

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: 27	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <i>Mr</i>	FIRST <i>Richard</i>	MI <i>B</i>	
	NICKNAME <i>Rick</i>	LAST <i>Jones</i>	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>106 Arbor Lake St Victoria TX 77904</i>			
	OFFICE USE ONLY Date Received APR 05 2023			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <i>(361)</i>	PHONE NUMBER <i>212-6577</i>	EXTENSION	
	Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <i>Mr</i>	FIRST <i>Michael</i>	MI <i>E</i>	
	NICKNAME <i>Mike</i>	LAST <i>Disanto</i>	SUFFIX	
Receipt #		Amount \$		
Date Processed				
Date Imaged				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>2 Ramona Ln Victoria TX 77904</i>			
	8 CAMPAIGN TREASURER PHONE			
AREA CODE <i>(361)</i>		PHONE NUMBER <i>465-2755</i>	EXTENSION	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>02 / 13 / 2023 THROUGH 04 / 04 / 2023</i>			
	11 ELECTION			
ELECTION DATE Month Day Year <i>05 / 06 / 23</i>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) <i>Victoria School Board Trustee</i>		
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME		
		COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <i>Richard Brian Jones</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7634.99
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 8701.67
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1445.95
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2736.58

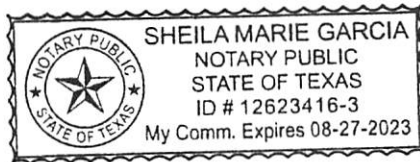
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by *[Signature]* this the 5th day of April, 2023, to certify which, witness my hand and seal of office.

[Signature] Sheila Garcia Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.

(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Richard Brian Jones</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7411.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 223.99
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 2000.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 2736.58
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8701.67
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 2/16/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Hanes	7 Amount of contribution (\$) \$ 200
6 Contributor address; City; State; Zip Code 1905 E. Mistletoe Victoria TX 77901		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/16/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracy Hanes	Amount of contribution (\$) \$ 500
Contributor address; City; State; Zip Code 106 Sky Court Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/21/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herb Wells	Amount of contribution (\$) \$ 50
Contributor address; City; State; Zip Code 108 Watermark Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/25/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sue Guthrie	Amount of contribution (\$) \$ 500
Contributor address; City; State; Zip Code 105 Garden Place Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 2/27/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Lundgren	7 Amount of contribution (\$) \$100
6 Contributor address; City; State; Zip Code 113 Lake Forest Victoria TX 77904		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/1/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachelle Cook	Amount of contribution (\$) \$500
Contributor address; City; State; Zip Code 306 woodbridge st Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/4/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry Uloo	Amount of contribution (\$) \$40
Contributor address; City; State; Zip Code 3936 Painted Sky Trail Chaska MN 55318		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/5/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Wilder	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 1215 Huck St, Cuero TX 77954		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 3/16/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Priema Ranjan	7 Amount of contribution (\$) \$ 250
6 Contributor address; City; State; Zip Code 214 Iron Gate Victoria TX 77904		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dora Loa	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 1804 S. Laurent Victoria TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard Klimist	Amount of contribution (\$) \$ 1000
Contributor address; City; State; Zip Code 204 E. Santa Rosa Victoria TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Pozzi	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 1596 Westpark Victoria TX 77905		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) anonymous	7 Amount of contribution (\$) \$20
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayba Schroll	Amount of contribution (\$) \$25
Contributor address; City; State; Zip Code 108 Ridge View, Victoria, TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) anonymous	Amount of contribution (\$) \$20
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joy Cook	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 709 Taos St Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) anonymous	7 Amount of contribution (\$) \$ 16
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Fuertsch	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 310 Edgewater Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jill Fox	Amount of contribution (\$) \$ 250
Contributor address; City; State; Zip Code 407 N. Craig St Victoria TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale Zuck	Amount of contribution (\$) \$ 250
Contributor address; City; State; Zip Code 108 Casablanca Dr Lutz Victoria 77968		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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2 FILER NAME <i>Richard Brian Jones</i>		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy Tallos	7 Amount of contribution (\$) \$ 500
6 Contributor address; City; State; Zip Code 186 Post Oak Cir Mex TX 77968		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/12/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANONYMOUS	Amount of contribution (\$) \$ 20
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/13/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Zafereo	Amount of contribution (\$) \$ 200
Contributor address; City; State; Zip Code 125 Creekside Dr Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/13/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANONYMOUS	Amount of contribution (\$) \$ 20
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 3/14/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecil Rhade	7 Amount of contribution (\$) \$50
6 Contributor address; City; State; Zip Code 101 Albany St Victoria TX 77904		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/14/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) anonymous	Amount of contribution (\$) \$20
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/15/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rob Mabe	Amount of contribution (\$) \$250
Contributor address; City; State; Zip Code PO Box 4283 Victoria TX 77903		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/15/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) anonymous	Amount of contribution (\$) \$10
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Hulquist	7 Amount of contribution (\$) \$50
	6 Contributor address; City; State; Zip Code 407 Beldivue Victoria TX 77904	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/21/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peema Ranjan	Amount of contribution (\$) \$500
	Contributor address; City; State; Zip Code 214 IronGate Victoria TX 77904	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/22/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Ma Mueller	Amount of contribution (\$) \$100
	Contributor address; City; State; Zip Code 311 Kelly Dr Victoria TX 77904	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/23/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katie Olson	Amount of contribution (\$) \$250
	Contributor address; City; State; Zip Code 204 N. Crescent Victoria TX 77901	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME <i>Richard Brian Jones</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/25/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dorothy Disanto</i>	7 Amount of contribution (\$) <i>\$250</i>
6 Contributor address; City; State; Zip Code <i>2 Ramona Ln Victoria TX 77904</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/25/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dale Morris</i>	Amount of contribution (\$) <i>\$250</i>
Contributor address; City; State; Zip Code <i>207 Creechridge Victoria TX 77904</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/25/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jack Freyer</i>	Amount of contribution (\$) <i>\$20</i>
Contributor address; City; State; Zip Code <i>505 Auburn Hill Victoria TX 77904</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/26/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Theresa Klacman</i>	Amount of contribution (\$) <i>\$200</i>
Contributor address; City; State; Zip Code <i>307 E. Third St Victoria TX 77901</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay Patek	7 Amount of contribution (\$) \$ 200
6 Contributor address; City; State; Zip Code 106 Oxford, Victoria TX 77904		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/27/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Terry	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 103 Castlaway Victoria TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/27/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Pozzi	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 1596 Westpark Victoria TX 77905		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		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.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: 3	
2 FILER NAME Richard Brian Jones				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 3/24/23	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Hawes			8 Amount of Contribution \$ \$16.00	9 In-kind contribution description Drinks for Open House
7 Contributor address; City; State; Zip Code 1905 E. Mishkotee Vickie TX 77904				<input type="checkbox"/> 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)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 3/25/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha Watts			Amount of Contribution \$ \$38.61	In-kind contribution description snacks for Open House
Contributor address; City; State; Zip Code 108 Watermark Victoria TX 77904				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)			Employer (FOR NON-JUDICIAL)(See Instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL)(See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 3	
2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/10/23	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preme Ranjan	8 Amount of Contribution \$ \$19.98	9 In-kind contribution description cookies for Open House
7 Contributor address; City; State; Zip Code 214 Iron Gate Victoria TX 77904		<input type="checkbox"/> 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)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 3/12/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Hawks	Amount of Contribution \$ \$62.33	In-kind contribution description sandwiches for Open House
Contributor address; City; State; Zip Code 1905 E. Mistletoe Victoria TX 77901		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (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.			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 3	
2 FILER NAME Richard Brian Jones				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 3/27/23	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Hawes			8 Amount of Contribution \$ \$ 12.07	9 In-kind contribution description snacks for open house
7 Contributor address; City; State; Zip Code 1905 E. Mistletoe Victoria TX 77901			<input type="checkbox"/> 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)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 3/27/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debbie Rush			Amount of Contribution \$ \$ 75.00	In-kind contribution description snacks for open House
Contributor address; City; State; Zip Code 412 Berkshire Victoria TX 77901			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)			Employer (FOR NON-JUDICIAL)(See Instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL)(See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (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.					

PLEGGED CONTRIBUTIONS

SCHEDULE B

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 B: <u>1</u>	
2 FILER NAME <i>Richard Brian Jones</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES		\$	
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$	9 In-kind contribution description
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	
Date <i>4/4/2023</i>	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Victoria Area Association of Realtors</i> Pledgor address; City; State; Zip Code <i>2906 E. Airline Victoria TX 77901</i>	Amount of Pledge \$ <i>2000.00</i>	In-kind contribution description
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$	In-kind contribution description
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$	In-kind contribution description
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Richard Brian Jones		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 2/16/23	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Jones	9 Loan Amount (\$) 100.00
6 Is lender a financial institution? Y (N)	8 Lender address; City; State; Zip Code 1006 Arbor Lakesh Victoria TX 77904	10 Interest rate 0
		11 Maturity date 4/7/2023
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 2-28/23 thru 3/30/23	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Jones	Loan Amount (\$) 2636.58
Is lender a financial institution? Y (N)	Lender address; City; State; Zip Code 1006 Arbor Lakes St Victoria TX 77904	Interest rate 0
		Maturity date 4/7/2023
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>8</i>	2 FILER NAME <i>Richard Brian Jones</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/25/23</i>	5 Payee name <i>Danny Vivian Photography</i>	
6 Amount (\$) <i>\$ 111.25</i>	7 Payee address; City; State; Zip Code <i>121 S. Main St Victoria TX 77901</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expenditures</i>	(b) Description <i>portraits</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>2/27/23</i>	Payee name <i>Herland Clarke</i>	
Amount (\$) <i>39.80</i>	Payee address; City; State; Zip Code <i>Po Box 660073 Dallas TX 75226-0073</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Accounting / Banking</i>	Description <i>checks</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>2/28/23</i>	Payee name <i>Rapid Printing</i>	
Amount (\$) <i>194.85</i>	Payee address; City; State; Zip Code <i>1708 N. Navarro Victoria TX 77904</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>t-shirts</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking Expense | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | 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: 8	2 FILER NAME Richard Brian Jones	3 Filer ID (Ethics Commission Filers)
4 Date 3/1/23	5 Payee name Kartz Printing	
6 Amount (\$) 2367.30	7 Payee address; City; State; Zip Code 110 Pin Oak Ct Victoria TX 77901	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Advertising Expenses	(b) Description Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 3/2/23	Payee name Hobby Lobby		
Amount (\$) 10.81	Payee address; City; State; Zip Code 8404 N. Navarro Victoria TX 77904		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense Office Overhead	Description Picture frame	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 3/6/23	Payee name Dollar General		
Amount (\$) 36.93	Payee address; City; State; Zip Code 9627 N. Main St Victoria TX 77904		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description volunteer meeting supplies	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Richard Brian Jones	3 Filer ID (Ethics Commission Filers)
4 Date 3/3/23	5 Payee name Kurtz Printing	
6 Amount (\$) 661.84	7 Payee address; City; State; Zip Code 110 Pin Oak Ct Victoria TX 77901	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Advertising Expense	(b) Description door hangers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/6/23	Payee name Domino's	
Amount (\$) 98.59	Payee address; City; State; Zip Code 8809 N. Navarro Ste 200 Victoria TX 77904	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage Expense	Description Pizza for volunteer meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/6/23	Payee name Kurtz Printing	
Amount (\$) 265.14	Payee address; City; State; Zip Code 110 Pin Oak Ct Victoria TX 77901	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description vote database
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Richard Brian Jones	3 Filer ID (Ethics Commission Filers)
4 Date 3/6/23	5 Payee name Kurtz Printing	
6 Amount (\$) 108.25	7 Payee address; City; State; Zip Code 110 Pin Oak Ct Victoria TX 77904	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description vote database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/8/23	Payee name Rapid Print	
Amount (\$) 69.28	Payee address; City; State; Zip Code 1708 N. Navarro Victoria TX 77901	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description t-shirts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/8/23	Payee name Office Max	
Amount (\$) 47.00	Payee address; City; State; Zip Code 5106 N. Navarro Victoria TX 77901	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense Printing Expense	Description Paper
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Richard Brian Jones	3 Filer ID (Ethics Commission Filers)
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4 Date 3/9/23	5 Payee name Kertz Printing
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6 Amount (\$) 102.71	7 Payee address; 110 Pin Oak Ct	City; Victoria	State; TX	Zip Code 77901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Advertising Expense	(b) Description door hangers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/9/23	Payee name Home Depot
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Amount (\$) 10.80	Payee address; 6708 Zac Lantz	City; Victoria	State; TX	Zip Code 77904
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Open House Sign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/11/23	Payee name Dollar General
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Amount (\$) 14.95	Payee address; 9627 N. Main St	City; Victoria	State; TX	Zip Code 77904
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead Rental Expense	Description clip boards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Richard Brian Jones	3 Filer ID (Ethics Commission Filers)
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4 Date 3/15/23	5 Payee name Kurtz Printing
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6 Amount (\$) 154.48	7 Payee address; 110 Pin Oak Ct	City; Victoria	State; TX	Zip Code 77901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description door hangers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/20/23	Payee name Kurtz Printing
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Amount (\$) 129.90	Payee address; 110 Pin Oak Ct	City; Victoria	State; TX	Zip Code 77901
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Doorhangers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/23/23	Payee name Thrive Fuel
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Amount (\$) 1510.00	Payee address; 4611 E. Airline	City; Victoria	State; TX	Zip Code 77904
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Facebook ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Richard Brian Jones	3 Filer ID (Ethics Commission Filers)
4 Date 3/27/23	5 Payee name Lamar Advertising	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 4507 N. Main St Victoria TX 77904	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description billboard
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/27/23	Payee name Lamar Advertising	
Amount (\$) 1500.00	Payee address; City; State; Zip Code 4507 N. Main St Victoria TX 77904	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description digital billboard
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/28/23	Payee name Kurtz Printing	
Amount (\$) 613.78	Payee address; City; State; Zip Code 110 Pin Oak Ct Victoria TX 77901	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description yard signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>8</u>	2 FILER NAME <u>Richard Brian Jones</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>3/29/23</u>	5 Payee name <u>Office Max</u>	
6 Amount (\$) <u>139.09</u>	7 Payee address; <u>5106 N. Newero</u>	City; State; Zip Code <u>Victoria TX 77901</u>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>	(b) Description <u>ink</u>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>3/30/23</u>	Payee name <u>Dollar General</u>	
Amount (\$) <u>11.74</u>	Payee address; <u>9627 N. Main St</u>	City; State; Zip Code <u>Victoria TX 77904</u>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Office Overhead</u>	Description <u>thank you notes</u>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED