

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

29

OFFICE USE ONLY

Filer ID #

Date Received

APR 03 2023

Date Hand-delivered or Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

2 CANDIDATE
NAME

MS / MRS / MR FIRST MI
Mr. Reed M
NICKNAME LAST SUFFIX
Bond

3 CANDIDATE
MAILING
ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE
2741 Costa Mesa Dr., Little Elm, TX 75068

4 CANDIDATE
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 832-4139

5 OFFICE
HELD
(if any)

6 OFFICE
SOUGHT
(if known)

FISD Trustee - Place 4

7 CAMPAIGN
TREASURER
NAME

MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX
Mr. Rodney M Bond

8 CAMPAIGN
TREASURER
STREET
ADDRESS

(residence or business)

STREET ADDRESS APT / SUITE # CITY STATE ZIP CODE
401 Boyd. Dr. 1118 Grapevine, TX 76051

9 CAMPAIGN
TREASURER
PHONE

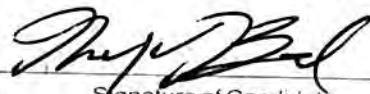
AREA CODE PHONE NUMBER EXTENSION
(817) 475-9950

10 CANDIDATE
SIGNATURE

I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.

I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.

I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.


Signature of Candidate

4/3/23
Date Signed

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Reed M Bond		16 Filer ID (Ethics Commission Filers) 921569017
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,389.02
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 366.59
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,868.97
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 11,000.00

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 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: _____

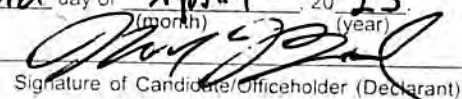
OR

(2) Unsworn Declaration

My name is Reed M Bond, and my date of birth is 8/31/1981

My address is 2741 Costa Mesa Dr., Little Elm, TX, 75068, USA
(street) (city) (state) (zip code) (country)

Executed in Denton County, State of TX, on the 3rd day of April, 2023
(month) (year)



Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Reed M Bond		20 Filer ID (Ethics Commission Filers) 921569017
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 7,389.02
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 11,000.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 7,868.97
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:

10 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/13/2023

5 Full name of contributor

Patrick Wamhoff

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

238.38

6 Contributor address; City; State; Zip Code

1136 Churchill Dr., Frisco, TX 75036

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/13/2023

Full name of contributor

R Kerry Huffman

out-of-state PAC (ID# _____)

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

9423 Tanyard LN, Frisco, TX 75033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/17/2023

Full name of contributor

James Smith

out-of-state PAC (ID# _____)

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

2535 Loch Haven Ct., Frisco, TX 75036

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2023

Full name of contributor

Terry D Gooch

out-of-state PAC (ID# _____)

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

1636 Lake Way Dr., Little Elm, TX 75068

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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1 Total pages Schedule A1:

2 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/18/2023

5 Full name of contributor

Sue Gamboa

out-of-state PAC (ID# _____)

6 Contributor address;

City;

State;

Zip Code

2675 Calmwood Dr., Little Elm, TX 75068

7 Amount of contribution (\$)

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/18/2023

Full name of contributor

Joanne M.G. Janssen

out-of-state PAC (ID# _____)

Contributor address;

City;

State;

Zip Code

1316 Pelican Dr., Frisco, TX 75033

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/27/2023

Full name of contributor

Brett McCann

out-of-state PAC (ID# _____)

Contributor address;

City;

State;

Zip Code

6295 Larkspur Ln., Frisco, TX 75036

Amount of contribution (\$)

47.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/27/2023

Full name of contributor

Toni Fabry

out-of-state PAC (ID# _____)

Contributor address;

City;

State;

Zip Code

7338 Willow Creek Drive, Frisco TX 75703

Amount of contribution (\$)

47.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

3 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/26/2023

5 Full name of contributor

Scott Fagan

out-of-state PAC (ID#: _____)

