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:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST David	MI	OFFICE USE ONLY
NAME	NICKNAME	Puryear	SUFFIX	Data Received Received OCT 112022
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	PO Box 227 Driftwood, T		CITY; STATE; ZIP CODE	Elections Office
5 CANDIDATE/ OFFICEHOLDER PHONE	(512)	PHONE NUMBER 496-3560	EXTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	Thomas LAST Schneider	MI	Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS 10640 FM 9 Buda, Tx 78		SUITE #; CITY;	STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	(512)	PHONE NUMBER 657-9669	EXTENSION	
9 REPORT TYPE	January 15 July 15	30th day before	Eventual Madified	15th day after campeign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month 7 / 1 / 22 THROUGH 9		Day Year / 29 / 22	
11 ELECTION	Month Day	Briman	Runoff Other Description Special	=
12 OFFICE	office HELD (if any)	13 OFFICE SOUGHT (if known Hays County C	riminal District Attorney
14 NOTICE FROM POLITICAL COMMITTEE(S) ✓ Additional Pages	THE CANDIDATE / OFFI	COMMITTEE CAMPAIGN TE COMMITTEE NAME Hays County Republication COMMITTEE ADDRESS 6000 W FM 150, COMMITTEE CAMPAIGN TE Mary Pat Paul COMMITTEE CAMPAIGN TE	ican Party Kyle, Tx, 78640 EASURER NAME	MADE BY POLITICAL COMMITTEES TO SUPPORT IDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
		GO TO	PAGE 2	

ADDITIONAL NOTICE FROM POLITICAL COMMITTEE

Committee Type: General

Committee Name: Texas Alliance for Life PAC

Address: 8000 Centre Park Drive, Ste. 380, Austin, Tx, 78754

Treasurer Name: James Shaw

Address: 4505 Corazon Cv, Round Rock, Tx, 78681

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

		46	Filer ID (Ethics Commission Filers)
15 C/OH NAME David Puryear		10	Filer ID (Etnics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CO PLEDGES, LOANS, OR GUARANTEE CONTRIBUTIONS MADE ELECTRON	ES OF LOANS, OR	s 290.00
	2. TOTAL POLITICAL CONTRIBUTION (OTHER THAN PLEDGES, LOANS, O		\$ 44,967.80
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXP	PENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITUR	ES	\$ 53,777.63
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS OF REPORTING PERIOD	MAINTAINED AS OF THE LAST DA	\$ 135,882.33
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL LAST DAY OF THE REPORTING PER		\$
	wear, or affirm, under penalty of perjury, that the quired to be reported by me under Title 15, Election		d correct and includes all information
re	quired to be reported by the tinder fille 15, Election	Code.	8 mm
		Signature of Candida	ate or Officeholder
	Please complete	either option below:	
(1) Affidavit			
NOTARY STAMP/SEA	L		
Swom to and subscribed	before me by	this the	day of,
20, to certify	which, witness my hand and seal of office.		
Signature of officer administr	ering cath Printed name of officer ac	iministering oath	Title of officer administering oath
	OR		
(2) Unsworn Declarati	on		
My name is David Pu	rvear	, and my date of birth is 12	/05/1955
My address is PO Box		Driftwood Tx	78619 USA
	(street)	(city) (state) (zip code) (country)
Executed in Hays	County, State of Texas, o	n the 11th day of October (month)	20 <mark>22</mark> .
		a) ugu
		Signature of Candidate/	Office older (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME avid Puryear	20 Filer ID (Ethics Con	mmis	sion Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	44,129.80
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	ıs	\$	838.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	CONTRIBUTIONS	\$	51,129.63
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	560.00
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			2,648.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11,	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL	CONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRI TO FILER	BUTIONS RETURNED	\$	

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 28
2 FILER NAME David Pur	year	3 Filer ID (Ethics Commission Filers)
4 Date 07/04/2022	5 Full name of contributor out-of-state PAC (IDM: John Gordon 6 Contributor address; City; State; 1007 Green Meadow Dr, Round Rock, Tx, 7	7 Amount of contribution (\$) Zip Code 8664
Principal occu	pation / Job title (See Instructions) 9 Emple	oyer (See Instructions)
Date 07/07/2022	Full name of contributor out-of-state PAC (IDM:	Zip Code , 78666
Principal occup	eation / Job title (See Instructions) Emplo	oyer (See Instructions)
Date 07/06/2022	Full name of contributor out-of-state PAC (IDIE:	zip Code 250.00
Principal occup	pation / Job title (See Instructions) Emplo	oyer (See Instructions)
Date 07/13/2022	Full name of contributor out-of-state PAC (IDM:	Amount of contribution (\$) Zip Code x, 78620
Principal occup	pation / Job title (See Instructions) Emplo	oyer (See Instructions)
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED

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:
2 FILER NAME David Pur	year	3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2022	5 Full name of contributor Jim Savage 6 Contributor address; City; State; Zip Code 118 Galloway Ln, Austin, Tx, 78737	7 Amount of contribution (\$) 250.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date 07/08/2022	Full name of contributor out-of-state PAC (ID#:) Charles Bonney Contributor address; City; State; Zip Code 700 Barton Creek Dr, Dripping Springs, Tx, 78620	Amount of contribution (\$)
Principal occup	cation / Job title (See Instructions) Employer (See Instructions)	tions)
Date 07/10/2022	Full name of contributor out-of-state PAC (ID#:) Susie Carter Contributor address; City; State; Zip Code 121 Grist Mill Rd, Kyle, Tx, 78640	Amount of contribution (\$) 50.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date 07/14/2022	Full name of contributor out-of-state PAC (IDM; Samantha Lamantia Contributor address; City; State; Zip Code 15509 Fox Run Dr, Austin, Tx, 78737	Amount of contribution (\$) 1,000.00
Principal occup	cation / Job title (See Instructions) Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	

SCHEDULE A1

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

of contributor out-of-state aham or address; City; or Hanks Pkwy, Dripping solve (See Instructions) of contributor out-of-state Barchfeld or address; City; ite Acres Rd, Wimberl of contributor out-of-state of contributor out-of-state of contributor out-of-state	State: Zip Code Springs, Tx, 78620 9 Employer (See Instruct PAC (IDIK:) State: Zip Code ey, Tx, 78676 Employer (See Instruct	Amount of contribution (\$) 500.00
aham or address; City; er Hanks Pkwy, Dripping S le (See Instructions) of contributor out-of-state Barchfeld or address; City; ite Acres Rd, Wimberl e (See Instructions)	State; Zip Code Springs, Tx, 78620 9 Employer (See Instruct PAC (IDIR:) State; Zip Code ey, Tx, 78676 Employer (See Instruct	200.00 tions) Amount of contribution (\$) 500.00 tions)
aham or address; City; er Hanks Pkwy, Dripping S le (See Instructions) of contributor out-of-state Barchfeld or address; City; ite Acres Rd, Wimberl e (See Instructions)	State; Zip Code Springs, Tx, 78620 9 Employer (See Instruct PAC (IDIR:) State; Zip Code ey, Tx, 78676 Employer (See Instruct	200.00 tions) Amount of contribution (\$) 500.00 tions)
er Hanks Pkwy, Dripping Site (See Instructions) of contributor out-of-state Barchfeld or address; City; ite Acres Rd, Wimberl of (See Instructions)	Springs, Tx, 78620 9 Employer (See Instruct PAC (ID#:) State; Zip Code ey, Tx, 78676 Employer (See Instruct	Amount of contribution (\$) 500.00
Barchfeld or address; City; ite Acres Rd, Wimberl e (See Instructions)	State; Zip Code ey, Tx, 78676 Employer (See Instruct	Amount of contribution (\$) 500.00 tions)
Barchfeld or address; City; ite Acres Rd, Wimberl e (See Instructions) of contributor out-of-state	State; Zip Code ey, Tx, 78676 Employer (See Instruct	500.00
ite Acres Rd, Wimberl (See Instructions) of contributor out-of-state	ey, Tx, 78676 Employer (See Instruct	tions)
of contributor out-of-state		
	PAC (ID#:)	Amount of contribution (\$)

or address; City; ASA Pkwy, Seabrook,	State; Zip Code Tx, 77586	10,000.00
e (See Instructions)	Employer (See Instruct	dons)
001-01-01219	PAC (IDIK:)	Amount of contribution (\$)
or address; City;	State; Zip Code	200.00
	Employer (See Instruct	tions)
to the second	e of contributor out-of-state bkuecher tor address; City;	e of contributor bbkuecher tor address; City: State: Zip Code ackbone Ridge, San Marcos, 78666

SCHEDULE A1

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

contributor out-of-state	State; Zip Code ustin, Tx, 78735 9 Employer (See Instruction PAC (ID#:) State; Zip Code	Amount of contribution (\$)
ddress; City; es Ranch Loop, Au ee Instructions) contributor out-of-state in ddress; City; r Hill Road, Driftwo	State; Zip Code ustin, Tx, 78735 9 Employer (See Instruction PAC (ID#:) State; Zip Code	50.00 Amount of contribution (\$)
contributor out-of-state in ddress; City; r Hill Road, Driftwo	PAC (ID#:) State; Zlp Code	Amount of contribution (\$)
in ddrees; City; r Hill Road, Driftwo	State; Zlp Code	
no Instructions)	od, Tx, 78619	250.00
ee instructions)	Employer (See Instruction	ns)
inn dress; City; bird Dr., Manchaca	State; Zip Code a, Tx, 78652	Amount of contribution (\$) 50.00
se Instructions)	Employer (See Instruction	ns)
ddress; City;	State; Zip Code	Amount of contribution (\$)
ee Instructions)	Employer (See Instruction	ns)
40 0 0	ddress; City; bird Dr., Manchaca see Instructions) contributor out-of-state dddress; City;	ddress; City; State; Zip Code bird Dr., Manchaca, Tx, 78652 see Instructions) Employer (See Instruction contributor out-of-state PAC (IDM:) address; City; State; Zip Code g Wind Run, Dripping Springs, Tx, 78620

