

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:  
28

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mr

Ryan

J

NICKNAME

LAST

SUFFIX

Timm

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

[REDACTED] Midlothian, TX 76065

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 214 )

263-4596

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mr

James

NICKNAME

LAST

SUFFIX

Foshea

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

[REDACTED] X 76065

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 972 )

765-6276

9 REPORT TYPE

☐

January 15

☒

30th day before election

☐

Runoff

☐

15th day after campaign  
treasurer appointment  
(Officeholder Only)

☐

July 15

☐

8th day before election

☐

Exceeded Modified  
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

1

/

1

/

24

THROUGH

Month

Day

Year

3

/

25

/

24

11 ELECTION

ELECTION DATE

Month

Day

Year

5

/

4

/

24

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other  
Description

☒

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Midlothian ISD School Board Place 3

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐

GENERAL

COMMITTEE ADDRESS

☐

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

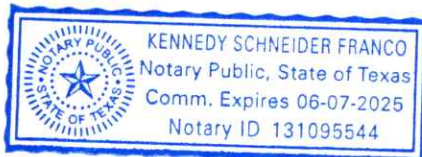
<b>15 C/OH NAME</b> Ryan J Timm		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 673.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,814.39
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,332.73
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,481.66
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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

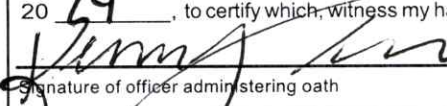
Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Ryan J Timm this the 4<sup>th</sup> day of April, 2024, to certify which, witness my hand and seal of office.

  
Signature of officer administering oath

Kennedy Franco  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

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

<b>19 FILER NAME</b> Ryan J Timm		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,141.39
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	\$ 280.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 6,052.73
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: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Robin Kelm 6 Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	7 Amount of contribution (\$)  98.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor out-of-state PAC (ID#: _____) Monica Wolf Contributor address; City; State; Zip Code [REDACTED] TX 76065	Amount of contribution (\$)  24.43
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor out-of-state PAC (ID#: _____) Logan Gaddis Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  490.40
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor out-of-state PAC (ID#: _____) Kelsy Lopez Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  14.62
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Zach Urquhart 6 Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	7 Amount of contribution (\$)  48.95
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor out-of-state PAC (ID#: _____) Amanda Bradshaw Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  98.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2024	Full name of contributor out-of-state PAC (ID#: _____) Ross Weaver Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  98.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor out-of-state PAC (ID#: _____) Emily Durbin Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  68.57
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**2 FILER NAME**

### 3 Filer ID (Ethics Commission Filers)

**5 Full name of contributor**

7 Amount of contribution (\$)

**6 Contributor address;**

**State;**

Zip Code

68.57

**9 Employer (See Instructions)**

Full name of contributor

Amount of contribution (\$)

Holly Guest

**Contributor address:**

City:

State;

Zip Code

68.57

Employer (See Instructions)

Full name of contributor

Amount of contribution (\$)

Josh Howard

Contributor address:

City:

**State:**

**Zip Code**

34.24

Employer (See Instructions)

Full name of contributor

Amount of contribution (\$)

Stacy Germany

Contributor address:

City:

State;

Zip Code

196.10

Employer (See Instructions)

**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: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Shannon Henderson 6 Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	7 Amount of contribution (\$)  44.05
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/28/2024	Full name of contributor out-of-state PAC (ID#: _____) Kelli Howard Contributor address; City; State; Zip Code [REDACTED] TX 76065	Amount of contribution (\$)  44.05
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/28/2024	Full name of contributor out-of-state PAC (ID#: _____) Brana Rope Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 7	Amount of contribution (\$)  98.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/28/2024	Full name of contributor out-of-state PAC (ID#: _____) Trent Ballard Contributor address; City; State; Zip Code [REDACTED] TX 76084	Amount of contribution (\$)  78.29
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>18</b>
2 FILER NAME <b>Ryan J Timm</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/28/2024</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Holly Guest</b> 6 Contributor address; City; State; Zip Code [REDACTED] <b>Midlothian, TX 76065</b>	7 Amount of contribution (\$) <b>42.05</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>02/28/2024</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Lindsey Fowler</b> Contributor address; City; State; Zip Code [REDACTED] <b>Waxahachie, TX 75110</b>	Amount of contribution (\$) <b>19.52</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>02/29/2024</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Lance McIlvain</b> Contributor address; City; State; Zip Code [REDACTED] <b>Midlothian, TX 76065</b>	Amount of contribution (\$) <b>24.43</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>03/01/2024</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Maurie Goss</b> Contributor address; City; State; Zip Code [REDACTED] <b>Midlothian, TX 76065</b>	Amount of contribution (\$) <b>19.52</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/02/2024	5 Full name of contributor out-of-state PAC (ID#: Marie Medina 6 Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	7 Amount of contribution (\$)  48.95
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/02/2024	Full name of contributor out-of-state PAC (ID#: Judy Walling Contributor address; City; State; Zip Code [REDACTED] Ovilla, TX 75154	Amount of contribution (\$)  147.05
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2024	Full name of contributor out-of-state PAC (ID#: Adam Villaral Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX	Amount of contribution (\$)  68.57
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2024	Full name of contributor out-of-state PAC (ID#: Kim Garner Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 7	Amount of contribution (\$)  34.24
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.		

## SCHEDULE A1

**1 Total pages Schedule A1:**  
**18**

### 3 Filer ID (Ethics Commission Filers)

400.00

98.00

575.00

300.00

Revised 1/1/2024

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

18

Ryan J Timm

03/16/2024

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

Thomas Mitchell

City: State: Zip Code

Midlothian, TX 76

294.20

**9 Employer (See Instructions)**

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

03/16/2024

**Candice Zear**

City; State; Zip Code

Midlothian, TX 76065

78.38

Employer (See Instructions)

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

03/16/2024

Christina Crocker

City: State: Zip Code

Midlothian, TX 7

98.00

Employer (See Instructions)

out-of-state PAC (ID#):

03/16/2024

## Clay Guest

City; State; Zip Code

Midlothian, TX

343.25

Employer (See Instructions)

**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: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor out-of-state PAC (ID#: _____) CJ Petty 6 Contributor address; City; State; Zip Code [REDACTED] TX 76009	7 Amount of contribution (\$)  245.15
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) David Petty Contributor address; City; State; Zip Code [REDACTED] TX 7516	Amount of contribution (\$)  147.05
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Brandon Reichenau Contributor address; City; State; Zip Code [REDACTED] TX 76064	Amount of contribution (\$)  245.15
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Michael Hanson Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX	Amount of contribution (\$)  19.52
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Matthew Creech 6 Contributor address: _____ City: _____ State: _____ Zip Code Midlothian, TX 76065	7 Amount of contribution (\$)  34.24
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Ty Sherrell State: _____ Zip Code TX 76065	Amount of contribution (\$)  98.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Brent Thomas State: _____ Zip Code TX 76065	Amount of contribution (\$)  9.71
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Chad Self State: _____ Zip Code TX 76065	Amount of contribution (\$)  34.24
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Daniel Pearce 6 Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	7 Amount of contribution (\$)  98.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Zach Urquhart Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  34.24
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Charlie Priddy Contributor address; City; State; Zip Code [REDACTED] TX 75088	Amount of contribution (\$)  48.95
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Scott Koehler Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX	Amount of contribution (\$)  98.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor April Norris out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	7 Amount of contribution (\$) 34.24
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor Logan Owensby out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$) 29.34
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor Brice Cheek out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$) 34.24
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor Brett Perry out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$) 58.76
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: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Jenna Allen Hungaski 6 Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	7 Amount of contribution (\$)  122.53
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Ryan Norris Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  78.38
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Hollye Walker Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX 76065	Amount of contribution (\$)  34.24
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Casey Harding Contributor address; City; State; Zip Code [REDACTED], TX 76065	Amount of contribution (\$)  196.10
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		



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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Toia Stevenson 6 Contributor address: _____ City: _____ State: _____ Zip Code _____ Midlothian, TX 76065	7 Amount of contribution (\$) 39.14
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Shannon Southward Contributor address: _____ City: _____ State: _____ Zip Code _____ TX 76065	Amount of contribution (\$) 34.24
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Heidi MacDonald Contributor address: _____ City: _____ State: _____ Zip Code _____ TX 76065	Amount of contribution (\$) 24.43
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Faira Rhodes Contributor address: _____ City: _____ State: _____ Zip Code _____ TX 76065	Amount of contribution (\$) 19.52
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: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor Kathryn Tutt out-of-state PAC (ID#: _____) 6 Contributor address: _____ City: _____ State: _____ Zip Code TX 760	7 Amount of contribution (\$) 19.52
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor Jennifer Neystel out-of-state PAC (ID#: _____) Contributor address: _____ City: _____ State: _____ Zip Code 76065	Amount of contribution (\$) 39.14
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor Lacy Torres out-of-state PAC (ID#: _____) Contributor address: _____ City: _____ State: _____ Zip Code TX 760	Amount of contribution (\$) 98.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor Blane Rogers out-of-state PAC (ID#: _____) Contributor address: _____ City: _____ State: _____ Zip Code TX 760	Amount of contribution (\$) 53.86
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: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor out-of-state PAC (ID#: _____) John Freeman 6 Contributor address: _____ City: _____ State: _____ Zip Code TX 76065	7 Amount of contribution (\$)  48.95
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Donald Pruett Contributor address: _____ City: _____ State: _____ Zip Code TX 76065	Amount of contribution (\$)  19.52
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Jessica Payne Contributor address: _____ City: _____ State: _____ Zip Code Midlothian, TX	Amount of contribution (\$)  196.10
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Sonia Garcia Contributor address: _____ City: _____ State: _____ Zip Code Midlothian, TX	Amount of contribution (\$)  39.14
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Ryan J Timm		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Brooke Petty 6 Contributor address; City; State; Zip Code [REDACTED] TX 7516	7 Amount of contribution (\$) 44.05
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Lance McIlvain Contributor address; City; State; Zip Code [REDACTED] TX 76065	Amount of contribution (\$) 235.35
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Emily Durbin Contributor address; City; State; Zip Code [REDACTED] Midlothian, TX	Amount of contribution (\$) 44.05
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Sarah McDonald Contributor address; City; State; Zip Code [REDACTED] TX 76064	Amount of contribution (\$) 43.10
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>18</b>
2 FILER NAME <b>Ryan J Timm</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>03/16/2024</b>	5 Full name of contributor out-of-state PAC (ID#: <b>Nancy Najera</b> 6 Contributor address; City; State; Zip Code <b>TX 76065</b>	7 Amount of contribution (\$) <b>44.05</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>03/16/2024</b>	Full name of contributor out-of-state PAC (ID#: <b>Stephanie Frankiewicz</b> Contributor address; City; State; Zip Code <b>TX 76065</b>	Amount of contribution (\$) <b>44.05</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>03/16/2024</b>	Full name of contributor out-of-state PAC (ID#: <b>Brandi Vess</b> Contributor address; City; State; Zip Code <b>TX 76065</b>	Amount of contribution (\$) <b>147.05</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>03/16/2024</b>	Full name of contributor out-of-state PAC (ID#: <b>Leslie Villarrial</b> Contributor address; City; State; Zip Code <b>TX 76065</b>	Amount of contribution (\$) <b>44.05</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1	2 FILER NAME Ryan J Timm	3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2024	5 Payee name Strait Haggard Thread Co	
6 Amount (\$) 280.00	7 Payee address; City; State; Zip Code 1601 Melanie Trl, Midlothian, TX 76065	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Timm 4 Teachers Hats
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6	2 FILER NAME Ryan J Timm	3 Filer ID (Ethics Commission Filers)
4 Date 02/16/2024	5 Payee name Strait Haggard Thread Co	
6 Amount (\$) 440.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1601 Melanie Trl, Midlothian, TX 76065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Timm 4 Teachers Hats
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 02/22/2024	Payee name Kolby Lane Designs	
Amount (\$) 1,721.18 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1613 Plum Creek Dr, Midlothian, TX 76065	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description T-shirts
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 02/22/2024	Payee name First Graphic Services, Inc.	
Amount (\$) 579.57 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 229 Garvon St., Garland, TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Yard signs & banner
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6	2 FILER NAME Ryan J Timm	3 Filer ID (Ethics Commission Filers)
4 Date 02/23/2024	5 Payee name Midlothian Chamber of Commerce	
6 Amount (\$) 75.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 116 N. 8th St, Midlothian, TX 76065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Wine Walk Booth
	(c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
Date 02/29/2024	Payee name First Graphic Services, Inc.	
Amount (\$) 660.76 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 229 Garvon St., Garland, TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Yard signs & banner
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
Date 03/04/2024	Payee name Kolby Lane Designs	
Amount (\$) 796.18 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1613 Plum Creek Dr., Midlothian, TX 76065	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Sweatshirts
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6	2 FILER NAME Ryan J Timm	3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2024	5 Payee name First Graphic Services, Inc.	
6 Amount (\$) 622.44 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 229 Garvon St., Garland, TX 75040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Large signs
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 03/11/2024	Payee name Amazon.com	
Amount (\$) 119.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 410 Terry Ave N, Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Event supplies
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 03/12/2024	Payee name Home Depot-Waxahachie	
Amount (\$) 231.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1315 N Hwy 77, Waxahachie, TX 75165	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description T-posts for large signs
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6	2 FILER NAME Ryan J Timm	3 Filer ID (Ethics Commission Filers)
4 Date 03/13/2024	5 Payee name RE/MAX Midlothian	
6 Amount (\$) 300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 803 W Main St, Midlothian, TX 76065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Client Appreciation Event Sponsor
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 03/14/2024	Payee name Strait Haggard Thread Co	
Amount (\$) 160.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Melanie Trl, Midlothian, TX 76065	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Timm 4 Teachers Hats
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH		
Date 03/15/2024	Payee name First Graphic Services, Inc.	
Amount (\$) 13.53 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 229 Garvon St., Garland, TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description H-frames for yard signs
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6	2 FILER NAME Ryan J Timm	3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2024	5 Payee name ACE Hardware	
6 Amount (\$) 45.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 530 E Main St, Midlothian, TX 76065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Event supplies
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
Date 03/20/2024	Payee name Isaac Lebron/The Ellis Talker Show	
Amount (\$) 200.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Withheld for Confidentiality-Form 50-284 on file with Texas Comptroller	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Social media interview boost
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
Date 03/25/2024	Payee name Amazon.com	
Amount (\$) 17.73 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 410 Terry Ave N, Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Event supplies
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>6</b>	2 FILER NAME <b>Ryan J Timm</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>03/25/2024</b>	5 Payee name <b>BalloonsDirect.com</b>	
6 Amount (\$) <b>70.65</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>7405-D Lockport Pl, Lorton, VA 22079</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description <b>Event supplies</b>
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)  Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)  Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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