

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	2 Total pages filed: 29
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST John	MI
	NICKNAME	LAST Hill	SUFFIX
OFFICE USE ONLY			
Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	P.O. BOX 1660		
	SHERMAN, TX 75091		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST CLINT	MI A.
	NICKNAME	LAST LONG	SUFFIX MD
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	2203 FM 1417 SHERMAN, TEXAS 75092		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		903-892-2020	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	07/01/2024		09/26/2024
10 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 11/05/2024	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
			District Attorney Place Sherman District GRAYSON
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 29

13 C / OH NAME Hill, John	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.					
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	<table border="1" style="width:100%"> <tr> <td style="width:100%">COMMITTEE NAME</td> </tr> <tr> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE NAME	COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE NAME						
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)	\$ 12,245.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,232.26
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
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.

X *[Signature]*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE


Sworn to and subscribed before me, by the said John Kermit Hill, this the 7th day of October, 2024, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering

Karen Parthie
Printed name of officer administering

Notary Public
Title of officer administering oath

KAREN DAWANNA PARTHE
Notary Public, State of Texas
Comm. Expires 08-08-2027
Notary ID 134348873

The seal is circular with a five-pointed star in the center. The words "NOTARY PUBLIC" are written around the top inner edge of the circle, and "STATE OF TEXAS" is written around the bottom inner edge. The number "13" is located at the bottom center of the seal.

SUBTOTALS - C/OH

18 FILER NAME Hill, John		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,795.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,450.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 4,724.85
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 14,232.26
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 1,000.00
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: 4/29
2 FILER NAME Hill, John		3 Filer ID
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNIE, TONY	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 5275 DUGAN CHAPEL ROAD BELLS, TX 75414		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, BRAD	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 2400 MEADOWS LANE SHERMAN, TX 75092		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNAFORD, SUSAN	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 2609 BROWN DEER TRAIL PLANO, TX 75023		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDIN, JOHN C.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 2100 W. WHITE STREET ANNA, TX 75409		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, BILL	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 121 S. AUSTIN AVE DENISON, TX 75020		
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: 5/29
2 FILER NAME Hill, John		3 Filer ID
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, BILL	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 121 S. AUSTIN AVE. DENISON, TX 75020		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARR, JOSH	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 108 PROVIDENCE DRIVE VAN ALSTYNE, TX 75495		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, KARLA	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 513 CASSANDRA STREET HOWE, TX 75459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAEL, DENNIS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code P.O. BOX 1052 SHERMAN, TX 75091		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNSON, PETER	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 123 S. TRAVIS STREET SHERMAN, TX 75090		
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: 6/29
2 FILER NAME Hill, John		3 Filer ID
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRIN, TIM	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 112 PUMPING JACK ROAD SHERMAN, TX 75092		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUCKETT, KATHRYN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1223 PITCHFORK ROAD HOWE, TX 75459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REPUBLICAN PARTY OF TEXAS	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 807 BRAZOS STREET AUSTIN, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, BRIAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code 3164 HARRELL ROAD HOWE, TX 75459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELZ, PETER	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4909 AMBERGATE LANE SHERMAN, TX 75092		
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: 7/29
2 FILER NAME Hill, John		3 Filer ID
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, AMANDA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 610 GAYLE CIRCLE BELLS, TX 75414		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, WILLIAM	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 1406 HANGING ROCK TR GUNTER, TX 75058		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYLER, TERRY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 113 LAKE MEADOW LOOP RD DURANT, OK 74701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, BEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 625 VERNA LANE DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JEFF	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 225 N. CROCKETT ST Sherman, TX 75090		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/29	
2 FILER NAME Hill, John		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/29/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILL SMITH'S CAFE	8 Amount of contribution (\$) \$1,000.00	9 In-kind contribution description EVENT VENUE/FOOD & BEVERAGES
7 Contributor address; City; State; Zip Code 233 E. JEFFERSON ST VAN ALSTYNE, TX 75495			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, CLINT A.	Amount of contribution (\$) \$450.00	In-kind contribution description USE OF TRUCK FOR ADVERTISING AND SIGN PLACEMENT
Contributor address; City; State; Zip Code 2303 FM HWY 1417 SHERMAN, TX 75092			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN COUNTRY CLUB	Amount of contribution (\$) \$1,000.00	In-kind contribution description EVENT VENUE/FOOD & BEVERAGES
Contributor address; City; State; Zip Code 25 COUNTRY CLUB DR SHERMAN, TX 75092			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

GRAYSON CO ELECTIONS
2024 OCT 7 PM3:51:11

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/8 Rpt: 9/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 07/18/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JOHN	9 Loan Amount (\$) \$84.83
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 08/29/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JOHN KERMIT	Loan Amount (\$) \$97.45
Is lender a financial institution? No	Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 2/8 Rpt: 10/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 08/21/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, John	9 Loan Amount (\$) \$31.68
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 09/20/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	Loan Amount (\$) \$71.45
Is lender a financial institution? No	Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 3/8 Rpt: 11/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 07/31/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	9 Loan Amount (\$) \$41.20
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 07/03/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	Loan Amount (\$) \$68.08
Is lender a financial institution? No	Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 4/8 Rpt: 12/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 07/05/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	9 Loan Amount (\$) \$66.15
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 08/28/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	Loan Amount (\$) \$449.24
Is lender a financial institution? No	Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 5/8 Rpt: 13/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 08/27/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	9 Loan Amount (\$) \$3,000.42
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 08/26/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	Loan Amount (\$) \$63.38
Is lender a financial institution? No	Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 6/8 Rpt: 14/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 08/15/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	9 Loan Amount (\$) \$34.94
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 08/04/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	Loan Amount (\$) \$370.00
Is lender a financial institution? No	Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 7/8 Rpt: 15/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 09/09/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	9 Loan Amount (\$) \$176.57
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 09/13/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	Loan Amount (\$) \$50.55
Is lender a financial institution? No	Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 8/8 Rpt: 16/29
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 09/20/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, John	9 Loan Amount (\$) \$118.91
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 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: 1/12 Rpt: 17/29		2 FILER NAME Hill, John		3. Filer ID	
4 Date 09/24/2024		5 Payee name ALBERTSON'S			
6 Amount (\$) \$73.00		7 Payee address; City; State; Zip Code 100 E TAYLOR STREET SHERMAN, TX 75092			
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 FOOD EXPENSE FOR SPONSORED EVENT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/26/2024		Payee name ALBERTSON'S			
Amount (\$) \$63.38		Payee address; City; State; Zip Code 100 E TAYLOR STREET SHERMAN, TX 75092			
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 FOOD/DRINKS SPONSORED EVENT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 07/09/2024		Payee name AT&T			
Amount (\$) \$68.96		Payee address; City; State; Zip Code 205 S. AKARD DALLAS, TX 75201			
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 CAMPAIGN PHONE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		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: 2/12 Rpt: 18/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 08/09/2024	5 Payee name AT&T	
6 Amount (\$) \$68.96	7 Payee address; City; State; Zip Code 205 S. AKARD DALLAS, TX 75201	
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 CAMPAIGN PHONE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name AT&T	
Amount (\$) \$68.97	Payee address; City; State; Zip Code 205 S. AKARD DALLAS, TX 75201	
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 CAMPAIGN PHONE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name BILL SMITH'S CAFE	
Amount (\$) \$41.20	Payee address; City; State; Zip Code 233 E. JEFFERSON ST. VAN ALSTYNE, TX 75495	
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 SPONSORED EVENT
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: 3/12 Rpt: 19/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 08/04/2024	5 Payee name CHILDREN OF IRVING POLICE OFFICERS	
6 Amount (\$) \$370.00	7 Payee address; City; State; Zip Code 600 W Pioneer Dr. IRVING, TX 75061	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 TICKETS TO EVENT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name COURTNEY MITCHELL PHOTOGRAPHY	
Amount (\$) \$176.57	Payee address; City; State; Zip Code 217 S. TRAVIS STREET SHERMAN, TX 75090	
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 CAMPAIGN PHOTOS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 07/26/2024	Payee name DOLLAR GENERAL STORES	
Amount (\$) \$5.95	Payee address; City; State; Zip Code 1704 FM 1417 SHERMAN, TX 75092	
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
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: 4/12 Rpt: 20/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 07/05/2024	5 Payee name EL PUEBLITO	
6 Amount (\$) \$66.15	7 Payee address; City; State; Zip Code 901 SPRING CREEK PLANO, TX 75023	
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 CAMPAIGN MEETING
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/21/2024	Payee name FIRST GRAPHICS	
Amount (\$) \$3,000.42	Payee address; City; State; Zip Code 229 GARVON ST GARLAND, TX 75040	
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 CAMPAIGN SIGNS AND MATERIALS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/27/2024	Payee name FIRST GRAPHICS	
Amount (\$) \$3,000.42	Payee address; City; State; Zip Code 229 GARVON STREET GARLAND, TX 75040	
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 CAMPAIGN SIGNS
	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: 5/12 Rpt: 21/29		2 FILER NAME Hill, John		3 Filer ID	
4 Date 09/20/2024		5 Payee name FRANK & LOLA'S			
6 Amount (\$) \$71.45		7 Payee address; City; State; Zip Code 227 W. CHESTNUT DENISON, TX 75020			
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 CAMPAIGN MEETING FOR SOCIAL MEDIA VIDEO	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/15/2024		Payee name FRANK & LOLA'S			
Amount (\$) \$34.94		Payee address; City; State; Zip Code 227 W. CHESTNUT DENISON, TX 75020			
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 CAMPAIGN MEETING	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/03/2024		Payee name HOULIHAN'S			
Amount (\$) \$68.08		Payee address; City; State; Zip Code 3120 TOWN CENTER DENTON, TX 76201			
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 CAMPAIGN MEETING	
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: 6/12 Rpt: 22/29		2 FILER NAME Hill, John		3 Filer ID	
4 Date 08/19/2024		5 Payee name LOWE'S			
6 Amount (\$) \$377.19		7 Payee address; City; State; Zip Code 2801 N HWY 75 SHERMAN, TX 75090			
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 MATERIALS FOR LARGE CAMPAIGN SIGNS	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/13/2024		Payee name La Hacienda Mexican Grill			
Amount (\$) \$50.55		Payee address; City; State; Zip Code 2500 U.S. HWY 82 WHITESBORO, TX 76273			
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 CAMPAIGN MEETING/SIGN LOCATION	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/28/2024		Payee name MAC'S SHIRTS & MORE			
Amount (\$) \$449.24		Payee address; City; State; Zip Code 213 E LAMAR ST SHERMAN, TX 75090			
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 TSHIRTS	
Complete ONLY 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: 7/12 Rpt: 23/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 08/26/2024	5 Payee name MG's RESTAURANT	
6 Amount (\$) \$30.52	7 Payee address; City; State; Zip Code 1715 N. WOODS SHERMAN, TX 75092	
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 CAMPAIGN MEETING
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/19/2024	Payee name MOM'S BAKERY	
Amount (\$) \$84.00	Payee address; City; State; Zip Code 1703 N WOODS ST SHERMAN, TX 75092	
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 FOOD FOR SPONSORED EVENT
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/29/2024	Payee name OFFICE DEPOT	
Amount (\$) \$18.93	Payee address; City; State; Zip Code 4015 N HWY 75 SHERMAN, TX 75090	
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 SUPPLIES FOR SPONSORED EVENT
	9 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: 8/12 Rpt: 24/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 08/19/2024	5 Payee name PAYPAL	
6 Amount (\$) \$17.05	7 Payee address; City; State; Zip Code 2211 N 1ST STREET SAN JOSE, CA 95131	
8 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 ACH FEES
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/25/2024	Payee name QUATTRO CREATIVE	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 1506 N. ALEXANDER ST SHERMAN, TX 75092	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SOCIAL MEDIA MANAGER SERVICES
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/29/2024	Payee name QUIK TRIP	
Amount (\$) \$97.45	Payee address; City; State; Zip Code 3624 S. HWY 75 SHERMAN, TX 75092	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 GAS
	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: 9/12 Rpt: 25/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 08/05/2024	5 Payee name SAGE CAFE	
6 Amount (\$) \$62.39	7 Payee address; City; State; Zip Code 210 W HOUSTON SHERMAN, TX 75090	
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 CAMPAIGN MEETING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/18/2024	Payee name SAGE CAFE	
Amount (\$) \$84.83	Payee address; City; State; Zip Code 210 W. HOUSTON ST SHERMAN, TX 75090	
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 CAMPAIGN MEETING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name SAM'S CLUB	
Amount (\$) \$31.68	Payee address; City; State; Zip Code 3333 N. HWY 75 N SHERMAN, TX 75090	
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 SPONSORED EVENT
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: 10/12 Rpt: 26/29		2 FILER NAME Hill, John		3 Filer ID	
4 Date 08/16/2024		5 Payee name SWAGGLETOOTH			
6 Amount (\$) \$1,420.86		7 Payee address; City; State; Zip Code 5 GREENS COURT FRISCO, TX 75034			
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 CAMPAIGN APPAREL AND MERCHANDISE	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/26/2024		Payee name TARGET			
Amount (\$) \$70.36		Payee address; City; State; Zip Code 4160 TOWN CENTER DRIVE SHERMAN , TX 75092			
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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/29/2024		Payee name THE BALLOON SPOT			
Amount (\$) \$241.50		Payee address; City; State; Zip Code 315 N TRAVIS STREET #C7 SHERMAN, TX 75090			
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 DECORATIONS FOR SPONSORED EVENT	
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: 11/12 Rpt: 27/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 08/19/2024	5 Payee name TRACTOR SUPPLY	
6 Amount (\$) \$486.00	7 Payee address; City; State; Zip Code 3201 N. HWY 75 SHERMAN, TX 75090	
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 T-POSTS FOR LARGE CAMPAIGN SIGNS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/16/2024	Payee name VISTAPRINT	
Amount (\$) \$74.67	Payee address; City; State; Zip Code 95 HAYDEN DR LEXINGTON, ME 02421	
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 PRINTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name WHITESBORO AREA CHAMBER OF COMMERCE	
Amount (\$) \$130.00	Payee address; City; State; Zip Code 2535 US-82 SUITE C WHITESBORO, TX 76273	
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 SPONSORSHIP FEE
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: 12/12 Rpt: 28/29	2 FILER NAME Hill, John	3 Filer ID
4 Date 09/12/2024	5 Payee name YETI ONLINE	
6 Amount (\$) \$207.68	7 Payee address; City; State; Zip Code 7601 Southwest Parkway AUSTIN, TX 78735	
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 CAMPAIGN MERCHANDISE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/20/2024	Payee name YETI ONLINE	
Amount (\$) \$118.91	Payee address; City; State; Zip Code 7601 Southwest Parkway AUSTIN, TX 78735	
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 PROMOTIONAL MERCHANDISE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 1/1 Rpt: 29/29	2 FILER NAME Hill, John	3 Filer ID
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 09/01/2024	6 Payee name QUATRO CREATIVE
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7 Amount (\$) \$1,000.00	8 Payee address; City; State; Zip Code 1506 N. ALEXANDER SHERMAN, TX 75092
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SOCIAL MEDIA SERVICES MANAGER
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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