CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1	Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Ronald		мі S	OFFICE USE ONLY	
NAME	NICKNAME Steve	Sprowls		SUFFIX	Date RECEIVED	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; 12650 N Bea Suite 114 #10 Ft Worth, TX	ch St	CITY;	STATE; ZIP CODE	APR 2 8 2023 NORTHWEST ISD Superintendent's Office	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER		EXTENSION	Date Hand-delivered or Date Postmarked 4-28-23 Receipt # Amount \$	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MR	FIRST Ronald		мі S	Date Processed 4-28-23	
(AVIAIT	NICKNAME Steve	Sprowls		SUFFIX	Date Imaged 4-28-23	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		no po box please); APT / s ch St, Suite 114 # 76244			STATE; ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (682)	PHONE NUMBER 207-5591		EXTENSION		
9 REPORT TYPE	January 15	30th day before	electio		15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	lection	Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month 03	Day Year / 28 / 23		THROUGH 04	23 Year 23	
11 ELECTION	Month Day 05 / 06	Year Primary 23 General	l	ELECTION TYPE Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any) Northwest IS	D Trustee Place 5		13 OFFICE SOUGHT (if know Northwest ISD True	ustee Place 5	
14 NOTICE FROM POLITICAL					MADE BY POLITICAL COMMITTEES TO SUPPORT NOIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TR	EASU	RER NAME		
		COMMITTEE CAMPAIGN TR	REAS	JRER ADDRESS		
	GO TO PAGE 2					

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Revised 8/17/2020

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

OAINI ATO		
15 C/OH NAME Ronald "Steve" Sprow		6 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2254.18
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7419.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$ 0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$ 0.00
18 SIGNATURE I s	swear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code. Signature of Carlo	didate or Officeholder
	Please complete either option below:	
(1) Affidavit	JENNIFER ROBERTS Notary ID #10669430 My Commission Expires August 8, 2025	
NOTARY STAMP/SEA	Slave Coarle	ay of April
> 1	which, witness my hand and seal of office.	FXLL - ASSISTEM- Title of officer administering oath
(2) Unsworn Declarat		
My name is	, and my date of birth is _	
My address is		ate) (zip code) (country)
	(Silect)	
Executed in	County, State of, on the day of(month)	, 20 (year)
	Signature of Candida	ate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	LER NAME ald "Steve" Sprowls 20 Filer ID (Ethics Con	nmissio	n Filers)			
	HEDULE SUBTOTALS		SUBTOTAL AMOUNT			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2254.18			
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	\$	4512.94			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$				
7,	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	2906.55			
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	\$	2			
12.	CAINS REFUNDS AND CONTRIBUTIONS RETURNED					

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDULE A	1
	The Instru	ction Guide explains how to complete this form.		otal pages Schedule A1:	
2	FILER NAME	Rough "Steve" Spouls		iler ID	
4	The state of the s			rmount of Contribution (\$)	26.34
8	Principal occu	Fort Worth, TX 76244 pation / Job title (See Instructions) 9 Employee	r (See Instructions)		
	Date 03/31/2023	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$) \$1	.04.39
-	Principal occu	Fort Worth, TX 76244 pation / Job title (See Instructions) Employe	er (See Instructions)	2311700	
	Date 04/01/2023	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$10.72
	Principal occu	Roanoke, TX 76262 pation / Job title (See Instructions) Employe	er (See Instructions)		
	Date 04/04/2023	Full name of contributor out-of-state PAC (ID#: Casey, Jenny Contributor address; City; State; Zip Code 1078 springwood drive Saginaw, TX 76179		Amount of Contribution (\$)	\$5.01
	Principal occu	pation / Job title (See Instructions) Employ	er (See Instructions)		
	Date 03/31/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$26.34
	Principal occu		er (See Instructions)		
		was other state ty t	6	Version V3.5.1.7b	od706d

MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE	A1	
The Instruc	ction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1:	
2 FILER NAME	Runald "Ske" Sprouls		3 Filer ID	
4 Date 03/31/2023	Date 5 Full name of contributor Quest-of-state PAC (ID#:)		7 Amount of Contribution (\$)	\$26.34
	Roanoke, TX 76262			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	·)	
Date 04/07/2023	Full name of contributor out-of-state PAC (ID#:_ Ingram, Mindy Contributor address; City; State; Zip Code 10629 Big Oak Drive Fort Worth, TX 76131		Amount of Contribution (\$)	\$10.90
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Date 03/31/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$26.34
Principal occu	Haslet, TX 76052 upation / Job title (See Instructions)	Employer (See Instructions	s)	
Date 04/23/2023	Full name of contributor out-of-state PAC (ID#: Johnson, Kate Contributor address; City; State; Zip Code 1036 Mesa Crest Drive		Amount of Contribution (\$)	\$21.13
Principal occu	Haslet, TX 76052 upation / Job title (See Instructions)	Employer (See Instruction	s)	
Date 04/05/2023	Contributor address; City; State; Zip Code 1769 Rio Penasco Road		Amount of Contribution (\$)	\$10.72
Principal occ	Haslet, TX 76052 upation / Job title (See Instructions)	Employer (See Instruction	ls)	-112
Forms provided	I by Texas Ethics Commission www.ethics	s.state.tx.us	Version V3.5.1	.7bd706a

4 Date 03/31/2023 5 Full name of contributor Medzorian, Karen 6 Contributor address; City; State; Zip Code 2741 Chatswood Dr Trophy Club, TX 76262 8 Principal occupation / Job title (See Instructions) Date 04/01/2023 Morse, Arry Contributor address; City; State; Zip Code 1363 Osborne Court Roanoke, TX 76262 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$10.7 Contributor address; City; State; Zip Code 1363 Osborne Court Roanoke, TX 76262 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$5.0 Date 04/04/2023 Amount of Contribution (\$) \$5.0 Date 04/04/2023 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$4.1 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$4.1 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULI	E A1	
4 Date 03/31/2023 5 Full name of contributor out-d-state PAC (IDR:	The Instru	ction Guide explains how to complete this fo	3045		
Section Sect	2 FILER NAME	Renald "Steve" Souls		3 Filer ID	
Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions)	4 Date	ate 5 Full name of contributor out-state PAC (ID#:) 3/31/2023 Medzorian, Karen 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$)	\$104.42
O4/01/2023 Morse, Arny Contributor address; City; State; Zip Code 1363 Osborne Court Roanoke, TX 76262 Principal occupation / Job title (See Instructions) Date O4/04/2023 Full name of contributor	8 Principal occu		9 Employer (See Instructions	5)	
Date O4/04/2023		Morse, Amy Contributor address; City; State; Zip Code 1363 Osborne Court		Amount of Contribution (\$)	\$10.72
Date O4/04/2023 Murray, Jenny Contributor address; City; State; Zip Code 3600 Hudgins Ranch Rd Roanoke, TX 76262 Principal occupation / Job title (See Instructions) Date O4/04/2023 Principal occupation / Job title (See Instructions) Date Contributor address; City; State; Zip Code 12725 Lizzie Place Fort Worth, TX 76244 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) \$4.! Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) O4/06/2023 Pry, Alyssa Contributor address; City; State; Zip Code 4128 River Birch Road Fort Worth, TX 76137	Principal occi		Employer (See Instructions	s)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Amount of Contribution (\$) \$4.! Contributor address; City; State; Zip Code 12725 Lizzie Place Fort Worth, TX 76244 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$4.! Amount of Contribution (\$) Pry, Alyssa Contributor address; City; State; Zip Code 4128 River Birch Road Fort Worth, TX 76137		Murray, Jenny Contributor address; City; State; Zip Code 3600 Hudgins Ranch Rd		Amount of Contribution (\$)	\$5.01
Date O4/04/2023 Principal occupation / Job title (See Instructions) Date O4/06/2023 Pry, Alyssa Contributor address; City; State; Zip Code 4128 River Birch Road Fort Worth, TX 76137 S4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$4.! \$5 \$4.! \$4.! \$5 \$4.! \$4.! \$5 \$6 \$6 \$4.! \$4.! \$6	Principal occ		Employer (See Instruction	s)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date 04/06/2023 Pry, Alyssa Contributor address; City; State; Zip Code 4128 River Birch Road Fort Worth, TX 76137		Nobles, Rachel Contributor address; City; State; Zip Code 12725 Lizzie Place		Amount of Contribution (\$)	\$4.51
04/06/2023 Pry, Alyssa Contributor address; City; State; Zip Code 4128 River Birch Road Fort Worth, TX 76137	Principal occ		Employer (See Instruction	us)	
		Pry, Alyssa Contributor address; City; State; Zip Code 4128 River Birch Road		Amount of Contribution (\$)	\$100.00
	Principal occ		Employer (See Instruction	ls)	
Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.7bd70				Version V2.5	1.7bd7060