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:
2 FILER NAME David Pur	year	3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2022	5 Full name of contributor out-of-state PAC (IDIR:) Fayette County Republican Women 6 Contributor address; City; State; Zip Code PO Box 744, La Grange, Tx, 78945	7 Amount of contribution (\$) 500.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	ctions)
Date	Full name of contributor out-of-state PAC (IDII:) Reagan Dickerson	Amount of contribution (\$)
07/30/2022	Contributor address; City; State; Zip Code 5225 S IH 35, San Marcos, Tx, 78666	2,500.00
Principal occup	eation / Job title (See Instructions) Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC (IDIF:) Nancye Britner	Amount of contribution (\$)
08/27/2022	Contributor address; City; State; Zip Code 49 Woodcreek Dr., Wimberley, Tx, 78676	50.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	ctions)
Date	Full name of contributor out-of-state PAC (IDIR) Ann Jones	Amount of contribution (\$)
09/13/2022	Contributor address; City; State; Zlp Code 14309 FM 1826, Austin, Tx, 78737	150.00
Principal occup	petion / Job title (See Instructions) Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	NEEDED

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

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:
2 FILER NAME David Pur	year	3 Filer ID (Ethics Commission Filers)
4 Date 09/13/2022	5 Full name of contributor Olivia Barnard 6 Contributor address; City; State; Zip C 715 Emma Loop, Austin, Tx, 787	100.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (S	Gee Instructions)
Date 09/13/2022	Full name of contributor Carol Spencer Contributor address; City; State; Zip C 126 Brazos Dr, Cedar Creek, Tx, 78612	Amount of contribution (\$) 75.00
Principal occup	pation / Job title (See Instructions) Employer (S	Gee Instructions)
Date 09/13/2022 Principal occup	Full name of contributor out-of-state PAC (ID#:	50.00
Date 09/13/2022	Full name of contributor out-of-state PAC (ID#:	13.00
Principal occup	pation / Job title (See Instructions) Employer (S	See Instructions)
	ATTACH ADDITIONAL COPIES OF THIS SCHED If contributor is out-of-state PAC, please see instruction guide for a	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 8/17/2020

SCHEDULE A1

ii tile reques	sted 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:
2 FILER NAME David Pur	year	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Leila Cassady	7 Amount of contribution (\$)
09/09/2022	6 Contributor address; City; State; Zip Code PO Box 29270, Austin, Tx, 78755	75.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	tions)
Date 09/13/2022	Full name of contributor out-of-state PAC (IDIF:) Carlisle Pearson Contributor address; City; State; Zip Code 136 Clubhouse Dr, Lakeway, Tx, 78734	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date 09/23/2022	Full name of contributor out-of-state PAC (ID#:) Bob Gregory Contributor address; City; State; Zip Code 11911 Bradshaw, Austin, Tx, 78747	Amount of contribution (\$) 1,000.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	rtions)
Date 09/28/2022	Full name of contributor out-of-state PAC (ID#:) Robert Seale Contributor address; City; State; Zip Code 491 Hog Hollow Road, Dripping Springs, Tx, 78620	2,000.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS Not contributor is out-of-state PAC, please see Instruction guide for additional	

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:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
David Pur 4 Date 09/10/2022	5 Full name of contributor out-of-state PAC (ID#:) Trey Gerlich	7 Amount of contribution (\$)
75/10/2022	6 Contributor address; City; State; Zip Code 5937 Republic of Texas Blvd, Austin, Tx, 78735	200.00
Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	tions)
Date 09/10/2022	Full name of contributor out-of-state PAC (ID#:) Rob Gowan	Amount of contribution (\$)
	Contributor address; City; State; Zip Code 128 Katherine Ct, #3, San Antonio, Tx, 78209	100.00
Principal occup	eation / Job title (See Instructions) Employer (See Instruc	tions)
Date 09/10/2022	Full name of contributor out-of-state PAC (ID#:) Alicia Hamilton Contributor address; City; State; Zip Code	Amount of contribution (\$) 15.00
	Contributor address; City; State; Zip Code 196 Beryl Way, Dripping Springs, Tx, 78620	13.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC (ID#) Jason Kirchner	Amount of contribution (\$)
09/10/2022	Contributor address; City; State; Zip Code 125 Rugosa Rd, San Marcos, Tx, 78666	30.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)

