

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

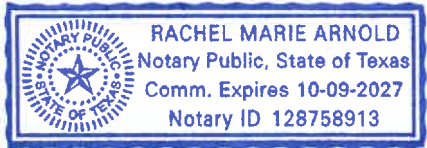
2 of 14

13 C / OH NAME Covey, Valerie	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.																	
<table border="1" style="width:100%"> <tr> <td style="width:20%">COMMITTEE TYPE</td> <td colspan="2">COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td colspan="2" rowspan="2"></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> </tr> <tr> <td colspan="3">COMMITTEE ADDRESS</td> </tr> <tr> <td colspan="3">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td colspan="3">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL			<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS			COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS				
	COMMITTEE TYPE	COMMITTEE NAME																
	<input type="checkbox"/> GENERAL																	
	<input type="checkbox"/> SPECIFIC																	
COMMITTEE ADDRESS																		
COMMITTEE CAMPAIGN TREASURER NAME																		
COMMITTEE CAMPAIGN TREASURER ADDRESS																		

16 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)	\$ 30,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 458.58
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,499.92
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 118,230.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT



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.

Valerie Covey
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Valerie Covey, this the 16th day of January, 2024, to certify which, witness my hand and seal of office.

Rachel Arnold
Signature of officer administering

Rachel Arnold
Printed name of officer administering

Notary Public
Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Covey, Valerie	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 30,000.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,499.92
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/14
2 FILER NAME Covey, Valerie		3 Filer ID
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre & Fields LP PAC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 7515 New Territory Blvd Ste 100 Sugar Land, TX 77479		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/28/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00385989) Atkins US Holdings Inc PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 4030 West Boy Scout Blvd Ste 700 Tampa, FL 33607		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00368902) DVA Holding Company PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 11 North Water St Ste 18290 Mobile, AL 36602		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Steven	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 3711 South Mopac Expr Building One, Ste 350 Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Steven	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 3711 South Mopac Expr Building One, Ste 350 Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/14
2 FILER NAME Covey, Valerie		3 Filer ID
4 Date 08/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doucet, John	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 2300 Gatlin Creek Rd Dripping Springs, TX 78620-5360		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Haywood	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 7 Tall Oaks Trail Austin, TX 78737		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00103903) HDR Inc Employee Owners PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 1917 S 67th St Omaha, NE 68106		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huitt-Zollars Inc Texas PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 5430 LBJ Freeway Ste 1500 Dallas, TX 75240		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IEA PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 18383 Preston Road #500 Dallas, TX 75252		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/14
2 FILER NAME Covey, Valerie		3 Filer ID
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, James <hr/> 6 Contributor address; City; State; Zip Code 801 West 5th St #2511 Austin, TX 78703	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowe, Thomas <hr/> Contributor address; City; State; Zip Code 201 Ocate Mesa Trl Liberty Hill, TX 78642	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Blake <hr/> Contributor address; City; State; Zip Code 1409 Kent Lane Austin, TX 78703	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of Pacheco Koch <hr/> Contributor address; City; State; Zip Code 7557 Rambler Road Ste 1400 Dallas , TX 75231	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quiddity PAC <hr/> Contributor address; City; State; Zip Code 3100 Alvin Devane Blvd Ste 150 Austin, TX 78741	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/14
2 FILER NAME Covey, Valerie		3 Filer ID
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raba-Kistner PAC Inc	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schrock, Kenneth	Amount of Contribution (\$) \$3,000.00
Contributor address; City; State; Zip Code 9202 Silver Pine Cove Austin, TX 78733		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 1/7 Rpt: 8/14	2 FILER NAME Covey, Valerie	3 Filer ID
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4 Date 08/10/2023	5 Payee name Arnold, Rachel
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6 Amount (\$) \$319.77	7 Payee address; City; State; Zip Code 100 Wilco Way Ste CO201 Georgetown, TX 78626
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for county employee event at Georgetown Annex
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/11/2023	Payee name Arnold, Rachel
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Amount (\$) \$50.06	Payee address; City; State; Zip Code 100 Wilco Way Ste CO201 Georgetown, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for county employee event at Georgetown annex
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/27/2023	Payee name Blue Corn Harvest
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Amount (\$) \$68.42	Payee address; City; State; Zip Code 212 W 7th St #105 Georgetown, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder issues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 2/7 Rpt: 9/14	2 FILER NAME Covey, Valerie	3 Filer ID
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4 Date 12/05/2023	5 Payee name Blue Corn Harvest
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6 Amount (\$) \$79.08	7 Payee address; City; State; Zip Code 212 W 7th St #105 Georgetown, TX 78626
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder issues
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name Blue Corn Harvest
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Amount (\$) \$60.86	Payee address; City; State; Zip Code 212 W 7th St #105 Georgetown, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder and campaign issues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2023	Payee name Davidson, Steven
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3711 S Mopac Expr Ste 350 Austin, TX 78746
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Stop payment on check	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stop payment placed on contribution check deposited 7/11/23.Reissued to Campaign on 8/7/23.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 3/7 Rpt: 10/14	2 FILER NAME Covey, Valerie	3 Filer ID
4 Date 07/14/2023	5 Payee name Davidson, Steven	
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 3711 S Mopac Expr Ste 350 Austin, TX 78746	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee for stop payment.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stop payment placed on contribution check deposited 7/11/23.Reissued to Campaign on 8/7/23.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/13/2023	Payee name Eschberger, Christen	
Amount (\$) \$1,733.13	Payee address; City; State; Zip Code 101 E Old Settlers Blvd Ste 225 Round Rock, TX 78664	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Fund Raising event.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2023	Payee name Jarrell Chamber of Commerce	
Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 196 Jarrell, TX 76537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 4/7 Rpt: 11/14	2 FILER NAME Covey, Valerie	3 Filer ID
4 Date 08/10/2023	5 Payee name Jarrell Chamber of Commerce	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code PO Box 196 Jarrell, TX 76537	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chamber monthly meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2023	Payee name Jarrell Chamber of Commerce	
Amount (\$) \$20.00	Payee address; City; State; Zip Code PO Box 196 Jarrell, TX 76537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chamber monthly meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2023	Payee name Kalahari Resorts & Conventions	
Amount (\$) \$179.00	Payee address; City; State; Zip Code 3001 Kalahari Blvd Round Rock , TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel deposit for TAC conference
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 5/7 Rpt: 12/14		2 FILER NAME Covey, Valerie		3 Filer ID	
4 Date 09/21/2023		5 Payee name Perez, Mary			
6 Amount (\$) \$44.81		7 Payee address; City; State; Zip Code 100 Wilco Way, CO201 Georgetown, TX 78626			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/21/2023		Payee name Perez, Mary			
Amount (\$) \$21.00		Payee address; City; State; Zip Code 100 Wilco Way, CO201 Georgetown, TX 78626			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder issues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/13/2023		Payee name Perez, Mary			
Amount (\$) \$60.35		Payee address; City; State; Zip Code 100 Wilco Way, CO201 Georgetown, TX 78626			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 6/7 Rpt: 13/14	2 FILER NAME Covey, Valerie	3 Filer ID
4 Date 11/05/2023	5 Payee name Rotary Club of Georgetown	
6 Amount (\$) \$139.22	7 Payee address; City; State; Zip Code 410 E University Ave Georgetown, TX 78626	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	
Date 09/13/2023	Payee name United States Postal Service	
Amount (\$) \$66.00	Payee address; City; State; Zip Code 2300 Scenic Dr Georgetown, TX 78626	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	
Date 10/05/2023	Payee name Wildfire	
Amount (\$) \$61.96	Payee address; City; State; Zip Code 812 S Austin Ave Georgetown, TX 78626	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder issues
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 7/7 Rpt: 14/14	2 FILER NAME Covey, Valerie	3 Filer ID
4 Date 10/31/2023	5 Payee name Wildfire	
6 Amount (\$) \$53.38	7 Payee address; City; State; Zip Code 812 S Austin Ave Georgetown, TX 78626	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss officeholder and campaign issues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2023	Payee name Williamson County Regional Animal Shelter	
Amount (\$) \$204.30	Payee address; City; State; Zip Code 1855 SE Inner Loop Georgetown, TX 78626	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2023	Payee name Williamson County Republican Party	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 716 S Rock St Georgetown, TX 78626	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee to run for County Commissioner in 2024
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held