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1	
	The Instru	ction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1:
2	FILER NAME	Runald "Stere" Sprous		3 Filer ID
4	Date 04/02/2023	 Full name of contributor out-of state PAC (ID#:)	7 Amount of Contribution (\$) \$50.0
8	Principal occu		Employer (See Instructions	5)
	Date 03/31/2023	Full name of contributor out-of-state PAC (ID#: Rose, Lindsay Contributor address; City; State; Zip Code 12756 Lizzie Place Fort Worth, TX 76244)	Amount of Contribution (\$) \$26.3
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Date 04/04/2023	Full name of contributor out-of-state PAC (ID#:_ Serralta, Nicole Contributor address; City; State; Zip Code 1206 Norfolk Street		Amount of Contribution (\$) \$26.3
	Principal occu	Roanoke, TX 76262 Ipation / Job title (See Instructions)	Employer (See Instruction	s)
	Date 94/23/2023 4/13/27	Full name of contributor out-of-state PAC (ID#:_Simpson, Danny Contributor address; City; State; Zip Code PO BOX 291 Roanoke, TX 76262		Amount of Contribution (\$) \$1,000.
	Principal occi	upation / Job title (See Instructions)	Employer (See Instruction	is)
	Date 04/01/2023	Full name of contributor out-of-state PAC (ID#:_ VanDorn, Erica Contributor address; City; State; Zip Code 12733 Connemara Lane Fort Worth, TX 76244		Amount of Contribution (\$) \$26.
	Principal occ	upation / Job title (See Instructions)	Employer (See Instruction	ns)
	orme provideo	by Texas Ethics Commission www.ethics	s.state.tx.us	Version V3.5.1,7bd70

ARY POLITICAL CONTRIBUTION	NS	SCHEDUL	E A1
ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1:	
Rneld "Sten" Spon	/5		
5 Full name of contributor out-of-stay PAC (ID#: Ward, Elizabeth 6 Contributor address; City; State; Zip Code 406 Austin Street		7 Amount of Contribution (\$)	\$47.27
	9 Employer (See Instructions))	
Full name of contributor out-of-state PAC (ID#:_ Washam, Joseph A Contributor address; City; State; Zip Code 9310 Avery Ranch Way		Amount of Contribution (\$)	\$469.86
	Employer (See Instructions)	
Contributor address; City; State; Zip Code 4741 S FM 14)	Amount of Contribution (\$)	\$104.42
	Employer (See Instructions))	
Contributor address; City; State; Zip Code 1540 Westview Lane)	Amount of Contribution (\$)	\$10.72
	Employer (See Instructions	5)	
Tayon Pablos Commission What ethics	s state fx.us	Version V3.5	.1.7bd706d
	5 Full name of contributor out-of-state PAC (ID#:_Ward, Elizabeth 6 Contributor address; City; State; Zip Code 406 Austin Street Roanoke, TX 76262 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_Washam, Joseph A Contributor address; City; State; Zip Code 9310 Avery Ranch Way Justin, TX 76247 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_Wright, Joshua Contributor address; City; State; Zip Code 4741 S FM 14 Hawkins, TX 75765 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_Young, Jessica Contributor address; City; State; Zip Code 1540 Westview Lane Northlake, TX 76226 Ipation / Job title (See Instructions)	ction Guide explains how to complete this form. Stear	tion Guide explains how to complete this form. 1 Total pages Schedule A1:

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

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

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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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Ronald "Steve" Sprowls		3 Filer ID (Ethica	s Commission Filers)
4 Date 4/13/23	5 Payee name Speak Easy Political			
6 Amount (\$) 4447.00	7 Payee address; 1902 Van Ness Ave San Francisco, CA 94109	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Mailers		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name H n/a	Office sought		Office held
Date various thru 4/23/23	Payee name Donorbox			
Amount (\$) 65.94	Payee address; 601 King St, Suite 200 Alexandria, VA 22314	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Credit Card M	lerchant Fees	;
	Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name ' n/a	Office sought		Office held
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living	
Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	
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SCHEDULE F4

Revised 8/17/2020

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

		EXPENDITURE CA	ATEGORIES	FOR B	OX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services	Office Ov Polling E se Printing E Salaries/	erhead/Rexpense Expense Mages/Co	eimbursement ental Expense entract Labor	Tra Tra Tra	vel In District vel Out Of Distric	ment & Related Expense
		The Instruction Gulde e	xplains how to	complete	e this form.	T _		
1 Total pages Schedule F4:	2 FILER I	NAME "Steve" Sprowls						Commission Filers)
4 TOTAL OF UNITEM	IZED EXP	ENDITURES CHAR	SEDTOAC	REDIT	CARD	\$	290 5.7 5	2806.55
5 Date	6 Payee r							
3/29/23	Print Pla	ce						
7 Amount (\$) 359.39	8 Payee 1130 Ave Arlington				City;		State;	Zip Code
9 TYPE OF EXPENDITURE	■ F	Political	Non-F	olitical				
10 PURPOSE OF EXPENDITURE		(See Categories listed at the topsing Expense	of this schedule)	(b) I Flye	Description PFS			
	(c)	Check if travel outside of Texas. Co	mplete Schedule T.		Check if Au	ustin, TX	, officeholder livin	g expense
11 Complete ONLY if direct expenditure to benefit C/OH	Cand n/a	didate / Officeholder nam	e	Office so	ought		Office h	neld
Date 3/30/23	Payee Lonestar	name Campaign Mana	gement					
Amount (\$) 387.00	312 Ran	address; nbling Ct TX 76039			City;		State;	Zip Code
TYPE OF EXPENDITURE	■ F	Political	Non-l	Political				
PURPOSE OF EXPENDITURE	_	y (See Categories listed at the to ing Expense	o of this schedule)		Description npaign M	gmt		
ZXI ZIIDII OIL		Check if travel outside of Texas. Co	omplete Schedule T.		Check if A	ustin, TX	K, officeholder livir	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can-	didate / Officeholder nam	e	Office so	ought		Office h	neld
	ATTAC	H ADDITIONAL COPI	ES OF THIS	SCHED	ULE AS NE	EDEI	0	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica	al Committee Legal Services Salar The Instruction Guide explains how	to complete this form.	Other (Giller & Category Not listed above)
1 Total pages Schedule F4:	2 FILER NAME Ronald "Steve" Sprowls		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A	CREDIT CARD	\$ 2905.75 2 906.55
5 Date 4/5/23	6 Payee name Discount Banners & Signs		
	8 Payee address; 411 N Main St Keller, TX 76248	City;	State; Zip Code
9 TYPE OF EXPENDITURE	Political No	n-Political	,
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Advertising Expense	(b) Description Road Signs	
	(c) Check if travel outside of Texas. Complete Schedule	T. Check if Au	ustin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name n/a	Office sought	Office held
Date	Payee name Lonestar Campaign Management		
4/13/23 Amount (\$)	Payee address;	City;	State; Zip Code
260.00	312 Rambling Ct Euless, TX 76039		
TYPE OF EXPENDITURE	Political No.	on-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedu Consulting Expense	Description Campaign M	lgmt
	Check if travel outside of Texas. Complete Schedul	eT. Check if A	ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name n/a	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NE	
			Davised 9/47/2020

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Contributions/Donations Made By Candidate/Officeholder/Politica	l Committee Legal Services Salanes/V	Vages/Contract Labor	Other (enter a category not listed above)
	The Instruction Guide explains how to o	complete this form.	O File (D) (Files Commission Filess)
1 Total pages Schedule F4:	2 FILER NAME Ronald "Steve" Sprowls		3 Filer ID (Ethics Commission Filers)
TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CF	REDIT CARD	\$ 2905.75 2906.55
5 Date	6 Payee name		
/13/23	Discount Banners & Signs		
7 Amount (\$)	8 Payee address;	City;	State; Zip Code
	411 N Main St Keller, TX 76248		
TYPE OF EXPENDITURE	Political Non-P	olitical	
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising Expense	Road Signs	
EXPENDITURE	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Au	stin, TX, officeholder living expense
IT Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name on/a	Office sought	Office held
Date	Payee name Lonestar Campaign Management		
4/16/23		City;	State; Zip Code
Amount (\$) 154.00	Payee address; 312 Rambling Ct	Olly,	
104.00	Euless, TX 76039		
TYPE OF EXPENDITURE	Political Non-F	Political	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Consulting Expense	Campaign M	gmt
LAFENDITORE	Check if travel outside of Texas, Complete Schedule T.	Check if A	ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name n/a	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED
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SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(a) Solicitation/Fundraising Expense Loan Repayment/Reimbursement Event Expense Advertising Expense Transportation Equipment & Related Expense Office Overhead/Rental Expense Polling Expense Accounting/Banking Travel In District Food/Beverage Expense Consulting Expense Travel Out Of District Gift/Awards/Memorials Expense Printing Expense Contributions/Donations Made By Other (enter a category not listed above) Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule F4: Ronald "Steve" Sprowls 40,65 \$ 2905.75 2906.55 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name 5 Date Speak Easy Political 4/13/23 Zip Code City; State: 8 Payee address; 7 Amount (\$) 1902 Van Ness Ave 825.80 San Francisco, CA 94109 TYPE OF Non-Political Political EXPENDITURE (b) Description (a) Category (See Categories listed at the top of this schedule) 10 Digital Ads Advertising Expense **PURPOSE** OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. (c) Office held Office sought Candidate / Officeholder name Complete ONLY if direct n/a expenditure to benefit C/OH Payee name Date Lonestar Campaign Management 4/20/23 State; Zip Code City; Payee address; Amount (\$) 312 Rambling Ct 80.00 Euless, TX 76039 TYPE OF Non-Political Political EXPENDITURE Description Category (See Categories listed at the top of this schedule) Road Sign T-posts Advertising Expense PURPOSE OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Office held Candidate / Officeholder name Office sought Complete ONLY if direct n/a expenditure to benefit C/OH

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EXPENDITURE CATEGORIES FOR BOX 10(a) Solicitation/Fundraising Expense Loan Repayment/Reimbursement Event Expense Advertising Expense Transportation Equipment & Related Expense Office Overhead/Rental Expense Accounting/Banking Travel In District Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Consulting Expense Travel Out Of District Printing Expense Contributions/Donations Made By Other (enter a category not listed above) Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule F4: Ronald "Steve" Sprowls 500 2905.75 2906.55 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name 5 Date Square Space 4/22/23 Zíp Code State: 8 Payee address; City; 7 Amount (\$) 225 Varick St, 12th Floor 24.90 New York, NY 10014 TYPE OF Non-Political Political EXPENDITURE (b) Description (a) Category (See Categories listed at the top of this schedule) 10 Website Advertising Expense PURPOSE OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. (c) Office held Office sought Candidate / Officeholder name Complete ONLY if direct n/a expenditure to benefit C/OH Payee name Date State; Zip Code City; Payee address; Amount (\$) TYPE OF Non-Political П Political EXPENDITURE Description Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas, Complete Schedule T. Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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