CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to complete this	s form.		2 Total pages filed: 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRS Davi NICKNAME LAST Linde	d		OFFICE USE ONLY Date Received 7-15-24 OYCE HUDMAN, NTOCIARK, BRAZOMA CO., TEX.
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUIT 316 Jamison Dr. Angleton, TX 77515	E#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed
		-		Date Imaged
5 CAMPAIGN TREASURER NAME		ivid	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX F 316 Jan Angleton		77515	STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM	IBER EXTENSION		
8 REPORT TYPE		h day before election	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2024	THROUGH	Month Day 06/30/2024	Year
10 ELECTION	ELECTION DATE Month Day Year	Primary General	ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) Brazoria		12 OFFICE SOUGHT (if known)
		GO TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 24

					2 01 24
13 C / OH NAME	Linder, David		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this informatic	the candidate's or officeh	older's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS	1. TOTAL UNITEM OR GUARANTE	IZED POLITICAL CONTRIBUTIONS (OTHER THAES OF LOANS, OR CONTRIBUTIONS MADE ELE	AN PLEDGES, LOANS, ECTRONICALLY)	\$	0.00
-		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$	500.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	16,863.48
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I	LAST DAY OF THE	\$	63,803.66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIE OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT J. GESERICK J. GESERICK Notary Public-State of Texas Notary ID #128894954 Commission Exp. FEB. 16, 2028 J. GESERICK Notary ID #128894954 Commission Exp. FEB. 16, 2028 Signature of Candidate or Officeholder					
	TARY STAMP / SEAL AB	Dawid Lington	, this the[5	f n	day
	cer administering	Printed name of officer administering	Notavix Title of offider	administer	ring oath

SUBTOTALS - C/OH	CC	FORM C/OH OVER SHEET PG 3 3 of 24
18 FILER NAME Linder, David	19 Filer ID	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 500.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 16,863.48
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	of C/Oh	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

MONET	ARY POLITICAL CONTRIB	SCHEDULE A1		
The Instru	iction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/24	
2 FILER NAME Linder, Davi			3 Filer ID	
4 Date 01/30/2024	5 Full name of contributor out-of-state F		7 Amount of Contribution (\$)	\$500.00
	Richardson, TX 75081			
8 Principal occi	upation / Job title (See Instructions)	9 Employer (See Instructio	ns)	

	POLITICAL EXE CONTRIBUTION		URES FROM POL	ITICAL		SCHEDULE F
F			EXPENDITURE CATEG	ORIES FOR BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Repayment/Reimbursement Office Overhead/Rental Expense Poiling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 1/20 Rpt: 5/24	2 FILER N/ Linder, [· · · · · · · · · · · · · · · · · · ·	3	Filer ID

Filer ID 4 Date 5 Payee name 01/30/2024 Actions Payee address; 6 Amount (\$) City; State; Zip Code \$500.00 1524 E. Mulberry Suite 125 Angleton, TX 77515 8 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By EXPENDITURE Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Office held Office sought 9 Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 01/30/2024 Alvin Sun & Advertiser Amount (\$) Payee address; City; State; Zip Code \$112.17 570 S. Dula St. Alvin, TX 77511 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Advertisement Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 06/17/2024 Angleton Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$125.00 222 North Velasco Angleton, TX 77515 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Transportative Food/Beverage Expense Polling Expense Travel in Dis By - Gift/Awards/Memorials Expense Printing Expense Travel Out o				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 2/20 Rpt: 6/24	Linder, David				
4	Date	5 Payee name	······································			
	01/09/2024	Angleton Christian School				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$200.00	976 County Road 44				
		Angleton, TX 77515				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By	Complete Schedule T.			
	EXPENDITURE	Candidate/Officeholder/Political Committee	iving expense			
		Fundraiser				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e held			
	Date	Payee name				
l	01/21/2024	Angleton Christian School				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$200.00	976 County Road 44				
		Angleton, TX 77515				
┢─	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By	Complete Schedule T.			
	EAPENDITURE	Candidate/Officeholder/Political Committee	iving expense			
		Donation				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	--	e held			
	Date	Payee name				
	06/17/2024	Angleton Republic Women				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$100.00	7925 County Road 684				
		Sweeny, TX 77480				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Fees Check if travel outside of Texas.				
		Check if Austin, TX, officeholder I	iving expense			
		Membership				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	e held			
	expenditure to benefit C/OI					
—						

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	
	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. OTHER (enter a category not listed above) Other (enter a category not listed above)
1	Total pages Schedule F1: Sch: 3/20 Rpt: 7/24	2 FILER NAME Linder, David 3 Filer ID
4	Date 01/24/2024	5 Payee name Angleton Rotary Club
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 146 E Hospital Dr. Suite 204 Angleton, TX 77515
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	02/07/2024	BACH
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 120 E. Hospital Dr.
		Angleton, TX 77515
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 04/17/2024	Payee name BACH
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 120 E. Hospital Dr. Angleton, TX 77515
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

POLITICAL	EXPENDITURES FROM POLITICAL
CONTRIBU	TIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/20 Rpt: 8/24	Linder, David
4	Date	5 Payee name
	01/24/2024	Brawner, James
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	398 Cattle Drive Trail
		Angleton, TX 77515
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Fundraiser
:		i unuraisei
9	Complete ONII V if direct	Candidate/Officeholder name Office sought Office held
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	01/10/2024	Brazoria Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	PO Box 992
	+=00100	
		Brazoria, TX 77422
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Donation
		Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/24/2024	Brazoria Chamber of Commerce
-	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	PO Box 992
		Brazoria, TX 77422
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions (Donations Made By
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
		Sponsorship
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICA	۱L
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	• •
Sch: 5/20 Rpt: 9/24	Linder, David
4 Date	5 Payee name
04/25/2024	Brazoria County Cattleman's Association
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 818 Angleton, TX 77515
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/21/2024	Brazoria County Fair Association
Amount (\$)	Payee address; City; State; Zip Code
\$200.00	901 S. Downing
	Angleton, TX 77515
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if traveloutside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/17/2024	Brazoria County Hispanic Chamber of Commerce
Amount (\$) \$150.00	Payee address; City; State; Zip Code 202 W. 2nd
	Freeport, TX 77541
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EX	XPENDITURES FROM POLITICAL
CONTRIBUTI	ONS

SCHEDULE	F1
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	Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense
	Accounting/Banking Consulting Expense	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District
	Contributions/ Donations Made By Candidate/Officeholder/Political	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 6/20 Rpt: 10/24	Linder, David
4	Date	5 Payee name
	03/04/2024	Brazoria County Library Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	620 S Brooks
		Brazoria, TX 77422
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
		Sponsorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	A
	Date	Payee name
	01/31/2024	Brazoria County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	135 Spanish Oak
		Lake Jackson, TX 77566
Γ	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
	1	
┢	Complete ONLY if direct	
		Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	J
	Date	J
	Date 04/24/2024 Amount (\$)	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code
	Date 04/24/2024	H Payee name Brazoria Heritage Foundation
	Date 04/24/2024 Amount (\$)	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728
	Date 04/24/2024 Amount (\$) \$100.00	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code
	Date 04/24/2024 Amount (\$) \$100.00 PURPOSE	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728 Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) (b) Description
	Date 04/24/2024 Amount (\$) \$100.00	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728 Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	Date 04/24/2024 Amount (\$) \$100.00 PURPOSE OF	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728 Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) (b) Description
	Date 04/24/2024 Amount (\$) \$100.00 PURPOSE OF	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728 Brazoria, TX 77422 (a) Category (see Categories listed at the top of this schedule) Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Date 04/24/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728 Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) Fees Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Candidate/Officeholder name
	Date 04/24/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728 Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) Fees Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Candidate/Officeholder name
	Date 04/24/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE	H Payee name Brazoria Heritage Foundation Payee address; City; State; Zip Code PO Box 1728 Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Candidate/Officeholder name

