The C/OH Instruction	Guide explains how to co	mplete this form.	rID	2 Total pages filed: 22
CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST John	MI K.	OFFICE USE ONLY Date Received
	NICKNAME	LAST Hill	SUFFIX	
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; P.O. BOX 1660	APT / SUITE #; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
Change of Address	SHERMAN, TX 75091			Date Processed Date Imaged
CAMPAIGN	MS/MRS/MR	FIRST	MI	
TREASURER NAME		CLINT	A.	
	NICKNAME	LAST LONG	SUFFIX M.D.	
G CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO 2203 FM 1417	PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODI
CAMPAIGN TREASURER PHONE	AREA CODE P	HONE NUMBER EXTENS	SION	
REPORT TYPE	January 15 July 15	30th day before election 8th day before election	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
PERIOD COVERED	Month Day Ye 01/26/2024	ear THROUG	Month Day H 02/24/202	Year
.0 ELECTION	ELECTION DAT Month Day Yo 03/05/2024	E X Primary General	ELECTION TYPE Runoff Special	Other

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 22

					2 of 22
13 C / OH NAME	Hill, John		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have bee	olitical expenditures made by political control made without the candidate's or officert this information only if they receive no	eholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREAS	SURER NAME		
		COMMITTEE CAMPAIGN TREAS	SURER ADDRESS		
16 CONTRIBUTION TOTALS	TOTAL UNITEM OR GUARANTE	DIZED POLITICAL CONTRIBUTION EES OF LOANS, OR CONTRIBUTION	IS (OTHER THAN PLEDGES, LOANS, DNS MADE ELECTRONICALLY)	\$	300.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANT	TEES OF LOANS)	\$	8,750.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	10,298.62
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		D AS OF THE LAST DAY OF THE	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP		DING LOANS AS OF THE LAST DAY	\$	2,992.74
17 AFFIDAVIT	KAREN DAWANNA PA Notary Public, State of Comm. Expires 05-09 Notary ID 134349	true and correunder Title 15, RTHIE Texas -2027	rm, under penalty of perjury, that the acct and includes all information required to Election Code. Signature of Candidate or Officeho	to be report	
Sworn to and subs	orany STAMP / SEAL AB	1.1. 16. 1	seal of office.	10th	day
	ider administering exas Ethics Commissio	Printed name of officer admi			ring oath /3.5.1.9000c47

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 22

	ER NAM	1E	19 Filer ID		
Hil	l, John				
		SUBTOTALS		SUB	TOTAL AMOUNT
NA	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	7,190.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,560.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	622.69
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	9,298.62
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	1,000.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

FILER NAME HIII, John S Full name of contributor	The Instru	ction Guide explains how to complete this form	m.	Total pages Schedule A1: Sch: 1/4 Rpt: 4/22	
Date 01/26/2024 5 Full name of contributor	FILER NAME		3		
ABELS, KAREN 6 Contributor address; City; State; Zip Code 7307 27TH AVE SW SEATTLE, WA 98126 Principal occupation / Job title (See Instructions) Date 01/30/2024 BATES, JANIE Contributor address; City; State; Zip Code 210 CHISHOLM TR SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date 1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 20/04/2024 Full name of contributor	Hill, John				
6 Contributor address; City; State; Zip Code 7307 27TH AVE SW SEATTLE, WA 98126 Principal occupation / Job title (See Instructions) Date O1/30/2024 BATES, JANIE Contributor address; City; State; Zip Code 210 CHISHOLM TR SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date O1/30/2024 Full name of contributor	Date			Amount of Contribution (\$)	
T307 27TH AVE SW SEATTLE, WA 98126	01/26/2024				\$5
SEATTLE, WA 98126 Principal occupation / Job title (See Instructions) Date O1/30/2024 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date Contributor address; City; State; Zip Code 210 CHISHOLM TR SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) O1/30/2024 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Amount of Contribution (\$)					
Principal occupation / Job title (See Instructions) S		1007 27 HTAVE 544	1		
Date 01/30/2024 Full name of contributor		SEATTLE, WA 98126			
01/30/2024 BATES, JANIE Contributor address; City; State; Zip Code 210 CHISHOLM TR SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O1/30/2024 BUCY, AARON Contributor address; City; State; Zip Code 1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O2/04/2024 EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) FULLENWINDER, LISA Contributor address; City; State; Zip Code	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions)		
Contributor address; City; State; Zip Code 210 CHISHOLM TR SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O1/30/2024 EMPLOY, AARON Contributor address; City; State; Zip Code 1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O2/04/2024 EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) FULLENWINDER, LISA Contributor address; City; State; Zip Code	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code 210 CHISHOLM TR SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Date 01/30/2024 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Contributor address; City; State; Zip Code 1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 20/04/2024 EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) FULLENWINDER, LISA Contributor address; City; State; Zip Code	01/30/2024				\$10
SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O1/30/2024 BUCY, AARON Contributor address; City; State; Zip Code 1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O2/04/2024 EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) Amount of Contribution (\$) Amount of Contribution (\$) Amount of Contribution (\$) Date 01/30/2024 Full name of contributor out-of-state PAC (ID#:					
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date O1/30/2024 Full name of contributor		210 CHISHOLM TR			
Date BUCY, AARON Contributor address; City; State; Zip Code 1917 TIMBERLINE LN SHERMAN, TX 75092 Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Contributor address; City; State; Zip Code 1917 Times of contributor Out-of-state PAC (ID#:		SHERMAN, TX 75092			
O1/30/2024 BUCY, AARON Contributor address; City; State; Zip Code 1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Pull name of contributor out-of-state PAC (ID#:	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Contributor address; City; State; Zip Code 1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:) Date 101/30/2024 Full name of contributor out-of-state PAC (ID#:) Full name of contributor Contributor Contributor Contributor (\$) Contributor address; City; State; Zip Code	Date	Full name of contributor uut-of-state PAC (ID#:		Amount of Contribution (\$)	-
1917 TIMBERLINE LN SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 2/04/2024 EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O1/30/2024 FULLENWINDER, LISA Contributor address; City; State; Zip Code	01/30/2024				\$20
SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Employer (See Instructions) Amount of Contribution (\$) Contribution (\$) Contribution (\$)		1917 TIMBEREINE EN	1		
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 02/04/2024 EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 01/30/2024 FULLENWINDER, LISA Contributor address; City; State; Zip Code		SHERMAN, TX 75092			
02/04/2024 EARNHART, LESLIE Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 1/30/2024 FULLENWINDER, LISA Contributor address; City; State; Zip Code	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date 501/30/2024 FULLENWINDER, LISA Contributor address; City; State; Zip Code	Date	Full name of contributor ut-of-state PAC (ID#:		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code 2616 N HICKORY ST SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) FULLENWINDER, LISA Contributor address; City; State; Zip Code	02/04/2024				\$2
SHERMAN, TX 75092 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) FULLENWINDER, LISA Contributor address; City; State; Zip Code		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 1/30/2024 FULLENWINDER, LISA Contributor address; City; State; Zip Code		2616 N HICKORY ST			
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 01/30/2024 FULLENWINDER, LISA Contributor address; City; State; Zip Code		SHERMAN, TX 75092			
01/30/2024 FULLENWINDER, LISA Contributor address; City; State; Zip Code	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Contributor address; City; State; Zip Code	Date	Full name of contributor uut-of-state PAC (ID#:		Amount of Contribution (\$)	
	01/30/2024				\$5
2125 Heimoken Pails Di					,
		2123 Helitokett Palls Di			
ANNA, TX 75409		ANNA, TX 75409			
Principal occupation / Job title (See Instructions) Employer (See Instructions)			Employer (See Instructions)		

The Instru	ction Guide explains how to complete this form.	1 Total pages Sched Sch: 2/4 Rpt: 5/2	
FILER NAME		3 Filer ID	
Hill, John			
Date 02/03/2024	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribu	\$50.0
Principal occu	BOKCHITO, OK 74726 pation / Job title (See Instructions) 9 Employer	See Instructions)	
		,	
Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:) Amount of Contribu	s1,000.0
	POTTSBORO, TX 75076		
Principal occu	pation / Job title (See Instructions) Employer	See Instructions)	
Date 01/27/2024	Full name of contributor	Amount of Contribu	ution (\$)
	Contributor address; City; State; Zip Code 3718 FAWN MEADOW TR DENISON, TX 75020		
Principal occu		See Instructions)	
Date 01/30/2024	Full name of contributor) Amount of Contribu	s1,000.0
	Contributor address; City; State; Zip Code 121 S AUSTIN AVE		
Principal occur	DENISON, TX 75020 pation / Job title (See Instructions) Employer	See Instructions)	
· morpas occa	Employer		
Date 01/30/2024	Full name of contributor		ution (\$) \$1,000.0
	Contributor address; City; State; Zip Code P.O. BOX 426		
	CADDO, OK 74729		
Principal occu	pation / Job title (See Instructions) Employer	See Instructions)	