6 Contributor address;

4727 Druid Hills Dr., Frisco TX 75034

City; State; Zip Code

7 Amount of contribution (\$)

191.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/23/2023

Full name of contributor

Vickie Costa

out-of-state PAC (ID#: _____)

Contributor address;

10521 Chablis Lane, Frisco TX 75035

City; State; Zip Code

Amount of contribution (\$)

47.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/23/2023

Full name of contributor

Shirley Robert

out-of-state PAC (ID#: _____)

Contributor address;

6362 Loudoun Springs Drive, Frisco TX 75036

City; State; Zip Code

Amount of contribution (\$)

191.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2023

Full name of contributor

Howard Akin

out-of-state PAC (ID#: _____)

Contributor address;

44 Armstrong Drive, Frisco TX 75034

City; State; Zip Code

Amount of contribution (\$)

959.70

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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1 Total pages Schedule A1:

4 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/21/2023

5 Full name of contributor

Shannon Clay

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

47.70

6 Contributor address:

City:

State:

Zip Code

15039 Spider Lily Rd, Frisco TX 75035

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/19/2023

Full name of contributor

Kent Sexton

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

47.70

Contributor address:

City:

State:

Zip Code

13167 Cleburne Drive, Frisco TX 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2023

Full name of contributor

DeLeon English

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

239.70

Contributor address:

City:

State:

Zip Code

1441 Thornhill Lane, Little Elm TX 75068

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2023

Full name of contributor

Sabine Durbin

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

47.70

Contributor address:

City:

State:

Zip Code

7501 Veronica Lane, Frisco TX 75033

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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1 Total pages Schedule A1:

5 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/13/2023

5 Full name of contributor

Gerald Turner

out-of-state PAC (ID# _____)

6 Contributor address;

7836 Roundtable Road, Frisco TX 75035

City: State: Zip Code

7 Amount of contribution (\$)

23.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/08/2023

Full name of contributor

Amy Snow

out-of-state PAC (ID# _____)

Contributor address;

14551 Daneway Drive, Frisco TX 75035

City: State: Zip Code

Amount of contribution (\$)

47.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2023

Full name of contributor

Sonya Christle

out-of-state PAC (ID# _____)

Contributor address;

3746 Elmstead Drive, Frisco TX 75034

City: State: Zip Code

Amount of contribution (\$)

47.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2023

Full name of contributor

Keith Groat

out-of-state PAC (ID# _____)

Contributor address;

4936 Toledo Bend Dr., Frisco TX 75033

City: State: Zip Code

Amount of contribution (\$)

959.70

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:

6 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/07/2023

5 Full name of contributor

Julie Greene

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

95.70

6 Contributor address;

City;

State;

Zip Code

2909 Hagen Drive, Plano TX 75025

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/05/2023

Full name of contributor

Amy Haynes

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

47.70

Contributor address;

City;

State;

Zip Code

6308 Brownstone Dr., McKinney TX 75070

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2023

Full name of contributor

Brenda Rogers

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

9.30

Contributor address;

City;

State;

Zip Code

2251 Feathering Dr. Frisco TX 75036

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2023

Full name of contributor

Melinda Preston

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

191.70

Contributor address;

City;

State;

Zip Code

13370 Bayfield Drive, Frisco TX 75033

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:

7 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/04/2023

5 Full name of contributor

John Rutledge

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

95.70

6 Contributor address;

City;

State;

Zip Code

16417 Ryder Rock Rd., Frisco TX 75033

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/04/2023

Full name of contributor

Lennea Hartoonian

out-of-state PAC (ID# _____)

Amount of contribution (\$)

239.70

Contributor address;

City;

State;

Zip Code

11043 Ruidosa Lane, Frisco TX 75033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Lisa Akerly

out-of-state PAC (ID# _____)

Amount of contribution (\$)

239.70

Contributor address;

City;

State;

Zip Code

12398 Flowering Drive, Frisco TX 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Jena Masquelier

out-of-state PAC (ID# _____)

Amount of contribution (\$)

959.70

Contributor address;

City;

State;

Zip Code

3071 Cape Buffalo Trail, Frisco TX 75034

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 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/03/2023

5 Full name of contributor

Harrison Cohen

out-of-state PAC (ID#: _____)

6 Contributor address:

City:

State:

Zip Code

6817 Southpoint Drive, Dallas TX 75248

7 Amount of contribution (\$)

239.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Misty Wamhoff

out-of-state PAC (ID#: _____)

Contributor address:

City:

State:

Zip Code

1136 Churchill Dr., Frisco TX 75036

Amount of contribution (\$)

47.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Sandra Lehde

out-of-state PAC (ID#: _____)

Contributor address:

City:

State:

Zip Code

8400 Stonebrook Pkwy, Frisco TX 75034

Amount of contribution (\$)

23.70

Principal occupation / Job title (See Instructions)

#1936

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Ashley Boyers

out-of-state PAC (ID#: _____)

Contributor address:

City:

State:

Zip Code

9338 Cherry Brook Lane, Frisco TX 75033

Amount of contribution (\$)

23.70

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:

9 of 14

2 FILER NAME

Reed M Bpnd

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/03/2023

5 Full name of contributor

Justin Harville

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

47.70

6 Contributor address;

City;

State;

Zip Code

3263 Appleblossom Dr., Frisco TX 75033

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Elizabeth Heinrich

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

95.70

Contributor address;

City;

State;

Zip Code

1508 Waterfall Lane, Little Elm TX 75068

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Andrew Cucci

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

47.70

Contributor address;

City;

State;

Zip Code

720 Telemark Trail, Frisco TX 75036

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Casey McGinnis

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

191.70

Contributor address;

City;

State;

Zip Code

4029 Veneto Drive, Frisco TX 75033

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:

10 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/03/2023

5 Full name of contributor

Frank Deutschmann

out-of-state PAC (ID#: _____)

6 Contributor address:

City: State: Zip Code

9300 DAYSTAR DR., Plano TX 75025

7 Amount of contribution (\$)

191.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Summer Elliott

out-of-state PAC (ID#: _____)

Contributor address:

City: State: Zip Code

10712 Patton Drive, McKinney TX 75070

Amount of contribution (\$)

47.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Lyndi Linker

out-of-state PAC (ID#: _____)

Contributor address:

City: State: Zip Code

2870 Killdeer Trail, Prosper TX 75078

Amount of contribution (\$)

95.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Jennifer Kent

out-of-state PAC (ID#: _____)

Contributor address:

City: State: Zip Code

15112 Christopher Lane, Frisco TX 75035

Amount of contribution (\$)

23.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

11 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/03/2023

5 Full name of contributor

Valerie Cohen

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

43.86

6 Contributor address;

6817 Southpoint Drive, Dallas TX 75248

City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/03/2023

Full name of contributor

Anna Preissig

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

21.78

Contributor address;

11771 Capitan Lane, Frisco TX 75033

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2023

Full name of contributor

David Willey

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

47.70

Contributor address;

6503 Eden Valley Drive, Frisco TX 75036

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2023

Full name of contributor

Cassidy Johnston

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

95.70

Contributor address;

8101 Bobwhite Drive, Frisco TX 75034

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

12 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

03/01/2023

5 Full name of contributor

Elizabeth Heinrich

out-of-state PAC (ID# _____)

6 Contributor address;

City;

State;

Zip Code

1508 Waterfall Lane, Little Elm TX 75068

7 Amount of contribution (\$)

95.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/01/2023

Full name of contributor

Marsha Flewelling

out-of-state PAC (ID# _____)

Contributor address;

City;

State;

Zip Code

3018 Catamaran Ct., Frisco TX 75036

Amount of contribution (\$)

71.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2023

Full name of contributor

Christopher Gilbert

out-of-state PAC (ID# _____)

Contributor address;

City;

State;

Zip Code

11306 Casa Grande Trl., Frisco TX 75033

Amount of contribution (\$)

95.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2023

Full name of contributor

Elizabeth Heinrich

out-of-state PAC (ID# _____)

Contributor address;

City;

State;

Zip Code

1508 Waterfall Lane, Little Elm TX 75068

Amount of contribution (\$)

95.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

13 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

02/20/2022

5 Full name of contributor

Marian Maitlen

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

95.70

6 Contributor address; City; State; Zip Code

1406 Randy Drive, Weatherford, TX TX 76086

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/20/2022

Full name of contributor

Lindy Shinn

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

23.70

Contributor address; City; State; Zip Code

3615 Corkwood Drive, Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/17/2022

Full name of contributor

Rodney M Bond

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

23.70

Contributor address; City; State; Zip Code

401 Boyd Dr. 1118, Grapevine, TX 76051

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/10/2022

Full name of contributor

Michelle Milholland

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

479.70

Contributor address; City; State; Zip Code

6050 Chamberlyne Drive, Frisco TX 75034

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:

14 of 14

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

92-1569017

4 Date

02/08/2023

5 Full name of contributor

Kaitlyn Mathews

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

23.70

6 Contributor address:

City:

State:

Zip Code

2836 Eccleston Street, Celina TX 75009

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

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)

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)

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)

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:

2 FILER NAME

Reed M Bond

3 Filer ID (Ethics Commission Filers)

921569017

4 TOTAL OF UNITEMIZED LOANS

\$ 11,000.00

5 Date of loan

7 Name of lender out-of-state PAC (ID# _____)

9 Loan Amount (\$)

6 Is lender a financial Institution?
 Y N

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender out-of-state PAC (ID# _____)

Loan Amount (\$)

Is lender a financial Institution?
 Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

not applicable

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.

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4 <i>11</i>	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 01/13/2023	6 Payee name Geeky Beths Marketing	
7 Amount (\$) 550.00	8 Payee address: 6505 SW 150th St, Augusta, KS 67010 City: State: Zip Code	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Digital Marketing	(b) Description Designed and modified website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <i>01/17/2023</i>	Payee name Geeky Beths Marketing	
Amount (\$) 100.00	Payee address: 6505 SW 150th St, Augusta, KS 67010 City: State: Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Digital Marketing	Description Designed and modified website
	<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 <input type="checkbox"/> Office held <input type="checkbox"/>
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 11	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 02/03/2023	6 Payee name Geeky Beths Marketing	
7 Amount (\$) 150.00	8 Payee address; City; State; Zip Code 6505 SW 150th St, Augusta, KS 67010	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Digital Marketing	(b) Description Designed and modified website
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. <input type="checkbox"/>	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/15/2023	Payee name Geeky Beths Marketing	
Amount (\$) 145.00	Payee address; City; State; Zip Code 6505 SW 150th St, Augusta, KS 67010	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Digital Marketing	Description Designed and modified website
	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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4 <i>11</i>	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 02/21/2023	6 Payee name Geeky Beths Marketing	
7 Amount (\$) 332.50	8 Payee address, City, State, Zip Code 6505 SW 150th St, Augusta, KS 67010	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Digital Marketing	(b) Description Designed and modified website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 03/23/2023	Payee name Geeky Beths Marketing	
Amount (\$) 250.00	Payee address, City, State, Zip Code 6505 SW 150th St, Augusta, KS 67010	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Digital Marketing	Description Designed and modified website
	<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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: //	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 01/26/2023	6 Payee name First Graphic Services	
7 Amount (\$) 2,350.00	8 Payee address: 229 Garvon St., Garland, TX 75040 City: State: Zip Code	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description Printing of campaign signs
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/14/2023	Payee name First Graphic Services	
Amount (\$) 3,769.37	Payee address: 229 Garvon St., Garland, TX 75040 City: State: Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Avertising expense	Description Printing of campaign 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: <u>11</u>	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 03/27/2023	6 Payee name First Graphic Services	
7 Amount (\$) 667.91	8 Payee address, City, State, Zip Code 229 Garvon St., Garland, TX 75040	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	
	(b) Description Printing of campaign signs	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense.		
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>12/1</u> 02/14/2023	Payee name Print Runner	
Amount (\$) 195.14	Payee address, City, State, Zip Code 8000 Haskell Ave., Van Nuys, CA 91406	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Avertising expense	
	Description Printing of business cards	
(c) <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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: <i>11</i>	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 02/17/2023	6 Payee name Walmart	
7 Amount (\$) 20.44	8 Payee address; City; State; Zip Code 12220 FM 423, Frisco, TX 75033	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expenses	(b) Description Ralleys, canvasing, meet & greets, ...
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>2/21/23</i>	Payee name Walmart	
Amount (\$) 172.41	Payee address; City; State; Zip Code 12220 FM 423, Frisco, TX 75033	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expenses	Description Ralleys, canvasing, meet & greets, ...
	Check if travel outside of Texas. Complete Schedule T. 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		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| | 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 <i>Schedule F4</i> <i>11</i>	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 02/27/2023	6 Payee name Walmart	
7 Amount (\$) 113.38	8 Payee address; City; State; Zip Code 12220 FM 423, Frisco, TX 75033	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expenses	
	(b) Description Ralleys, canvasing, meet & greets, ...	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	

Date 03/06/2023	Payee name Walmart	
Amount (\$) 15.44	Payee address; City; State; Zip Code 12220 FM 423, Frisco, TX 75033	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expenses	
	Description Ralleys, canvasing, meet & greets, ...	
	<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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: //	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 02/27/2023	6 Payee name Walmart	
7 Amount (\$) 113.31	8 Payee address: City: State: Zip Code 12220 FM 423, Frisco, TX 75033	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expenses	(b) Description Ralleys, canvassing, meet & greets, ...
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. <input type="checkbox"/>	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/13/2023	Payee name Walmart	
Amount (\$) 134.13	Payee address, City: State: Zip Code 12220 FM 423, Frisco, TX 75033	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expenses	Description Ralleys, canvassing, meet & greets, ...
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 11	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 03/20/2023	6 Payee name Walmart	
7 Amount (\$) 121.59	8 Payee address: 12220 FM 423, Frisco, TX 75033 City: State: Zip Code	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expenses	(b) Description Ralley's, canvassing, meet & greets, ...
	(c) Check if travel outside of Texas, Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/20/2023	Payee name Walmart	
Amount (\$) 40.45	Payee address: 12220 FM 423, Frisco, TX 75033 City: State: Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expenses	Description Ralley's, canvassing, meet & greets, ...
	(c) Check if travel outside of Texas, Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: <u>11</u>	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59
5 Date 03/21/2023	6 Payee name Walmart	
7 Amount (\$) 1.86	8 Payee address: 12220 FM 423, Frisco, TX 75033 City: State: Zip Code	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expenses	(b) Description Ralleys, canvasing, meet & greets, ...
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date 03/27/2023	Payee name Walmart	
Amount (\$) 5.00	Payee address: 12220 FM 423, Frisco, TX 75033 City: State: Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expenses	Description Ralleys, canvasing, meet & greets, ...
	(c) 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 <input type="checkbox"/> Office held <input type="checkbox"/>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4 11	2 FILER NAME Reed M Bond	3 Filer ID (Ethics Commission Filers) 921569017
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 366.59

5 Date 03/27/2023	6 Payee name Walmart			
7 Amount (\$) 161.43	8 Payee address, 12220 FM 423, Frisco, TX 75033	City:	State:	Zip Code

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expenses	(b) Description Ralleys, canvassing, meet & greets, ...
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 02/21/2023	Payee name U-Hall			
Amount (\$) 241.04	Payee address, 2560 Kathryn Ln, Plano, TX 75025	City:	State:	Zip Code

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expenses	Description Distribution campaign materials
	(c) <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

