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: 12

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr. | FIRST: Craig | MI: W
NICKNAME | LAST: Tipping | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ Change of Address
ADDRESS / PO BOX: 1021 Pebble Beach Dr. | APT / SUITE # | CITY: Mansfield, Tx 76063 | STATE | ZIP CODE

5 CANDIDATE / OFFICEHOLDER PHONE
AREA CODE: (682) | PHONE NUMBER: 472-2276 | EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mr. | FIRST: Kevin | MI: J
NICKNAME | LAST: Orsak | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)
STREET ADDRESS (NO PO BOX PLEASE): 1102 Country Club Ct. | APT / SUITE #: | CITY: Mansfield, Tx 76063 | STATE | ZIP CODE

8 CAMPAIGN TREASURER PHONE
AREA CODE: (682) | PHONE NUMBER: 808-3411 | EXTENSION

9 REPORT TYPE
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)
☐ July 15 ☑ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED
Month: 03 | Day: 25 | Year: 2025 | THROUGH | Month: 04 | Day: 23 | Year: 2025

11 ELECTION
ELECTION DATE: Month: 05 | Day: 03 | Year: 2025
ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description ☑ General ☐ Special

12 OFFICE
OFFICE HELD (if any): Mansfield ISD School Board - Place 3
13 OFFICE SOUGHT (if known): same

14 NOTICE FROM POLITICAL COMMITTEE(S)
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.

☑ Additional Pages

COMMITTEE TYPE: ☑ GENERAL ☐ SPECIFIC

COMMITTEE NAME: Texas Realtors Political Action Committee
COMMITTEE ADDRESS: 1115 San Jacinto Blvd, Ste 200 Austin, Tx 78701
COMMITTEE CAMPAIGN TREASURER NAME: Leslie Cantu
COMMITTEE CAMPAIGN TREASURER ADDRESS: P.O. Box 2246 Austin, Tx 78768-226

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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1 Filer ID (Ethics Commission Filers):

2 Total pages filed: 12

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. | FIRST: Craig | MI: W | NICKNAME | LAST: Tipping | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 1021 Pebble Beach Dr. | APT / SUITE # | CITY: Mansfield, Tx 76063 | STATE: | ZIP CODE

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (682) | PHONE NUMBER: 472-2276 | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr. | FIRST: Kevin | MI: J | NICKNAME | LAST: Orsat | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): 1102 Country Club Ct. | APT / SUITE # | CITY: Mansfield, Tx 76063 | STATE: | ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE: (682) | PHONE NUMBER: 808-3411 | EXTENSION

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)

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12 OFFICE

OFFICE HELD (if any): Mansfield ISD School Board - Place 3

13 OFFICE SOUGHT (if known): same

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☐ Additional Pages

COMMITTEE TYPE: ☑ GENERAL ☐ SPECIFIC

COMMITTEE NAME: Keep Tarrant Red PAC

COMMITTEE ADDRESS: 309 E. Broad St. Mansfield, Tx 76063

COMMITTEE CAMPAIGN TREASURER NAME: Daryle Perez

COMMITTEE CAMPAIGN TREASURER ADDRESS: 309 E. Broad St. Mansfield, Tx 76063

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Craig Tipping			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)	$ —
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 2,800.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE	$ —
	4.	TOTAL POLITICAL EXPENDITURES	$ 2,593.95
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 2,518.25
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

C Tipp
Signature of Candidate or Officeholder

ALICIA DAY HEIMBIGNER
Notary Public, State of Texas
Comm. Expires 01-14-2029
Notary ID 132870286

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Craig Tipping this the 25 day of April, 20 25, to certify which, witness my hand and seal of office.

Alicia Heimbigner — Alicia Heimbigner — Coordinator School Board Services

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	20 Filer ID (Ethics Commission Filers)
Craig Tipping	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	☑	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 2,800.00
2.	☐	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	☐	SCHEDULE E: LOANS	$
5.	☑	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 2,593.95
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: 2

2 FILER NAME: Craig Tipping

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#)	6 Contributor address / City / State / Zip Code	7 Amount of contribution ($)
3/26/25	Chad Kleppelrd	[redacted] Mansfield TX 76063	$200.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address / City / State / Zip Code	Amount of contribution ($)
3/30/25	Evelyn Colon	[redacted] Arlington Tx 76006	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address / City / State / Zip Code	Amount of contribution ($)
4/6/25	Cory Ray	[redacted] Mansfield Tx 76063	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address / City / State / Zip Code	Amount of contribution ($)
4/17/25	Brandon Hamil	[redacted] Mansfield TX 76063	$350.00

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

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 2

2 FILER NAME: Craig Tipping

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / ☐ out-of-state PAC (ID#:)	6 Contributor address / City / State / Zip Code	7 Amount of contribution ($)
4/10/25	TREPAC - Texas Realtors PAC	P.O. Box 2246 Austin TX 78768	$ 1,000.00

