

# 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 (Ethics Commission Filers)	2 Total pages filed: <b>11</b>				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mr.</b>	FIRST <b>Sean</b>	MI <b>H</b>	<b>OFFICE USE ONLY</b>  Date Received <div style="font-size: 2em; font-weight: bold; border: 1px solid black; padding: 5px; display: inline-block;">RECEIVED</div> <div style="color: red; font-weight: bold; font-size: 1.2em;">APR 26 2024</div> BY:			
	NICKNAME	LAST <b>Turner</b>	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX;	APT / SUITE #;	CITY, STATE, ZIP CODE				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( )	PHONE NUMBER	EXTENSION				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Mr.</b>	FIRST <b>Sean</b>	MI <b>H.</b>	Date Hand-delivered or Date Postmarked			
	NICKNAME	LAST <b>Turner</b>	SUFFIX	Receipt #			
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY, STATE, ZIP CODE			
8 CAMPAIGN TREASURER PHONE	AREA CODE ( )	PHONE NUMBER	EXTENSION	Date Processed			
9 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	03	26	24	THROUGH	04	24	24
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description Uniform (Mayor Election)	
	05	04	24	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known) <b>Mayor</b>			
14 NOTICE FROM POLITICAL COMMITTEE(S)  <small>Additional Pages</small>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
	COMMITTEE TYPE	COMMITTEE NAME					
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS					
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS					

GO TO PAGE 2



# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

<b>19 FILER NAME</b> Sean Turner		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 975
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 14,544.65
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 20,289.81
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 4,005.25
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 4,005.25
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>2</b>
2 FILER NAME <b>Sean Turner</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4 - 5 - 24</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nathan Beal</b>	7 Amount of contribution (\$) <b>\$50</b>
	6 Contributor address; City; State; Zip Code <b>Denver, CO 80212</b>	
8 Principal occupation / Job title (See Instructions) <b>Sales</b>		9 Employer (See Instructions) <b>A-LIGN</b>
Date <b>4 - 6 - 24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Taylor Turner</b>	Amount of contribution (\$) <b>\$50</b>
	Contributor address; City; State; Zip Code <b>Eules, TX 76040</b>	
Principal occupation / Job title (See Instructions) <b>Insurance Advisor</b>		Employer (See Instructions) <b>Buffer Insurance</b>
Date <b>4 - 8 - 24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Camille Smith</b>	Amount of contribution (\$) <b>\$25</b>
	Contributor address; City; State; Zip Code <b>Roanoke, TX 76262</b>	
Principal occupation / Job title (See Instructions) <b>Executive Assistant</b>		Employer (See Instructions) <b>Buffer Insurance</b>
Date <b>4 - 15 - 24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephanie Rogers</b>	Amount of contribution (\$) <b>\$100</b>
	Contributor address; City; State; Zip Code <b>Roanoke, TX 76262</b>	
Principal occupation / Job title (See Instructions) <b>Investigative Analyst</b>		Employer (See Instructions) <b>Guidehouse</b>

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

**Reset Form**

**Reset Page**

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>2</b>
2 FILER NAME <b>Sean Turner</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4 - 15 - 24</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Houston Little</b>	7 Amount of contribution (\$)  <b>\$150</b>
	6 Contributor address; City; State; Zip Code <b>Red Oak, TX 75154</b>	
8 Principal occupation / Job title (See Instructions) <b>Assoc. Advisor Paraplanner</b>		9 Employer (See Instructions) <b>Little Assoc. Wealth Mgmt.</b>
Date <b>4 - 16 - 24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sandra DeStefano</b>	Amount of contribution (\$)  <b>\$250</b>
	Contributor address; City; State; Zip Code <b>Georgetown, CA 95634</b>	
Principal occupation / Job title (See Instructions) <b>Co-Owner</b>		Employer (See Instructions) <b>Forward Financial</b>
Date <b>4 - 22 - 24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jeffrey Godzik</b>	Amount of contribution (\$)  <b>\$100</b>
	Contributor address; City; State; Zip Code <b>Roanoke, TX 76262</b>	
Principal occupation / Job title (See Instructions) <b>ATSS</b>		Employer (See Instructions) <b>FAA</b>
Date <b>4 - 22 - 24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dennis Voska</b>	Amount of contribution (\$)  <b>\$250</b>
	Contributor address; City; State; Zip Code <b>Roanoke, TX 76262</b>	
Principal occupation / Job title (See Instructions) <b>Transportation Tech</b>		Employer (See Instructions)

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

# LOANS

# SCHEDULE E

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <b>1</b>
2 FILER NAME <b>Sean Turner</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		<b>\$ 0.00</b>
5 Date of loan <b>4 - 15 - 24</b>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <b>Sean Turner</b>	9 Loan Amount (\$) <b>\$5,000</b>
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code <b>Southlake, TX 76092</b>	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) <b>CEO</b>		13 Employer (See Instructions) <b>Buffer Insurance</b>
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan <b>4 - 19 - 24</b>	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <b>Sean Turner</b>	Loan Amount (\$) <b>\$9,544.65</b>
Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code <b>Southlake, TX 76092</b>	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) <b>CEO</b>		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2	<b>2</b> FILER NAME Sean Turner	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 4 - 1 - 24	<b>5</b> Payee name Ardent Campaign Solutions	
<b>6</b> Amount (\$) \$2,000	<b>7</b> Payee address; City; State; Zip Code 17350 St. Hwy. 249, Ste. 220 #21792, Houston, TX 77064	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description Svcs. and sign placement
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 4 - 16 - 24	Payee name Walmart	
Amount (\$) \$31.81	Payee address; City; State; Zip Code 1228 N. US Hwy. 377, Roanoke, TX 76262	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meet and greet supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 4 - 16 - 24	Payee name Ardent Campaign Solutions	
Amount (\$) \$6,000	Payee address; City; State; Zip Code 17350 St. Hwy. 249, Ste. 220 #21792, Houston, TX 77064	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Mailers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>2</b>	<b>2</b> FILER NAME <b>Sean Turner</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4 - 22 - 24</b>	<b>5</b> Payee name <b>Ardent Campaign Solutions</b>	
<b>6</b> Amount (\$) <b>\$12,250</b>	<b>7</b> Payee address; City; State; Zip Code <b>17350 St. Hwy. 249, Ste. 220 #21792, Houston, TX 77064</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description <b>Mailers, online ads, messaging</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>4 - 12 - 27</b>	Payee name <b>Twilio Sendgrid</b>	
Amount (\$) <b>\$8</b>	Payee address; City; State; Zip Code <b>1801 California St., Ste. 500, Boulder, CO 80202</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Other - Marketing</b>	Description <b>Campaign marketing</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

<b>1 TOTAL PAGES</b> SCHEDULE F4: <b>2</b>	<b>2 FILER NAME</b> <b>Sean Turner</b>		<b>3 FILER ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD</b>			\$
<b>5 CREDIT CARD ISSUER</b>	Name of financial institution <b>American Express</b>		
<b>6 PAYMENT</b>	(a) Amount Charged \$ <b>250</b>	(b) Date Expenditure Charged <b>3 - 26 - 24</b>	(c) Date(s) Credit Card Issuer Paid <b>4 - 12 - 24</b>
<b>7 PAYEE</b>	(a) Payee name <b>Facebook</b>	(b) Payee address; City, State, Zip Code <b>1 Hacker Way, Menlo Park, CA 94025</b>	
<b>8 PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <b>Other - marketing</b>		(b) Description <b>Campaign social media</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office Sought	Office Held
<b>PAYMENT</b>	(a) Amount Charged \$ <b>3,464</b>	(b) Date Expenditure Charged <b>3 - 27 - 24</b>	(c) Date(s) Credit Card Issuer Paid <b>4 - 12 - 24</b>
<b>PAYEE</b>	(a) Payee name <b>Kingdom Influence</b>	(b) Payee address; City, State, Zip Code <b>9016 Foxwood Dr., Fort Worth, TX 76244</b>	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <b>Other - marketing</b>		(b) Description <b>Campaign social media</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office Sought	Office Held
<b>PAYMENT</b>	(a) Amount Charged \$ <b>173.43</b>	(b) Date Expenditure Charged <b>3 - 31 - 24</b>	(c) Date(s) Credit Card Issuer Paid <b>4 - 12 - 24</b>
<b>PAYEE</b>	(a) Payee name <b>Facebook</b>	(b) Payee address; City, State, Zip Code <b>1 Hacker Way, Menlo Park, CA 94025</b>	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <b>Other - marketing</b>		(b) Description <b>Campaign social media</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office Sought	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

<b>1 TOTAL PAGES SCHEDULE F4:</b> 2	<b>2 FILER NAME</b> Sean Turner	<b>3 FILER ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD</b>		\$
<b>5 CREDIT CARD ISSUER</b>	Name of financial institution American Express	
<b>6 PAYMENT</b>	(a) Amount Charged \$ 117.82	(b) Date Expenditure Charged 4 - 8 - 24
	(c) Date(s) Credit Card Issuer Paid 4 - 12 - 24	
<b>7 PAYEE</b>	(a) Payee name Facebook	(b) Payee address; City, State, Zip Code 1 Hacker Way, Menlo Park, CA 94025
<b>8 PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Other - marketing	(b) Description Campaign social media
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office Sought      Office Held
<b>PAYMENT</b>	(a) Amount Charged \$	(b) Date Expenditure Charged
	(c) Date(s) Credit Card Issuer Paid	
<b>PAYEE</b>	(a) Payee name	(b) Payee address; City, State, Zip Code
<b>PURPOSE OF EXPENDITURE</b> <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office Sought      Office Held
<b>PAYMENT</b>	(a) Amount Charged \$	(b) Date Expenditure Charged
	(c) Date(s) Credit Card Issuer Paid	
<b>PAYEE</b>	(a) Payee name	(b) Payee address; City, State, Zip Code
<b>PURPOSE OF EXPENDITURE</b> <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office Sought      Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: <b>1</b>	<b>2</b> FILER NAME <b>Sean Turner</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4 - 12 - 24</b>	<b>5</b> Payee name <b>American Express</b>	
<b>6</b> Amount (\$) <b>\$4,005.25</b> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address: <b>Phoenix, AZ 85027</b> City; State; Zip Code	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Credit card payment</b>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED