



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME  
Lance Redmon

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)	\$ 199.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,795.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 56.23
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,197.28
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 604.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

*Lance Redmon*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath \_\_\_\_\_ Printed name of officer administering oath \_\_\_\_\_ Title of officer administering oath \_\_\_\_\_

OR

(2) Unsworn Declaration

My name is Lance Redmon, and my date of birth is [REDACTED]  
 My address is 27522 BEAUFORD DR, KATY, TX, 77499, USA  
 (street) (city) (state) (zip code) (country)  
 Executed in FORT BEND County, State of TEXAS, on the 2 day of April, 2025.  
 (month) (year)

*Lance Redmon*  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,795.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,605.07
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7,197.28
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND 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: **8**

2 FILER NAME

Lance Redmon

3 Filer ID (Ethics Commission Filers)

4 Date

01/15/2025

5 Full name of contributor

Carla Justus

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

1,000.00

6 Contributor address;

City;

State;

Zip Code

2019 Arbor Cove, Katy, TX 77494

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/02/2025

Full name of contributor

Gerald Ross

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

22402 Piper Terrace Ln, Katy, TX 77450

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/27/2025

Full name of contributor

Robert Willeby

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

2310 Trotter Drive, Katy, TX 77493

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/28/2025

Full name of contributor

Dawn Champagne

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

21410 Sand Bunker Cir, Katy TX 77450

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.

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 8
<b>2</b> FILER NAME Lance Redmon		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/28/2025	<b>5</b> Full name of contributor out-of-state PAC (ID#: _____) Vicki Sanders <b>6</b> Contributor address; City; State; Zip Code 19039 Village Maple Ct, Houston TX 77084	<b>7</b> Amount of contribution (\$)  <b>50.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)

<b>Date</b> 01/28/2025	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Ben Armenta <b>Contributor address; City; State; Zip Code</b> 25802 Foxrun Vista Dr, Katy TX 77494	<b>Amount of contribution (\$)</b>  <b>150.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

<b>Date</b> 01/28/2025	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Shelley Keating <b>Contributor address; City; State; Zip Code</b> 28 Hollingers Island, Katy TX 77450	<b>Amount of contribution (\$)</b>  <b>100.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

<b>Date</b> 01/28/2025	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Christianna Woods <b>Contributor address; City; State; Zip Code</b> 907 Redcedar Ln, Houston TX 77094	<b>Amount of contribution (\$)</b>  <b>100.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 8
<b>2</b> FILER NAME Lance Redmon		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/28/2025	<b>5</b> Full name of contributor out-of-state PAC (ID#: _____) Robert Mueller <b>6</b> Contributor address; City; State; Zip Code 24926 North Point Place, Katy TX 77494	<b>7</b> Amount of contribution (\$) <b>250.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 01/28/2025	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Rose Marie Greer <b>Contributor address; City; State; Zip Code</b> 1407 Shady Brook Dr, Houston TX 77094	<b>Amount of contribution (\$)</b> <b>25.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/29/2025	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Amy Jinks <b>Contributor address; City; State; Zip Code</b> 2910 Sundance Summer Lane, Katy TX 77494	<b>Amount of contribution (\$)</b> <b>250.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/29/2025	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Kristin Rohde <b>Contributor address; City; State; Zip Code</b> 1411 Rustling Brook lane, Houston TX 77094	<b>Amount of contribution (\$)</b> <b>50.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# 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:

8

2 FILER NAME

Lance Redmon

3 Filer ID (Ethics Commission Filers)

4 Date

02/03/2025

5 Full name of contributor

Terri Varvel

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

20.00

6 Contributor address; City; State; Zip Code

2819 Red Maple Dr, Katy TX 77494

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/04/2025

Full name of contributor

Ashley Vann

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

3707 Marble Cove, Katy TX 77494

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/14/2025

Full name of contributor

Dan Smith

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

6335 Deer Run Crossing, Katy TX 77493

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2025

Full name of contributor

Wendy Duncan

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

400.00

Contributor address; City; State; Zip Code

22915 Chaus Ct, Katy TX 77494

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.

# 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: 8
2 FILER NAME Lance Redmon		3 Filer ID (Ethics Commission Filers)
4 Date 03/02/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Linda Page	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code 13 Scotsmoor Ct, Sugar Land, TX 77479		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/02/2025	Full name of contributor out-of-state PAC (ID#: _____) Jessica Strange	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 9611 Ralston Bend LN, Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2025	Full name of contributor out-of-state PAC (ID#: _____) Kenneth Janda	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 23122 San Nicholas Place, Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2025	Full name of contributor out-of-state PAC (ID#: _____) Whitney Koch	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 438 Concordia Dr, Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# 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:

8

2 FILER NAME

Lance Redmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/02/2025

5 Full name of contributor

Cheryl Hollabaugh

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

1807 Hollow Wind Dr, Katy TX 77450

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/02/2025

Full name of contributor

Leah Wilson

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

5411 Briarcliff Ln, Fulshear TX 77441

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2025

Full name of contributor

Marvin Bobo

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

600 Pool Lane, Allen TX 75002

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2025

Full name of contributor

Anne Weiss

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

22907 Deforest Ridge, Katy TX 77494

Amount of contribution (\$)

500.00

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Lance Redmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/16/2025

5 Full name of contributor

Brenda Shaver

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

75.00

6 Contributor address; City; State; Zip Code

21330 Park Royale Dr, Katy TX 77450

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/17/2025

Full name of contributor

Glenn Gesoff

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

150.00

Contributor address; City; State; Zip Code

5815 Ashley Spring Ct, Katy TX 77494

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2025

Full name of contributor

Jason Bruney

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

25911 Hunter Ln, Katy TX 77494

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2025

Full name of contributor

Allan Kirk

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

28411 S Firethorne, Katy TX 77494

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>8</b>
2 FILER NAME Lance Redmon		3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Anne Russey	7 Amount of contribution (\$)  <b>50.00</b>
6 Contributor address; City; State; Zip Code 28231 Shorecrest Lane, Katy TX 77494		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date 03/25/2025	Full name of contributor out-of-state PAC (ID#: _____) Bryan Michalsky	Amount of contribution (\$)  <b>1,000.00</b>
Contributor address; City; State; Zip Code 514 Merrill St, Houston TX 77009		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date	Full name of contributor 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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Date	Full name of contributor 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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**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: <span style="font-size: 2em; color: blue;">2</span>	
2 FILER NAME Lance Redmon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,605.07	
5 Date 03/30/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katy Educational Excellence Partners PAC 7 Contributor address; City; State; Zip Code 5554 South Peek Road PMB 42, Katy TX 77450	8 Amount of Contribution \$ 1,405.07	9 In-kind contribution description Pushcards, stamps, postcards  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 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawn Champagne Contributor address; City; State; Zip Code 21410 Sand Bunker Cir, Katy TX 77450	Amount of Contribution \$ 100.00	In-kind contribution description Supplies for Meet and Greet  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)			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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: <span style="font-size: 1.5em; color: blue;">2</span>	
2 FILER NAME <b>Lance Redmon</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date  02/28/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patti and Bill Lacy</b> ..... 7 Contributor address; City; State; Zip Code <b>1703 Kent Falls, Katy TX 77450</b>	8 Amount of Contribution \$  100.00	9 In-kind contribution description  Supplies for Meet and Greet.
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
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)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Lance Redmon	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 03/10/2025	<b>5</b> Payee name NBD Graphics
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<b>6</b> Amount (\$) <b>1,780.71</b>	<b>7</b> Payee address; 917 S Mason Road, Katy , TX 77450	City;	State;	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Yard Signs
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/18/2025	Payee name NBD Graphics
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Amount (\$) <b>1,061.85</b>	Payee address; 917 S Mason Road, Katy TX 77450	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Road Signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 04/01/2025	Payee name Stripe, Inc
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Amount (\$) <b>166.62</b>	Payee address; 345 Oyster Point Blvd, South San Francisco, CA 94080	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Electronic Donation Fees
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Lance Redmon	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 02/24/2025	<b>5</b> Payee name NBD Graphics
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<b>6</b> Amount (\$) 1,780.71	<b>7</b> Payee address; 917 S Mason Road, Katy , TX 77450	City:	State:	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Yard Signs
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 02/26/2025	Payee name Minute Man Press of Katy
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Amount (\$) 626.68	Payee address; 1324 Pin Oak Rd, Katy TX 77494	City:	State:	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Pushcards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/06/2025	Payee name NBD Graphics
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Amount (\$) 1,780.71	Payee address; 917 S Mason Road, Katy, TX 77450	City:	State:	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising 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 <u>ONLY</u> 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**