8 Principal occupation / Job title (See Instructions):

9 Employer (See Instructions):

Date	Full name of contributor / ☐ out-of-state PAC (ID#:)	Contributor address / City / State / Zip Code	Amount of contribution ($)
3/28/25	Jaret Greaser	[redacted] Lubbock Tx 79423	$ 200.00

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / ☐ out-of-state PAC (ID#:)	Contributor address / City / State / Zip Code	Amount of contribution ($)
3/29/25	Sandy Pettit	[redacted] Mansfield Tx 76063	$ 100.00

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / ☐ out-of-state PAC (ID#:)	Contributor address / City / State / Zip Code	Amount of contribution ($)
3/31/25	Julie Short	[redacted] Mansfield Tx 76063	$ 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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: Craig Tipping

3 Filer ID (Ethics Commission Filers):

4 Date: 4/3/25

5 Payee name: Williams Sign Company

6 Amount ($): $941.78

7 Payee address: 3933 E. California Pkwy City: Forest Hill State: Tx Zip Code: 76119

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising

(b) Description: Signs

(c) ☐ Check if travel outside of Texas. Complete Schedule T ☐ 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: 4/23/25

Payee name: Amedot

Amount ($): $24.60

Payee address: 1340 Poydras St. #1770 City: New Orleans State: LA Zip Code: 70112

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Fees

Description: Transaction fees

☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Office sought: Office held:

Date: 4/4/25

Payee name: QT

Amount ($): $58.40

Payee address: 1601 FM-157 City: Mansfield State: Tx Zip Code: 76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Travel in district

Description: gas

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: Craig Tipping

3 Filer ID (Ethics Commission Filers):

4 Date: 4/4/25

5 Payee name: Sams Club

6 Amount ($): $100.00

7 Payee address: 1740 FM-157 N City: Mansfield State: Tx Zip Code: 76063

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Food / Beverage

(b) Description: Food/Beverage

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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: 4/7/25

Payee name: Walgreens

Amount ($): $14.05

Payee address: 750 N Walnut Greek City: Mansfield State: Tx Zip Code: 76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Gift expense

Description: gift

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: Office sought: Office held:

Date: 4/7/25

Payee name: Tom Thumb

Amount ($): $45.25

Payee address: 980 Hwy N 287 City: Mansfidd State: Tx Zip Code: 76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Travel in district

Description: gas

☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: Craig Tipping

3 Filer ID (Ethics Commission Filers):

4 Date: 4/7/25

5 Payee name: Print Place

6 Amount ($): $130.46

7 Payee address: 1110 Avenue H E | City: Arlington | State: TX | Zip Code: 76011

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising expense

(b) Description: push cards

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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: 4/11/25

Payee name: Anita Grace

Amount ($): $196.00

Payee address: | City: Mansfield | State: TX | Zip Code: 76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Advertising expense

Description: shirts

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

---

Date: 4/14/25

Payee name: QT

Amount ($): $99.14

Payee address: 8090 S Watson Rd | City: Arlington | State: TX | Zip Code: 76002

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Travel in district

Description: gas

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
6	Craig Tipping	

Expenditure 1

4 Date	5 Payee name			
4/15/25	QT			
6 Amount ($)	7 Payee address	City	State	Zip Code
$16.09	8090 S Watson Rd	Arlington	TX	76002

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Food / beverage

(b) Description: Food/beverage

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

Expenditure 2

Date	Payee name			
4/15/25	Chevron			
Amount ($)	Payee address	City	State	Zip Code
$38.96	1901 Country Club Dr.	Mansfield	TX	76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Travel in district

Description: gas

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

Expenditure 3

Date	Payee name			
4/16/25	Craig Tipping			
Amount ($)	Payee address	City	State	Zip Code
$390.00	1021 Pebble Beach Dr	Mansfield	TX	76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Personal fund expenditure reimbursement

Description: Reimbursement

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: Crary Tipping

3 Filer ID (Ethics Commission Filers):

4 Date: 4/17/25

5 Payee name: Print Place

6 Amount ($): $228.95

7 Payee address: 1110 Avenue H E | City: Arlington | State: TX | Zip Code: 76011

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising

(b) Description: push cards

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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: 4/21/25

Payee name: Tom Thumb

Amount ($): $46.70

Payee address: 980 Hwy N 287 | City: Mansfield | State: Tx | Zip Code: 76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Food / beverage

Description: Food / beverage

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

---

Date: 4/23/25

Payee name: 7-11

Amount ($): $9.87

Payee address: 2501 E Broad St. | City: Mansfield | State: Tx | Zip Code: 76063

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Food / beverage

Description: Food / beverage

☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
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Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: Craig Tipping

3 Filer ID (Ethics Commission Filers):

4 Date: 4/23/25

5 Payee name: Craig Tipping

6 Amount ($): $ 253.70

7 Payee address: 1021 Pebble Beach Dr City: Mansfield State: TX Zip Code: 76063

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Personal fund expenditure reimbursement

(b) Description: Reimbursement

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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: Payee name:

Amount ($): Payee address: City: State: Zip Code:

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Description:

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY 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:

☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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