The Instru	ction Guide explains how to complete this form	m.	Total pages Schedule A1: Sch: 3/4 Rpt: 6/22	
FILER NAME		3	Filer ID	
Hill, John				
Date 01/30/2024	5 Full name of contributor out-of-state PAC (ID#: PALMER, JOHN		Amount of Contribution (\$)	\$500.00
	6 Contributor address; City; State; Zip Code 214 E MULBERRY ST			
	SHERMAN, TX 75090			
Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions)		
Date	Full name of contributor ut-of-state PAC (ID#:		Amount of Contribution (\$)	-
02/09/2024	PANTUSO, VIC			\$500.0
	Contributor address; City; State; Zip Code			
	614 N TRAVIS ST			
	SHERMAN, TX 75090			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	, , , , , , , , , , , , , , , , , , , ,			
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
01/30/2024	PARKEY, DAVID			\$350.0
	Contributor address; City; State; Zip Code			
	28 VILLAGE GREEN CT			
	DENISON, TX 75020			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor ut-of-state PAC (ID#:		Amount of Contribution (\$)	
01/30/2024	RYAN, SHANNON			\$250.0
	Contributor address; City; State; Zip Code			
	4909 BELLA VISTA CR			
	SHERMAN, TX 75090			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
01/30/2024	SIMON, JOHN			\$1,000.0
	Contributor address; City; State; Zip Code			
	P.O. BOX 988	1		
	WHITEWRIGHT, TX 75491			
Principal occi	pation / Job title (See Instructions)	Employer (See Instructions)		

The Instru	ction Guide explains how to complete this form	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/22	
FILER NAME Hill, John		3	Filer ID	
Date 01/30/2024	5 Full name of contributor		Amount of Contribution (\$)	\$100
Principal occu	DURANT, OK 74701 pation / Job title (See Instructions) 9 8	Employer (See Instructions)		
Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$100
Principal occu		Employer (See Instructions)		
Date 02/22/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$100
Principal occu		Employer (See Instructions)		*
Date 01/30/2024	Full name of contributor out-of-state PAC (ID#: WHITE, BRYAN Contributor address; City; State; Zip Code 305 W WOODARD DENISON, TX 75020		Amount of Contribution (\$)	\$500
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 8/22 2 FILER NAME 3 Filer ID Hill, John TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ errount of contribution (\$) In-kind contribution description 5 Date 6 Full name of contributor out-of-state PAC (ID#: 02/22/2024 **GC CONSERVATIVES** \$1,560.00 I DONATION FOR Contributor address; City; State; Zip Code CREATION AND 189 S TRAVIS ST PRINTING OF VOTERS **GUIDE TO DISTRIBUTE** SHERMAN, TX 75090 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

The Instruction	on Guide explains how to co	mplete this	form.		pages Schedule E: 1/6 Rpt: 9/22
FILER NAME				3 Filer I	
Hill, John					
TOTAL OF UN	IITEMIZED LOANS			•	\$
Date of loan 02/09/2024	7 Name of lender AT&T	out-of-state PA	AC (ID#:		9 Loan Amount (\$) \$68.
Is lender a financial institution?	8 Lender address; City; 301 W US Hwy 82	State;	Zip Code		10 Interest Rate
No	SUITE 1A SHERMAN, TX 75092				11 Maturity Date
Principal occupati	on / Job title (See Instructions)		13 Employer (See Instru	uctions)	
Description of Col	lateral		15 Check if personal fu	nds were deposit	red into political account (See Instructions)
GUARANTOR INFORMATION	17 Name of guarantor		J		19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City;	State;	Zip Code		
_		State;	Zip Code Zip Code	uctions)	
X not applicable		State;	21 Employer (See Instru	uctions)	
X not applicable Principal occupati	on		21 Employer (See Instru	uctions)	Loan Amount (\$) \$100.
x not applicable Principal occupati Date of loan	on Name of lender		21 Employer (See Instru	uctions)	
Date of loan 02/24/2024 Is lender a financial	Name of lender CAMERON, GRACE Lender address; City; 614 N. TRAVIS ST	out-of-state PA	21 Employer (See Instru AC (ID#:	uctions)	\$100.
Date of loan 02/24/2024 Is lender a financial institution? No	Name of lender CAMERON, GRACE Lender address; City;	out-of-state PA	21 Employer (See Instru AC (ID#:		\$100. Interest Rate
Date of loan 02/24/2024 Is lender a financial institution? No	Name of lender CAMERON, GRACE Lender address; City; 614 N. TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	out-of-state PA	21 Employer (See Instru AC (ID#:	uctions)	\$100. Interest Rate Maturity Date
Date of loan 02/24/2024 Is lender a financial institution? No Principal occupati	Name of lender CAMERON, GRACE Lender address; City; 614 N. TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	out-of-state PA	21 Employer (See Instru AC (ID#:	uctions)	\$100. Interest Rate Maturity Date
Date of loan 02/24/2024 Is lender a financial institution? No Principal occupati	Name of lender CAMERON, GRACE Lender address; City; 614 N. TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	out-of-state PA	21 Employer (See Instru AC (ID#:	uctions)	\$100. Interest Rate Maturity Date
Date of loan 02/24/2024 Is lender a financial institution? No Principal occupati	Name of lender CAMERON, GRACE Lender address; City; 614 N. TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	out-of-state PA	21 Employer (See Instru AC (ID#:	uctions)	\$100. Interest Rate Maturity Date ded into political account (See Instructions)

The Instruction	on Guide explains how to co	omplete this	form.		ages Schedule E: 2/6 Rpt: 10/22
FILER NAME				3 Filer II	
Hill, John					
TOTAL OF U	NITEMIZED LOANS				\$
Date of loan 01/30/2024	7 Name of lender CJ's	out-of-state P/	AC (ID#:		9 Loan Amount (\$) \$19.
Is lender a financial institution?	8 Lender address; City; 818 N Travis St	State;	Zip Code		10 Interest Rate
No	SHERMAN, TX 75090				11 Maturity Date
2 Principal occupat	on / Job title (See Instructions)		13 Employer (See Instruc	ctions)	
Description of Co None	lateral		15 Check if personal fund	ds were deposite	ed into political account (See Instructions)
6 GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City;	State;	Zip Code	***************************************	
	18 Guarantor address; City;		Zip Code		
X not applicable O Principal occupat	18 Guarantor address; City;			ctions)	
	18 Guarantor address; City;		Zip Code Zip Code	ctions)	Loan Amount (\$) \$29.
Principal occupat Date of loan	18 Guarantor address; City; on Name of lender	State;	Zip Code Zip Code	ctions)	Loan Amount (\$) \$29.0
O Principal occupat Date of loan 02/14/2024 Is lender a financial	on Name of lender GREEN GROWLER Lender address; City;	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	\$29.0
Date of loan 02/14/2024 Is lender a financial institution? No	on Name of lender GREEN GROWLER Lender address; City; 101 E. MAIN ST.	State;	Zip Code 21 Employer (See Instruct AC (ID#:		\$29.0 Interest Rate
Date of loan 02/14/2024 Is lender a financial institution? No	Name of lender GREEN GROWLER Lender address; City; 101 E. MAIN ST. DENISON, TX 75020 on / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	\$29. Interest Rate
Date of loan 02/14/2024 Is lender a financial institution? No Principal occupat	Name of lender GREEN GROWLER Lender address; City; 101 E. MAIN ST. DENISON, TX 75020 on / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	\$29. Interest Rate Maturity Date
Date of loan 02/14/2024 Is lender a financial institution? No Principal occupat Description of Co X None GUARANTOR	Name of lender GREEN GROWLER Lender address; City; 101 E. MAIN ST. DENISON, TX 75020 on / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	\$29. Interest Rate Maturity Date ed into political account (See Instructions)

The Instruction	on Guide explains how to complete	this form.		ages Schedule E: /6 Rpt: 11/22
FILER NAME	***************************************		3 Filer ID	-
Hill, John				
TOTAL OF UN	IITEMIZED LOANS			\$
Date of loan 02/23/2024	7 Name of lender out-of-	-state PAC (ID#:		9 Loan Amount (\$) \$4.9
Is lender a financial institution?	8 Lender address; City; 5 603 S. SAM RAYBURN FRWY	State; Zip Code		10 Interest Rate
No	SHERMAN, TX 75090			11 Maturity Date
2 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instr	uctions)	
4 Description of Co	lateral	15 Check if personal fu	nds were deposite	d into political account (See Instructions)
6 GUARANTOR	17 Name of guarantor			19 Amount Guaranteed (\$)
INFORMATION				
INFORMATION X not applicable	18 Guarantor address; City; S	State; Zip Code 21 Employer (See Instr		
INFORMATION X not applicable O Principal occupation	18 Guarantor address; City; S	State; Zip Code) Loan Amount (\$)
INFORMATION X not applicable O Principal occupate Date of loan 01/29/2024	on Name of lender out-of-MARIACHI'S	21 Employer (See Instr) Loan Amount (\$)
INFORMATION X not applicable O Principal occupation	non Name of lender MARIACHI'S Lender address; City; Standard City	State; Zip Code 21 Employer (See Instr		Loan Amount (\$) \$47.8
INFORMATION X not applicable O Principal occupation Date of loan 01/29/2024 Is lender a financial	on Name of lender out-of-MARIACHI'S Lender address; City; S 1909 Texoma Pkwy SUITE 103	21 Employer (See Instr		Loan Amount (\$) \$47.8
INFORMATION X not applicable O Principal occupation Date of loan 01/29/2024 Is lender a financial institution? No	non Name of lender MARIACHI'S Lender address; City; Standard City	21 Employer (See Instr	uctions)	Loan Amount (\$) \$47.8 Interest Rate
INFORMATION X not applicable O Principal occupation Date of loan 01/29/2024 Is lender a financial institution? No	non Name of lender out-of-MARIACHI'S Lender address; City; Sultre 103 SHERMAN, TX 75090 on / Job title (See Instructions)	21 Employer (See Instr -state PAC (ID#:	uctions)	Loan Amount (\$) \$47.8 Interest Rate
INFORMATION X not applicable O Principal occupation Date of loan 01/29/2024 Is lender a financial institution? No Principal occupation Description of Co	non Name of lender out-of-MARIACHI'S Lender address; City; Sultre 103 SHERMAN, TX 75090 on / Job title (See Instructions)	21 Employer (See Instr -state PAC (ID#:	uctions)	Loan Amount (\$) \$47.8 Interest Rate Maturity Date
INFORMATION X not applicable O Principal occupation Date of loan 01/29/2024 Is lender a financial institution? No Principal occupation Description of Co X None GUARANTOR	non Name of lender	21 Employer (See Instr -state PAC (ID#:	uctions)	Loan Amount (\$) \$47.1 Interest Rate Maturity Date d into political account (See Instructions)

The Instruction	on Guide explains how to c	omplete this	form.		ages Schedule E: /6 Rpt: 12/22
FILER NAME				3 Filer ID	
Hill, John					
TOTAL OF UN	ITEMIZED LOANS				\$
Date of loan 02/17/2024	7 Name of lender QUIK TRIP	out-of-state P	AC (ID#:		9 Loan Amount (\$) \$111.8
Is lender a financial institution?	8 Lender address; City; 3624 S U.S. 75	State;	Zip Code		10 Interest Rate
No	Sherman, TX 75090				11 Maturity Date
2 Principal occupati	on / Job title (See Instructions)		13 Employer (See Instruc	ctions)	
Description of Co X None	lateral		15 Check if personal fund	ds were deposite	d into political account (See Instructions)
	17 Name of guarantor				19 Amount Guaranteed (\$)
6 GUARANTOR INFORMATION	17 Name of guarantor				(.,
INFORMATION X not applicable	18 Guarantor address; City;	State;	Zip Code Zip Code	ctions)	
INFORMATION X not applicable O Principal occupat	18 Guarantor address; City;		Zip Code 21 Employer (See Instruc	ctions)	Loan Amount (\$)
INFORMATION X not applicable D Principal occupat	18 Guarantor address; City;	State;	Zip Code 21 Employer (See Instruc	ctions)	Loan Amount (\$)
not applicable Principal occupat Date of loan 02/11/2024 Is lender a financial institution?	18 Guarantor address; City; on Name of lender QUIK TRIP	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	Loan Amount (\$) \$99.6
INFORMATION X not applicable Date of loan 02/11/2024 Is lender a financial	18 Guarantor address; City; On Name of lender QUIK TRIP Lender address; City;	State;	Zip Code 21 Employer (See Instruct AC (ID#:	- Constant	Loan Amount (\$) \$99.6
INFORMATION X not applicable O Principal occupat Date of loan 02/11/2024 Is lender a financial institution? No	Name of lender QUIK TRIP Lender address; City; 3624 S U.S. 75	State;	Zip Code 21 Employer (See Instruct AC (ID#:	- Constant	Loan Amount (\$) \$99.6
INFORMATION X not applicable Description Date of loan 02/11/2024 Is lender a financial institution? No	Name of lender QUIK TRIP Lender address; City; 3624 S U.S. 75 Sherman, TX 75090 Ion / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	Loan Amount (\$) \$99.6
INFORMATION X not applicable Description of Co	Name of lender QUIK TRIP Lender address; City; 3624 S U.S. 75 Sherman, TX 75090 Ion / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	Loan Amount (\$) \$99.6 Interest Rate Maturity Date
Date of loan 02/11/2024 Is lender a financial institution? No Principal occupat Description of Co X None GUARANTOR	Name of lender QUIK TRIP Lender address; City; 3624 S U.S. 75 Sherman, TX 75090 ion / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instruct AC (ID#:	ctions)	Loan Amount (\$) \$99.0 Interest Rate Maturity Date ed into political account (See Instructions)

Forms provided by Texas Ethics Commission RAYSON CO ELECTIONS 2024 MAR 1 PM2:53:12

The Instruction	on Guide explains how to co	mplete this	form.		pages Schedule E: 5/6 Rpt: 13/22
FILER NAME				3 Filer II	
Hill, John					
TOTAL OF UN	IITEMIZED LOANS				\$
Date of loan	7 Name of lender	out-of-state P/	AC (ID#:		9 Loan Amount (\$)
02/20/2024	SAGE CAFE				\$25.7
Is lender a financial institution?	8 Lender address; City; 210 W Houston St	State;	Zip Code		10 Interest Rate 11 Maturity Date
No	Sherman, TX 75090				II Maturity Date
2 Principal occupati	on / Job title (See Instructions)	7,44	13 Employer (See Instru	ctions)	1441
4 Description of Col	lateral		15 Check if personal fun	ds were deposit	ted into political account (See Instructions)
6 GUARANTOR	17 Name of guarantor	100			19 Amount Guaranteed (\$)
INFORMATION					I
	18 Guarantor address; City;	State;	Zip Code Zip Code	ctions)	
INFORMATION X not applicable	18 Guarantor address; City;		Zip Code Zip Code	ctions)	
INFORMATION X not applicable 0 Principal occupati	18 Guarantor address; City;	State;	Zip Code Zip Code	ctions)	
INFORMATION X not applicable O Principal occupation	18 Guarantor address; City; on Name of lender	State;	Zip Code Zip Code	ctions)	_
INFORMATION X not applicable O Principal occupation Date of loan 02/23/2024 Is lender a financial	on Name of lender UNKNOWN, JUSTIN Lender address; City; 614 N TRAVIS ST	State;	Zip Code 21 Employer (See Instru	ctions)	\$100.0
INFORMATION X not applicable O Principal occupati Date of loan 02/23/2024 Is lender a financial institution? No	on Name of lender UNKNOWN, JUSTIN Lender address; City;	State;	Zip Code 21 Employer (See Instru		\$100.0
INFORMATION X not applicable O Principal occupation Date of loan 02/23/2024 Is lender a financial institution? No Principal occupation	Name of lender UNKNOWN, JUSTIN Lender address; City; 614 N TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instru AC (ID#: Zip Code Employer (See Instru	ctions)	\$100.0 Interest Rate Maturity Date
INFORMATION X not applicable Date of loan 02/23/2024 Is lender a financial institution? No Principal occupation	Name of lender UNKNOWN, JUSTIN Lender address; City; 614 N TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instru AC (ID#: Zip Code Employer (See Instru	ctions)	\$100.0
INFORMATION X not applicable O Principal occupation Date of loan 02/23/2024 Is lender a financial institution? No Principal occupation	Name of lender UNKNOWN, JUSTIN Lender address; City; 614 N TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instru AC (ID#: Zip Code Employer (See Instru	ctions)	\$100.0 Interest Rate Maturity Date ted into political account
Date of loan 02/23/2024 Is lender a financial institution? No Principal occupati	on Name of lender UNKNOWN, JUSTIN Lender address; City; 614 N TRAVIS ST SHERMAN, TX 75090 on / Job title (See Instructions)	State;	Zip Code 21 Employer (See Instru AC (ID#:	ctions) ds were deposit	s100.0 Interest Rate Maturity Date ted into political account (See Instructions) Amount Guaranteed (\$)

The Instruction	on Guide explains how to complete this	form.	1	ages Schedule E: /6 Rpt: 14/22
FILER NAME			3 Filer ID	
Hill, John				
TOTAL OF UN	NITEMIZED LOANS			\$
Date of loan 01/29/2024	7 Name of lender out-of-state P WHATSAPP FACEBOOK	AC (ID#:	-	9 Loan Amount (\$) \$15.4
Is lender a financial institution?	8 Lender address; City; State; 1 Meta Way	Zip Code		10 Interest Rate
No	Menlo Park , CA 94025			11 Maturity Date
2 Principal occupati	ion / Job title (See Instructions)	13 Employer (See Instruction	s)	
4 Description of Col X None	llateral	15 Check if personal funds w	ere deposite	d into political account (See Instructions)
.6 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City; State;	Zip Code		-
orms provided by	Texas Ethics Commission www.ethi	cs.state.tx.us		Version V3.5.1.9000

SCHEDULE F1

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

Food/Beverage Expense
Gitt/Awards/Memorials Expense
Legal Services

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

	Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 1/7 Rpt: 15/22	2 FILER NAME Hill, John 3 Filer ID
	Date 02/16/2024	5 Payee name ALPHA MEDIA NORTH
6	Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1800 TEAGUE DRIVE SUITE 300 SHERMAN, TX 75090
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense RADIO BROADCAST
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/26/2024	Payee name AMAZON
	Amount (\$) \$28.99	Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SUPPLIES FOR SPONSORED EVENT AT RUSTICO'S RESTAURANT
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/13/2024	Payee name CITY LIMITS
	Amount (\$) \$50.05	Payee address; City; State; Zip Code 4521 TEXOMA PKWY SHERMAN, TX 75090
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN MEETING
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Loan Repayment/Reimburges
Office Overhead/Rental E

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

Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment	
L Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 2/7 Rpt: 16/22	Hill, John
4 Date	5 Payee name
02/14/2024	DUARTE & DUARTE
\$ Amount (\$) \$75.78	7 Payee address; City; State; Zip Code 114 W WOODARD ST Denison, TX 75020
B PURPOSE	,
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PROMOTIONAL SUPPLIES
Omplete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/20/2024	FACEBOOK
Amount (\$)	Payee address; City; State; Zip Code
\$600.00	1 Hacker Way Menlo Park, CA 94025
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SOCIAL MEDIA PROMOTIONS & ADVERTISING
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/12/2024	FACEBOOK
Amount (\$) \$600.00	Payee address; City; State; Zip Code 1 Hacker Way
	Menlo Park, CA 94025
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SOCIAL MEDIA PROMOTIONS
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
experiorure to benefit C/O	n

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	- Gift/Awards/Memorials Expense	Polling Expense Printing Expense Salaries/Wages/Contract Labor w to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1:			Filer ID
Sch: 3/7 Rpt: 17/22	Hill, John		
Date	5 Payee name		
01/30/2024	FACEBOOK		
Amount (\$) \$115.55	7 Payee address; City; State;1 Hacker WayMenlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Consulting Expense	Check if travel outs	ide of Texas. Complete Schedule T. , officeholder living expense A PROMOTIONS
Complete ONLY if direct expenditure to benefit C/Oh		ice sought	Office held
Date	Payee name	g Pro-	
02/02/2024	FIRST GRAPHICS		
Amount (\$) \$1,119.31	Payee address; City; State; 229 GARVON ST	Zip Code	
	GARLAND, TX 75040		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Advertising Expense	Check if travel outs	side of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/Ol		fice sought	Office held
Date 02/14/2024	Payee name FIRST GRAPHICS		
Amount (\$) \$1,487.36	Payee address; City; State; 229 GARVON ST	Zip Code	
	GARLAND, TX 75040		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Advertising Expense	Check if travel out	side of Texas. Complete Schedule T. (, officeholder living expense GNS AND MATERIALS FOR

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Accounting/Banking Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/7 Rpt: 18/22	Hill, John
1	Date	5 Payee name
	02/22/2024	GC CONSERVATIVES
,	Amount (\$) \$1,560.00	7 Payee address; City; State; Zip Code 189 S TRAVIS ST
		SHERMAN, TX 75090
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense VOTERS GUIDE FOR POLL LOCATION VOLUNTEERS TO HAND OUT
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
,	02/20/2024	HONEYLU'S
	Amount (\$) \$20.58	Payee address; City; State; Zip Code 990 W VAN ALSTYNE PKWY VAN ALSTYNE, TX 75495
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LUNCHES DURING EARLY VOTING STATION ASSIGNMENTS
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 02/09/2024	Payee name ITALIAN AFFAIR
	Amount (\$) \$27.11	Payee address; City; State; Zip Code 104 N WOODS ST
		SHERMAN, TX 75092
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN MEETING REGARDING
		SPONSORSHIP OF THE COUNTY

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By - Event Expense Fees 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/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 5/7 Rpt: 19/22	Hill, John
4 Date 02/05/2024	5 Payee name MAGIC SMOKE BBQ
6 Amount (\$) \$24.90	7 Payee address; City; State; Zip Code 2600 N TRAVIS ST SHERMAN, TX 75090
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense BLOCK WALKING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/01/2024	NORTHSTAR SIGNS & GRAPHICS
Amount (\$) \$216.50	Payee address; City; State; Zip Code 316 N LAMAR ST SHERMAN, TX 75090
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense YARD SIGN STAKES
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/23/2024	OFFICE DEPOT
Amount (\$) \$29.84	Payee address; City; State; Zip Code 4015 N HWY 75
	SHERMAN, TX 75090
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Polling Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense VOTERS GUIDE STAND
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
-	

SCHEDULE F1

Solicitation/Fundraising Expense

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Transportation Equipment & Related Expense Travel in District Travel Out of District 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. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 6/7 Rpt: 20/22 Hill, John 4 Date 5 Payee name 02/11/2024 PARTHIE, KAREN State; Zip Code Amount (\$) Payee address; City; \$45.30 614 N. Travis Street Sherman, TX 75090 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Event Expense** EXPENDITURE Check if Austin, TX, officeholder living expense MATERIALS FOR COUNTY COMMISSIONER'S **DEBATE - SPONSORED EVENT** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/11/2024 PUCKETT, KATHY Amount (\$) Payee address; City; State; Zip Code \$120.00 100 E O'CONNELL ST HOWE, TX 75459 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense FOOD AND BEVERAGE FOR COUNTY COMMISSIONER'S DEBATE Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Pavee name 01/26/2024 RUSTICO'S TEXMEX Amount (\$) Payee address; City; State; Zip Code \$700.00 506 W CHESTNUT DENISON, TX 75020 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense FOOD EXPENSE FOR SPONSORED EVENT Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	al Committee Legal Services Salaries/Wages The Instruction Guide explains how to comple	Contract Labor OTHER (enter a category not listed above) ete this form.
Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 7/7 Rpt: 21/22	Hill, John	
Date 02/09/2024	5 Payee name SUMMIT GARDENS	
Amount (\$) \$235.00	7 Payee address; City; State; Zip Code 100 E O'CONNELL HOWE, TX 75459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SPONSORED EVENT FOR COUNTY COMMISSIONER'S DEBATE
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
02/06/2024	VISTAPRINT	
Amount (\$) \$267.35	Payee address; City; State; Zip Code 100 Hayden Avenue LEXINGTON, MA 02421	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas, Complete Schedule T, Check if Austin, TX, officeholder living expense POSTCARDS
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		
Date 02/14/2024	Payee name WHITESBORO NEWS-RECORD	
Date		
Date 02/14/2024 Amount (\$)	WHITESBORO NEWS-RECORD Payee address; City; State; Zip Code	
Date 02/14/2024 Amount (\$)	WHITESBORO NEWS-RECORD Payee address; City; State; Zip Code P.O. BOX 48 WHITESBORO, TX 76273	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SUBSCRIPTION

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense **Event Expense** Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By -Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 22/22 Hill, John \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS Payee name 02/01/2024 QUATRO CREATIVE Amount (\$) Payee address; State; Zip Code \$1,000.00 1506 N ALEXANDER ST SHERMAN, TX 75092 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense SOCIAL MEDIA MANAGER MONTHLY EXPENSES 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH