$51.83
Contributor address; City; State; Zip Code 622 Blair Blvd Dallas, TX 75223-1104		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/17 Rpt: 8/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright, Lewis	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 407 Cardinal Creek Dr # FR Duncanville, TX 75137-3136		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.53
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/17 Rpt: 9/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 08/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
8 Principal occupation / Job title (See Instructions) RN LMSW		9 Employer (See Instructions) Faith Presbyterian Hospice
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240		
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/17 Rpt: 10/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 11/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> 6 Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN LMSW		9 Employer (See Instructions) Faith Presbyterian Hospice
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code 12304 Shiremont Dr Dallas, TX 75230-2240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carol <hr/> Contributor address; City; State; Zip Code PO Box 982 Mariposa, CA 95338-0982	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/17 Rpt: 11/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jolly, Steven	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code PO Box 190707 Dallas, TX 75219-0707	
8 Principal occupation / Job title (See Instructions) Healthcare Consultant		9 Employer (See Instructions) SRJ Marketing Communications LLC
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katz, Michael	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 15480 Dallas Pkwy Apt 4054 Dallas, TX 75248-4951	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanphier, Marianne	Amount of Contribution (\$) \$26.01
	Contributor address; City; State; Zip Code 903 S Weatherred Dr Richardson, TX 75080-7207	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lederer, Robin	Amount of Contribution (\$) \$20.85
	Contributor address; City; State; Zip Code 1200 Main St Apt 2012 Dallas, TX 75202-4310	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Sally	Amount of Contribution (\$) \$20.85
	Contributor address; City; State; Zip Code 7405 Winterwood Ln Dallas, TX 75248-5251	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/17 Rpt: 12/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison <hr/> 6 Contributor address; City; State; Zip Code 2208 Miranda PI Denton, TX 76210-4637	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison <hr/> Contributor address; City; State; Zip Code 2208 Miranda PI Denton, TX 76210-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison <hr/> Contributor address; City; State; Zip Code 2208 Miranda PI Denton, TX 76210-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison <hr/> Contributor address; City; State; Zip Code 2208 Miranda PI Denton, TX 76210-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison <hr/> Contributor address; City; State; Zip Code 2208 Miranda PI Denton, TX 76210-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/17 Rpt: 13/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 12/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code 2208 Miranda Pl Denton, TX 76210-4637	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCallion, Carol	Amount of Contribution (\$) \$10.53
	Contributor address; City; State; Zip Code 12719 Epps Field Rd Dallas, TX 75234-6207	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGilberry, Megan	Amount of Contribution (\$) \$5.36
	Contributor address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
Principal occupation / Job title (See Instructions) Founder President		Employer (See Instructions) MRM & Co.
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Susan Kines	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 3432 Lovers Ln Dallas, TX 75225-7630	
Principal occupation / Job title (See Instructions) Insurance Underwriter		Employer (See Instructions) Public Risk Underwriters of Texas
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Susan Kines	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 3432 Lovers Ln Dallas, TX 75225-7630	
Principal occupation / Job title (See Instructions) Insurance Underwriter		Employer (See Instructions) Public Risk Underwriters of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/17 Rpt: 14/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Susan Kines	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 3432 Lovers Ln Dallas, TX 75225-7630		
8 Principal occupation / Job title (See Instructions) Insurance Underwriter		9 Employer (See Instructions) Public Risk Underwriters of Texas
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Susan Kines	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 3432 Lovers Ln Dallas, TX 75225-7630		
Principal occupation / Job title (See Instructions) Insurance Underwriter		Employer (See Instructions) Public Risk Underwriters of Texas
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Susan Kines	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 3432 Lovers Ln Dallas, TX 75225-7630		
Principal occupation / Job title (See Instructions) Insurance Underwriter		Employer (See Instructions) Public Risk Underwriters of Texas
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Susan Kines	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 3432 Lovers Ln Dallas, TX 75225-7630		
Principal occupation / Job title (See Instructions) Insurance Underwriter		Employer (See Instructions) Public Risk Underwriters of Texas
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, George	Amount of Contribution (\$) \$51.83
Contributor address; City; State; Zip Code 609 Matador Ln Apt 102 Mesquite, TX 75149-3252		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/17 Rpt: 15/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 07/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Janie B. 6 Contributor address; City; State; Zip Code 9220 Heatherdale Dr Dallas, TX 75243-6332	7 Amount of Contribution (\$) \$31.18
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton, Andrew Contributor address; City; State; Zip Code 521 Onyx Ct Mesquite, TX 75149-7530	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Trinidad Garza High School Dallas ISD
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obasi, Anthony Contributor address; City; State; Zip Code 26 N 35th St Camden, NJ 08105-2523	Amount of Contribution (\$) \$7.24
Principal occupation / Job title (See Instructions) Intern		Employer (See Instructions) Community Veteran Justice Project
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Ronald Contributor address; City; State; Zip Code 4058 Vuena Vista St Apt D Dallas, TX 75204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Walter Contributor address; City; State; Zip Code 725 Ridgeway St Dallas, TX 75214-4454	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Band leader/musician		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/17 Rpt: 16/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Jacqueline Marie 6 Contributor address; City; State; Zip Code 11009 Harmony Hill Ln Apt 8305 Rowlett, TX 75089-0201	7 Amount of Contribution (\$) \$26.01
8 Principal occupation / Job title (See Instructions) Interior Designer		9 Employer (See Instructions) Self Employed
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quesada Jr., George (Tex) A Contributor address; City; State; Zip Code 3811 Turtle Creek Blvd Ste 1400 Dallas, TX 75219-4492	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sommerman McCaffity & Quesada LLP
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rasansky, Mitchell Contributor address; City; State; Zip Code 5498 La Sierra Dr Dallas, TX 75231-4108	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Rasansky Co.
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reavis, Dick Contributor address; City; State; Zip Code 2902 Maple Springs Blvd Dallas, TX 75235-8319	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salem, David Contributor address; City; State; Zip Code 4600 Southern Ave Dallas, TX 75209-6026	Amount of Contribution (\$) \$20.85
Principal occupation / Job title (See Instructions) interior designer		Employer (See Instructions) David E. Salem interiors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/17 Rpt: 17/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Tim (Mr.)	7 Amount of Contribution (\$) \$20.85
6 Contributor address; City; State; Zip Code 9930 Donegal Dr Dallas, TX 75218-2809		
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) Self Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Cynthia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1421 Sunnybrook Dr Irving, TX 75061-4452		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinola, Luis	Amount of Contribution (\$) \$258.32
Contributor address; City; State; Zip Code 4608 Windsor Ridge Dr Irving, TX 75038-6312		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Azteca-omega group
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprinkle, Stephen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 3141 Mapleleaf Ln Dallas, TX 75233-2625		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Tom D.	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code 8418 Greenstone Dr Dallas, TX 75243-6506		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/17 Rpt: 18/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 11/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trager, Eric	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code 1541 White Water Rd New Braunfels, TX 78132-3284		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) ET Investments
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Wayne S	Amount of Contribution (\$) \$10.53
Contributor address; City; State; Zip Code 880 Windy Meadow Dr Desoto, TX 75115-7535		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Jay	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code 2696 Shelby Ave # 103 Dallas, TX 75219-4024		
Principal occupation / Job title (See Instructions) Commercial Real Estate Broker		Employer (See Instructions) Self Employed
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whaley, Dorothy	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code 2729 Blackstone Dr Dallas, TX 75237-2807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Robert	Amount of Contribution (\$) \$103.45
Contributor address; City; State; Zip Code 230 W 3rd St Odessa, TX 79761-5014		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Childs Bishop & White PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/17 Rpt: 19/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura 6 Contributor address; City; State; Zip Code 4905 Rollingwood Ct Garland, TX 75043-3431	7 Amount of Contribution (\$) \$20.85
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilderman, Michael Contributor address; City; State; Zip Code 3620 Potomac Ave Dallas, TX 75205-2111	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Home builder		Employer (See Instructions) Double Door Custom Homes Inc
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiles, Preston Contributor address; City; State; Zip Code 4612 Edmondson Ave Dallas, TX 75209-6010	Amount of Contribution (\$) \$20.85
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UT Southwestern
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witherite, Amy Contributor address; City; State; Zip Code 10440 N Central Expy Ste 400 Dallas, TX 75231-2228	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Witherite Law Group
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodward, Ruth Contributor address; City; State; Zip Code 5807 Belmont Ave Dallas, TX 75206-6803	Amount of Contribution (\$) \$26.01
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/17 Rpt: 20/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamorano, Wanda Jean <hr/> 6 Contributor address; City; State; Zip Code 531 Ranch Trl Apt 157 Irving, TX 75063-7614	7 Amount of Contribution (\$) \$20.85
8 Principal occupation / Job title (See Instructions) volunteer		9 Employer (See Instructions) Many Helping Hands

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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/16 Rpt: 21/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 07/04/2023	5 Payee name ActBlue	
6 Amount (\$) \$47.83	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fees - 7/1/23-12/31/23
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name Alaniz, Mary	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 4527 Myerwood Ln Dallas, TX 75244-7516	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution refund
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2023	Payee name Amazon.com Inc	
Amount (\$) \$2,566.40	Payee address; City; State; Zip Code 1200 12th Ave S Ste 1200 Seattle, WA 98144-2734	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gifts for supporters and constituents
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/16 Rpt: 22/36		2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 08/29/2023		5 Payee name Apple		
6 Amount (\$) \$24.67		7 Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014-0642		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital subscription	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 12/11/2023		Payee name Blue Nation Strategies		
Amount (\$) \$29,377.38		Payee address; City; State; Zip Code 5900 Harwick Rd Bethesda, MD 20816-1103		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign holiday card mailing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 08/21/2023		Payee name Colin Alred Campaign		
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code PO Box 601631 Dallas, TX 75360-1631		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/16 Rpt: 23/36	2 FILER NAME Jenkins, Clay	3 Filer ID
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4 Date 08/21/2023	5 Payee name Dallas AFL-CIO COPE Fund
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6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 1408 N Washington Ave Ste 240 Dallas, TX 75204-5168
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor Day event tickets
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Dallas County Democratic Party
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Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 1414 N Washington Ave Dallas, TX 75204-5261
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/24/2023	Payee name Dallas Democratic Forum
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Amount (\$) \$75.00	Payee address; City; State; Zip Code PO Box 634 Dallas, TX 75221-0634
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/16 Rpt: 24/36		2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/05/2023		5 Payee name GoDaddy		
6 Amount (\$) \$35.69		7 Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 219 Scottsdale, AZ 85260-6993		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website hosting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 09/05/2023		Payee name GoDaddy		
Amount (\$) \$22.17		Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 219 Scottsdale, AZ 85260-6993		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 08/31/2023		Payee name Gutierrez, Sarah		
Amount (\$) \$750.00		Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/16 Rpt: 25/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 07/18/2023	5 Payee name Gutierrez, Sarah	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2023	Payee name Gutierrez, Sarah	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2023	Payee name Gutierrez, Sarah	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/16 Rpt: 26/36	2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 11/15/2023	5 Payee name Gutierrez, Sarah		
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/15/2023	Payee name Gutierrez, Sarah		
Amount (\$) \$750.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/27/2023	Payee name HP Instant Ink		
Amount (\$) \$6.48	Payee address; City; State; Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ink for campaign printer	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/16 Rpt: 27/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 11/02/2023	5 Payee name HP Instant Ink	
6 Amount (\$) \$6.48	7 Payee address; City; State; Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ink for campaign printer
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/27/2023	Payee name HP Instant Ink	
Amount (\$) \$6.48	Payee address; City; State; Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ink for campaign printer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 12/27/2023	Payee name HP Instant Ink	
Amount (\$) \$6.48	Payee address; City; State; Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ink for campaign printer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/16 Rpt: 28/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 07/24/2023	5 Payee name Intuit	
6 Amount (\$) \$175.89	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 08/24/2023	Payee name Intuit	
Amount (\$) \$195.08	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/24/2023	Payee name Intuit	
Amount (\$) \$201.47	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/16 Rpt: 29/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 09/25/2023	5 Payee name Intuit	
6 Amount (\$) \$201.47	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/24/2023	Payee name Intuit	
Amount (\$) \$201.47	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 12/26/2023	Payee name Intuit	
Amount (\$) \$201.47	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/16 Rpt: 30/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 11/17/2023	5 Payee name Lone Star Project	
6 Amount (\$) \$15,000.00	7 Payee address; City; State; Zip Code 6 E St SE Washington, DC 20003-2611	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2023	Payee name McAfee Corp.	
Amount (\$) \$97.30	Payee address; City; State; Zip Code 6220 America Center Dr San Jose, CA 95002-2563	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Virus software for campaign equipment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2023	Payee name Microsoft	
Amount (\$) \$75.76	Payee address; City; State; Zip Code 1 Microsoft Way Redmond, WA 98052-8300	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/16 Rpt: 31/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 12/21/2023	5 Payee name NGP VAN	
6 Amount (\$) \$405.08	7 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Norton	
Amount (\$) \$368.04	Payee address; City; State; Zip Code 60 E Rio Salado Pkwy Ste 1000 Tempe, AZ 85281-9124	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Virus software for campaign equipment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Paragon	
Amount (\$) \$1,172.33	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/16 Rpt: 32/36	2 FILER NAME Jenkins, Clay	3 Filer ID
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4 Date 08/02/2023	5 Payee name Paragon
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6 Amount (\$) \$782.53	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name Paragon
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Amount (\$) \$207.27	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/02/2023	Payee name Paragon
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Amount (\$) \$176.63	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/16 Rpt: 33/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 11/10/2023	5 Payee name Paragon	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Paragon	
Amount (\$) \$25.02	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name Rodman McGilberry, Megan	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought 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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/16 Rpt: 34/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 07/06/2023	5 Payee name Rodman McGilberry, Megan	
6 Amount (\$) \$4,000.00	7 Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/03/2023	Candidate/Officeholder name Rodman McGilberry, Megan	
Amount (\$) \$4,000.00	Office sought Office held	
Date 10/03/2023	Payee name Rodman McGilberry, Megan	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/05/2023	Candidate/Officeholder name Rodman McGilberry, Megan	
Amount (\$) \$4,000.00	Office sought Office held	
Date 09/05/2023	Payee name Rodman McGilberry, Megan	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/16 Rpt: 35/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 11/06/2023	5 Payee name Rodman McGilberry, Megan	
6 Amount (\$) \$4,000.00	7 Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/04/2023	Candidate/Officeholder name Rodman McGilberry, Megan	
Amount (\$) \$4,000.00	Office sought Office held	
Date 12/04/2023	Payee name Rodman McGilberry, Megan	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/27/2023	Candidate/Officeholder name SquareSpace	
Amount (\$) \$272.79	Office sought Office held	
Date 07/27/2023	Payee name SquareSpace	
Amount (\$) \$272.79	Payee address; City; State; Zip Code 8 Clarkson St New York, NY 10014-4301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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/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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/16 Rpt: 36/36	2 FILER NAME Jenkins, Clay	3 Filer ID
4 Date 09/29/2023	5 Payee name TOP Political Action Committee	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2023	Payee name United States Postal Service	
Amount (\$) \$388.00	Payee address; City; State; Zip Code 401 Tom Landry Hwy Dallas, TX 75260-9990	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box renewal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name Wells Fargo	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 2611 Cedar Springs Rd Dallas, TX 75201-1311	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire transfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held