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

SCHEDULE A1

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

FILER NAME		3 Filer ID (Ethics Commission Filers)
David Pur	year	
1 Date	5 Full name of contributor out-of-state PAC (ID#:_ Eric Burkhart	
09/10/2022		100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
09/10/2022	Chris Byrd	100 00
		ate; Zip Code 100.00
	8029 Devonshire, Spring Branch,	Tx, 78070
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#.	Amount of contribution (\$)
09/10/2022		200.00
	1203 Rutherford, Driftwood, Tx, 78	619
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
09/10/2022	Contributor address; City; SI	ate; Zip Code
	25107 Cedar Creek Dr, New Braunfels,	Tx 78132
Principal occu		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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

2 FILER NAM	•		•		
David Pu			3 Filer ID (Ethics Commission Filers)		
4 TOTAL C	F UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$ 838.00		
5 Date	6 Full name of contributor uut-of-state PAC (ID#:) Chris Welling		8 Amount of Contribution \$ In-kind contribution description 450.00 donated cigars		
09/10/2022	7 Contributor address; City; State; 31560 RR 12, #207, Dripping Springs, Tx	Zip Code , 78620	for fundraiser Check if travel outside of Texas. Complete Schedule		
10 Principal oc	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)		
2 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribe	utor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor		Amount of Contribution \$ In-kind contribution description donated paper & plastic		
09/10/2022 Contributor address; City; State; Zip Code 10640 FM 967, Buda, Tx, 78610			388.00 dinnerware, food and beverage for fundraiser Check if travel outside of Texas. Complete Schedul		
Principal oc	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)		
	Contributor's principal occupation (FOR JUDICIAL)				
Contributor's	s principal occupation (FOR JUDICIAL)	Contribe	utor's job title (FOR JUDICIAL) (See Instructions)		
	s principal occupation (FOR JUDICIAL) s employer/lew firm (FOR JUDICIAL)		ntor's job title (FOR JUDICIAL) (See Instructions) n of contributor's spouse (if any) (FOR JUDICIAL)		
Contributor					
Contributor	s employer/lew firm (FOR JUDICIAL)				
Contributor	s employer/lew firm (FOR JUDICIAL)				
Contributor	s employer/lew firm (FOR JUDICIAL)				
Contributor	s employer/lew firm (FOR JUDICIAL)				
Contributor	s employer/lew firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Event Expense Fees Food/Severage Expense Gift/Awards/Memoriala Expense

Loen 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)

Total pages Schedule F1:			3 Filer ID (Ethics	Commission Filers)
7	David Puryear		<u> </u>	
Date 07/06/2022	5 Payee name			
07/06/2022	Next Day Flyers			
231.09	1130 Avenue H East Arlington, Tx,	76011	State;	Zip Code
	(a) Category (See Categories fisted at the top of this schedule)	(b) Description	· · · · · · · · · · · · · · · · · · ·	
PURPOSE OF EXPENDITURE	printing expenses	printing of car	npaign note ca	ards
	(c) Check if travel outside of Taxas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/Oi	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
07/21/2022	The Green Ad Agency			
Amount (\$)	Payee address;	City;	State;	Zip Code
6,567.69	PO Box 3644 Longview, Tx, 75606			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing/advertising	production an	d printing of c	ampaign sigr
	Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living	expanse
Complete ONLY If direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
8/07/2022	The Green Ad Agency			
Amount (\$)	Payee address;	City;	State;	Zip Code
2,500.00	PO Box 3644 Longview, Tx, 75606			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	consulting expense	consulting exp	ense	
	Check if travel outside of Texas, Complete Schedule T.	Check if Aust	tin, TX, officeholder living	expense

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

Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Political Credit Card Payment	Il Committee Legal Services Salaries A The Instruction Guide explains how to	Nages/Contract Labor complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME David Puryear		3 Filer ID (Ethics Commission Filers)
4 Date 08/18/2022	5 Payee name Austin Republican Women		
6 Amount (\$) 45.00	7 Payee address; 6820 Cypress Point North Austin, T	City; x, 78746	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	event expense	ticket for lunch	neon meeting
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/19/2022	The Green Ad Agency		
Amount (\$)	Payee address;	City;	State; Zip Code
20,000.00	PO Box 3644 Longview, Tx, 75606		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) consulting expense	Description development	of campaign plan
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
09/10/2022	Verdes Mexican Parrilla		
Amount (\$)	Payee address;	City;	State; Zip Code
2,300.00	16018 Hamilton Pool Road Austin,	Гх, 78738	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	event expense	food and beve	rage expense for fundraise
	Check if travel outside of Texas, Complete Schedule T,	Check if Aust	tin, TX, officeholder fiving expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Pantel Firm

Solicitation/Fundraising Expense

Contributions/Donations Made B Candidate/Officeholder/Politica		Travel Out of District Travel Out of District t Labor Other (enter a category not listed above)
	The Instruction Guide explains how to complete this	s form.
1 Total pages Schedule F2:	2 FILER NAME David Puryear	3 Filer ID (Ethics Commission Filers)
TOTAL OF UNITER	MIZED UNPAID INCURRED OBLIGATIONS	\$
5 Date	6 Payee name	
09/10/2022	Esther Schneider	
7 Amount (\$) 560.00	8 Payee address; 10640 FM 967 Buda,Tx,78610	City; State; Zip Code
TYPE OF EXPENDITURE	Political Non-Political	
PURPOSE OF Expenditure	(a) Category (See Categories listed at the top of this schedule) beverages for fundraiser beverage	iption ges for fundraiser
Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name Office sought	d Office held
Amount (\$)		City; State; Zip Code
TYPE OF EXPENDITURE	Political Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Desc	cription
	Check if travel outside of Texas, Complete Schedule T.	Check If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Office sought	d Office held
expenditure to delient GOI		

SCHEDULE G

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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

Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)

Solicitation/Fundraising Expense

offee St Dripping Springs, ategories listed at the top of this schedule) pense travel outside of Texas. Complete Schedule T. Officeholder name	(b) Description for meeting wit	, TX, officeholder living ex	Zip Code	
St Dripping Springs, ategories listed at the top of this schedule) pense insvel outside of Texas. Complete Schedule T. Officeholder name	(b) Description for meeting wit	h consultant . TX, officeholder living ex	pense	
St Dripping Springs, ategories listed at the top of this schedule) pense insvel outside of Texas. Complete Schedule T. Officeholder name	(b) Description for meeting wit	h consultant . TX, officeholder living ex	pense	
r St Dripping Springs, ategories listed at the top of this schedule) pense travel outside of Texas. Complete Schedule T. Officeholder name	(b) Description for meeting wit	h consultant . TX, officeholder living ex	pense	
PENSE ITSVEI outside of Texas. Complete Schedule T. Officeholder name	for meeting wit	, TX, officeholder living ex		
Officeholder name				
	Office sought		Office held	
ty Republican Party				
ty Republican Party				
50 Kyle, Tx, 78640	City;	State;	Zip Code	
Category (See Categories listed at the top of this schedule) event expense Description purchase of ticket to dinner event				
travel outside of Texas, Complete Schedule T.	Check if Austin	Check if Austin, TX, officeholder living expense		
Officeholder name	Office sought	,	Office held	
	9000			
	City;	State;	Zip Code	
ategories listed at the top of this echedule)	Description lunch meeting	Iunch meeting with campaign worker		
	Check if Austin	, TX, officeholder living ex	pense	
ravel outside of Texas, Complete Schedule T.	Office sought		Office held	
	categories listed at the top of this schedule) firavel outside of Texas. Complete Schedule T. Officeholder name	Cetegories listed at the top of this schedule) Description lunch meeting Travel outside of Texas, Complete Schedule T. Check if Austin	Cetegories listed at the top of this schedule) Description lunch meeting with campaign Travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living ex	

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Relimbursement 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 catagory not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule G:	² FILER NAME David Puryear		3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2022	5 Payee name Black's BBQ		
6 Amount (\$) 434.33 Reimbursement from political contributions intended	7 Payee address; 510 Hull St San Marcos, Tx, 7866	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) food/beverage expense	(b) Description lunch meeting	with constituents
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austh	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 08/15/2022	Payee name City of Austin		
Amount (\$) 3.25 Reimbursement from political contributions intended	Payee address; 301 W 2nd Austin, Tx, 78701	City;	State; Zip Code
PURPOSE OF	Category (See Categories listed at the top of this achedule) travel out of district	Description parking meter	fee for meeting with donor
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name	Office sought	Office held
Date 08/16/2022	Payee name Kerbey Lane Cafe		
Amount (\$) 42.50 Reimbursement from political contributions intended	Payee address; 701 S. Capital of TX Hwy Austin,	City: Гх, 78746	State; Zlp Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) food/beverage	Description meeting with	campaign accountant
	Check if traval outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
44-06-4	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED	DED

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Claus Card Faymon	The Instruction Guide explains how to	complete this form.			
1 Totel pages Schedule G:	2 FILER NAME David Puryear		3 Filer ID (Ethics Commission Filers)		
4 Date 08/16/2022	Route 12 Filling Station				
6 Amount (\$) 50.28 Reimbursement from political contributions intended	7 Payee address; 31560 Ranch Rd 12 Dripping Spr				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) food/beverage expense	(b) Description meeting with d	onor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	ı, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 08/22/2022	Payee name Mud Bugs				
Amount (\$) 43.35 Reimbursement from political contributions intended	Payee address; 306 Main St Buda, Tx, 78610	City;	State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) food/beverage expense	Description meeting with c	ampaign worker		
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin	n, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name OH	Office sought	Office held		
Date 08/28/2022	Payee name Home Depot		Section 1. Section 2.		
Amount (\$) 21.24 Reimbursement from political contributions intended	Payee address; 260 E Hwy 290 Dripping Springs,	City; Tx, 78620	State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) other	Description purchase of zi	p ties for campaign signs		
EXPENDITURE	Check if travel outside of Texas, Complete Schedule T,	Check if Austin	n, TX, officeholder living expense		
	Constitution of the service of the s				

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed shows)

Other (enter a category not listed above) Credit Card Payment The instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Purvear 4 Date 5 Payee name 09/04/2022 HEB 7 Payee address; 6 Amount (\$) City; State: Zip Code 121.87 598 E US 290 Drippings Springs, Tx, 78620 Reimbursement from political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE for multi-day meeting with consultant food/beverage OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. (c) Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name 09/05/2022 Dobi Consulting LLC Payee address; Amount (\$) Zip Code 395.00 1301 S Capital of Texas HWY, Ste C200 Austin, Tx, 78746 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) PURPOSE completion of campaign tax return accounting OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 09/06/2022 USPS Amount (\$) Payee address; City; State: Zip Code 48.00 100 Elder Hill Road Driftwood, Tx, 78619 Reimburgement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE office overhead expense purchase of postage stamps OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
Other (agrees a category not listed shows)

Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 5 Payee name 4 Date 09/06/2022 Wimberley Cafe 7 Payee address; 6 Amount (\$) City; State; Zip Code 46.80 101 Ste A, Wimberley Square Wimberley, Tx, 78676 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE lunch meeting with consultant food/beverage OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. (c) Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/07/2022 Homespun Kitchen Payee address; Amount (\$) City; State: Zip Code 49.25 131 E Mercer Dripping Springs, Tx, 78620 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) PURPOSE lunch meeting with consultant food/beverage OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 09/08/2022 Aviator Pizza Payee address; Amount (\$) City; State: Zip Code 31.18 856 Kohlers Crossing Kyle, Tx, 78640 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE food/beverage lunch meeting with campaign worker OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T, Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE G

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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/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Transportation Equipment & Related Expense Travel In District Travel Out Of District Salaries/Wages/Contract Labor Other (enter a category not listed above)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME David Purvear

3 Filer ID (Ethics Commission Filers)

Solicitation/Fundraising Expense

4 Date 5 Payee name 09/09/2022 Applebee's 7 Payee address; 6 Amount (\$) City; State: Zip Code 53.93 5363 Kyle Center Dr Kyle, Tx, 78640 Reimbursement from political contributions ntended (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE lunch meeting with campaign worker food/beverage OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. (C) Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name 09/28/2022 The Salt Lick BBQ Pavee address: Amount (\$) City; State: Zip Code 82.50 18300 FM 1826 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) PURPOSE dinner meeting with consultant food/beverage OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date Black's BBQ 07/27/2022 Amount (\$) Payee address; City; State: Zip Code 22.27 510 Hull St San Marcos, Tx 78666 Reimburgement from political contributions intended Category (See Categories listed at the top of this schedule) Description **PURPOSE** food/beverage lunch meeting with constituents OF **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Reverage Expense Gift/Awerds/Memoriels Expense Legal Services

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

Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Rejated Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule G:	2 FILER NAME David Puryear		3 Filer ID (Ethics (Commission Filers)
4 Date 09/05/2022	5 Payee name Hays City Store			
6 Amount (\$) 85.24 Reimbursement from political contributions intended	7 Payee address; 8989 FM 150 Driftwood, Tx, 78619	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) food/beverage	(b) Description lunch meeting	with campaign	team
EXI ENDITOR	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living exp	ense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	C	Office held
Date 07/07/2022	Payee name David Puryear			
Amount (\$) 30.50 Reimbursement from political contributions intended	Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Cetegories listed at the top of this schedule) travel in district	Description mileage reimburse	ment for travel to me	et with donors
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/		Office sought		Office held
Date 07/11/2022	Payee name David Puryear	**************************************		
Amount (\$) 26.75 Reimbursement from political contributions intended	Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Cetegories listed at the top of this schedule) travel in district	Description mileage reimbur constituent	sement for travel to	o meet with
EVLEIANI I OKE	Check if travel outside of Texas, Complete Schedule T,	Check if Austi	n, TX, officeholder living ex	penae
	J			

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Printing Expense T
Salaries/Wages/Contract Labor O

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment The instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 4 Date 5 Payee name 07/14/2022 David Puryear 6 Amount (\$) 7 Payee address; City; State: Zip Code 24.63 PO Box 227 Driftwood, Tx, 78619 Relmbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE mileage reimbursement for travel to meet with travel in district OF donor EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 07/21/2022 David Purvear Payee address; Amount (\$) City; State; Zip Code PO Box 227 Driftwood, Tx, 78619 33.75 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 07/21/2022 David Puryear Payee address; Amount (\$) City; State: Zip Code 13.50 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) PURPOSE travel in district mileage reimbursement for travel to event OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Forms provided by Texas Ethics Commission

SCHEDULE G

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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/Relmbursement Office Overhead/Rental Expense Polling Expense Printing 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 G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 4 Date 5 Payee name 07/22/2022 David Puryear 7 Payee address; 6 Amount (\$) City; State: Zip Code 21.25 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE mileage reimbursement for travel to meet with travel in district OF constituent EXPENDITURE Check if Austin, TX, officeholder living expense (c) Check if travel outside of Texas, Complete Schedule T. Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 07/26/2022 David Puryear Payee address; Amount (\$) City; State; Zip Code 37,50 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Description Category (See Categories listed at the top of this schedule) PURPOSE mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 07/28/2022 David Puryear Amount (\$) Payee address; City; Zip Code State: 16.13 PO Box 227 Driftwood, Tx, 78619 Reimburgement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Facs Food/Beverage Expense Gift/Awerds/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarles/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)

and a drawn a grid in	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule G:	2 FILER NAME David Puryear		3 Filer ID (Ethics	Commission Filers)
4 Date 08/01/2022	5 Payee name David Puryear			
6 Amount (\$) 16.63 Reimbursement from political contributions intended	Po Box 227 Driftwood, Tx, 78619	City; State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) travel in district	(b) Description mileage reimburs constituents	sement for travel t	o meet with
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austh	n, TX, officeholder living ex	pense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
08/01/2022	David Puryear			
Amount (\$) 23.00 Reimbursement from political contributions intended	Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Cetegories listed at the top of this schedule) travel in district	Description mileage reimburse constituents	ment for travel to m	eet with
	Check if travel outside of Texas, Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name	Office sought		Office held
Date 08/03/2022	Payee name David Puryear			
Amount (\$) 16.00 Reimbursement from political contributions intended	Peyee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories fisted at the top of this schedule) travel in district	Description mileage reimbursement for travel to meet with constituents		
	Check if travel outside of Texas, Complete Schedule T.	Check if Austi	n, TX, officeholder living e	tpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEED	DED	1000

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 5 Payee name 4 Date 08/06/2022 David Puryear 7 Payee address; 6 Amount (\$) City; State; Zip Code 20.38 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** mileage reimbursement for travel to meet with travel in district constituents EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/12/2022 David Puryear Payee address; Amount (\$) City; State; Zip Code 33.75 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description **PURPOSE** mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date David Puryear 08/14/2022 Amount (\$) Payee address; Zip Code City; State: 33.38 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 2 FILER NAME 1 Total pages Schedule G: 3 Filer ID (Ethics Commission Filers) David Puryear 5 Payee name 4 Date 08/15/2022 David Puryear 7 Payee address; 6 Amount (\$) City; State: Zip Code 11.38 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE (C) Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 08/16/2022 **David Puryear** Payee address; Amount (\$) City; State; Zip Code 31.13 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with campaign travel out of district OF accountant EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 08/16/2022 David Puryear Payee address; Amount (\$) City; Zip Code State: 16.13 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T, Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

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SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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)

Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 5 Payee name 4 Date 08/18/2022 David Puryear 7 Payee address; 6 Amount (\$) City; Zip Code State: 34.75 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** mileage reimbursement for travel to meet with travel out of district donor **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. (c) Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/20/2022 David Puryear Payee address; Amount (\$) City; State: Zip Code 15.38 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) PURPOSE mileage reimbursement for travel to place campaign travel in district OF signs EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 08/21/2022 David Puryear Payee address; Amount (\$) City; State: Zip Code 20.88 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE travel in district mileage reimbursement for travel to place OF campaign signs EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 5 Payee name 4 Date 08/23/2022 David Puryear 7 Payee address; 6 Amount (\$) City; State: Zip Code 31.25 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE mileage reimbursement for travel to meet with travel in district constituent EXPENDITURE Check if travel outside of Texas. Complete Schedule T. (c) Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/24/2022 David Puryear Payee address; Amount (\$) Zip Code City; State: 34.50 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description mileage reimbursement for travel to meet with PURPOSE travel in district OF constituents EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date David Puryear 08/25/2022 Payee address; Amount (\$) City; State: Zip Code 22.00 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) PURPOSE travel in district mileage reimbursement for travel to event OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

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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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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 #sted above)

Credit Card Payment The Instruction Guide explains how to complete this form. 2 FILER NAME 1 Total pages Schedule G: 3 Filer ID (Ethics Commission Filers) David Puryear 5 Payee name 4 Date 08/27/2022 David Puryear 6 Amount (\$) 7 Payee address; City; Zip Code State: 175.88 PO Box 227 Driftwood, Tx. 78619 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE mileage reimbursement for travel to meet with travel out of district OF prospective consultant EXPENDITURE Check if Austin, TX, officeholder living expense (c) Check if travel outside of Texas. Complete Schedule T. Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/06/2022 David Purvear Payee address; Amount (\$) City; State; Zip Code 38.13 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF constituent EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/06/2022 David Puryear Payee address; Amount (\$) Zip Code City; State: 21.50 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions Intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Political Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 5 Payee name 4 Date 09/07/2022 David Puryear 7 Payee address; 6 Amount (\$) City; State; Zip Code PO Box 227 Driftwood, Tx, 78619 10.50 Reimbursement from political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) PURPOSE mileage reimbursement for travel to meet with travel in district consultant EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/07/2022 David Puryear Payee address; Amount (\$) Zip Code City; State; PO Box 227 Driftwood, Tx, 78619 19.00 Relmbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description **PURPOSE** mileage reimbursement for travel to meet with travel in district OF constituent EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date David Puryear 09/08/2022 Payee address; Amount (\$) City; Zip Code State: PO Box 227 Driftwood, Tx, 78619 18.38 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 4 Date 5 Payee name 09/09/2022 David Puryear 7 Payee address; 6 Amount (\$) City; State: Zip Code 21.50 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/10/2022 David Purvear Payee address; Amount (\$) City; State: Zip Code 16.13 PO Box 227 Driftwood, Tx, 78619 Raimbursament from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE mileage reimbursement for travel to meet with travel in district OF constituents EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/12/2022 David Puryear Payee address; Amount (\$) Zip Code City; State: 10.25 PO Box 227 Driftwood, Tx, 78619 Reimbursement from political contributions Intended Category (See Categories listed at the top of this schedule) Description **PURPOSE** travel in district mileage reimbursement for travel to meet with OF constituents EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel In District Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule G:	2 FILER NAME David Puryear		3 Filer ID (Ethics	Commission Filers
4 Date 09/13/2022	5 Payee name David Puryear			
6 Amount (\$) 22.75 Reimbursement from political contributions intended	7 Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) travel in district	(b) Description mileage reimburs constituents	sement for travel to	meet with
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	pense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date 09/18/2022	Payee name David Puryear			
Amount (\$) 26.50 Reimbursement from political contributions intended	Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) travel in district	Description mileage reimburse constituents	ment for travel to me	et with
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/		Office sought	(Office held
Date 09/23/2022	Payee name David Puryear	The state of the s		
Amount (\$) 20.38 Reimbursement from political contributions intended	Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF	Category (See Categories listed at the top of this schedule) travel in district	Description mileage reimbur constituents	sement for travel to	o meet with
EXPENDITURE				
	Check if travel outside of Texas, Complete Schedule T,	Check if Austi	n, TX, officeholder living ex	pense

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitl/Awerds/Memorials Expense Legal Services Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salarles/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Cradit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule G:	2 FILER NAME David Puryear		3 Filer ID (Ethics C	ommission Filers
4 Date 09/24/2022	5 Payee name David Puryear			
6 Amount (\$) 20.38 Reimbursement from political contributions intended	7 Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) travel in district	(b) Description mileage reimburs constituents	sement for travel to	meet with
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austle	n, TX, officeholder living exp	ense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	C	office held
Date 09/25/2022	Payee name David Puryear			
Amount (\$) 11.63 Reimbursement from political contributions intended	Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Cetegories tisted at the top of this schedule) travel in district	Description mileage reimburse constituents	ment for travel to me	et with
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	In, TX, officeholder living exp	ense
Complete ONLY if direct expenditure to benefit C/		Office sought	C	Office held
Date 09/26/2022	Payee name David Puryear			
Amount (\$) 26.88 Reimbursement from political contributions intended	Payee address; PO Box 227 Driftwood, Tx, 78619	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) travel out of district	Description mileage reimbur donors	sement for travel to	meet with
	Check if travel outside of Texas, Complete Schedule T.	Check if Austi	n, TX, officeholder living exp	ense
	The second secon	Office sought		Office held