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 7/20 Rpt: 11/24	Linder, David	
4	Date	5 Payee name	
	06/26/2024	Brazoria Heritage Foundation	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	PO Box 1728	
		Brazoria, TX 77422	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee Sponsorship	
		c ponosicinp	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	05/09/2024	Brazoria Lions Club	
╞	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	PO Box 1045	
	4200100		
		Brazoria, TX 77422	
┣	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Sponsorship	
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	-		
	Date 05/21/2024	Payee name Brazosport Breakfast Lions Club	
	Amount (\$) \$105.00	Payee address; City; State; Zip Code PO Box 244	
	\$102.00	PO B0x 244	
		Clute, TX 77531	
	BUBBOOF		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Donation	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITIC	AL
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)		
-	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 8/20 Rpt: 12/24	Linder, David	
4	Date	5 Payee name	
	01/24/2024	Brazosport Chamber of Commerce	
6	Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 300 Abner Jackson Parkway Lake Jackson, TX 77566	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Membership	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/10/2024	Brazosport Rotary	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	332 Hwy 332E	
		Lake Jackson, TX 77566	
F	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Contributions/Donations Made By	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Sponsorship	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
F	Date	Payee name	
1	02/26/2024	Carson, Tom	
	······································		
	Amount (\$)	Payee address; City; State; Zip Code	
	\$260.00	451 Co Rd 525	
		Sweeny, TX 77480	
F	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Contributions/Donations Made By	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
1		Donation	
ĺ			
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
⊢			
Fo	rms provided by Texas E	thics Commission www.ethics.state.tx.us Version V4.1.0.d378aba0	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE	-1
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	EXPENDITURE CATEGORIES FOR BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_	Tatal same Cabadula E4.		
	Total pages Schedule F1: Sch: 9/20 Rpt: 13/24	Linder, David	3 Filer ID
4	Date	Payee name	
	02/05/2024	Circle the Wagons/Go Getters 4H	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	1509 CR 654E Brazoria, TX 77422	
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE		TX, officeholder living expense
		Sponsorship	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
╞	Date	Payee name	
	06/27/2024	Filipp's Cafe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$960.00	PO Box 506	
		Danbury, TX 77581	
F	PURPOSE) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		utside of Texas. Complete Schedule T.
	EXPENDITORE		TX, officeholder living expense
		Catering Appr	reciation Lunch
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/05/2024	Flowers by Mary Lee	
\vdash	Amount (\$)	Payee address; City; State; Zip Code	
	\$108.25	301 E Brazos	
		West Columbia, TX 77486	
Γ	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Flowers	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
<u> </u>			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 10/20 Rpt: 14/24	2 FILER NAME 3 Filer ID Linder, David
4 Date	5 Payee name
03/07/2024	Flowers by Mary Lee
6 Amount (\$) \$86.60	 7 Payee address; City; State; Zip Code 301 E Brazos West Columbia, TX 77486
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if traveloutside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Funeral
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/07/2024	Flowers by Mary Lee
Amount (\$)	Payee address; City; State; Zip Code
\$86.60	301 E Brazos
	West Columbia, TX 77486
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if traveloutside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Funeral service
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/29/2024	G&H
Amount (\$) \$517.96	Payee address; City; State; Zip Code 813 S. Brooks
	Brazoria, TX 77422
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if traveloutside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense Maintenance Maintenance
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

SCHEDULE	F1
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		EXPENDITURE CATEGORIES FOR BOX 8(a)
Accounting/Banking Fees Office Overhead/Rental Exp Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract La		Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
_		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 11/20 Rpt: 15/24	2 FILER NAME 3 Filer ID Linder, David 3
4	Date 03/07/2024	5 Payee name J&M Printing
6	Amount (\$) \$116.91	7 Payee address; City; State; Zip Code 1119 N. Velasco St. Angleton, TX 77515
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Shirts
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
ĺ	05/15/2024	James Anderson American Legion Post 561
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 203 E. San Bernard Brazoria, TX 77422
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/04/2024	Payee name Junior Achievement of Brazoria County, Inc.
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 225 Parking Way St.
		Lake Jackson, TX 77566
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
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Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollin - Gift/Awards/Memorials Expense Printi	Repayment/Reimbursement Solicitation/Fundraising Expense c Overhead/Rental Expense Transportation Equipment & Related Expense ig Expense Travel in District ng Expense Travel Out of District ies/Wages/Contract Labor OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 12/20 Rpt: 16/24	2 FILER NAME Linder, David	3 Filer ID
Date 04/24/2024	5 Payee name Junior Achievement of Brazoria County, Inc	
Amount (\$) \$150.00	 Payee address; City; State; Zip 225 Parking Way St. Lake Jackson, TX 77566 	Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought Office held
Date 04/03/2024	Payee name Kersh, Gary	
Amount (\$) \$880.00	Payee address; City; State; Zip 521 Pine St.	Code
PURPOSE OF EXPENDITURE	Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) Ice Chest	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for auction item purchase
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought Office held
Date 05/06/2024	Payee name Kersh, Gary	
Amount (\$)	Payee address; City; State; Zip 521 Pine St.	Code
\$100.00		
\$100.00	Brazoria, TX 77422	
\$100.00 PURPOSE OF EXPENDITURE	Brazoria, TX 77422 (a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for advertising expense

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POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 13/20 Rpt: 17/24	Linder, David				
4	Date 03/27/2024	5 Payee name MD Anderson Cancer Center				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$100.00	PO Box 4464 Houston, TX 77210				
0						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation 				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	01/30/2024	Nana's House of Treats				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$100.00	3514 CR 4				
		Damon, TX 77430				
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholderliving expense Donation 				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	01/10/2024	Needville Youth Fair				
	Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 237				
		Needville, TX 77461				
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation 				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				

CONTRIBUTIO	NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		
1 Total pages Schedule F1: Sch: 14/20 Rpt: 18/24		3 Filer ID
4 Date 01/17/2024	5 Payee name Night in the Spotlight	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 224 Mystery Harbor Ln. Freeport, TX 77541	
8 PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense nip
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought H	Office held
Date 03/07/2024	Payee name Our Lady Queen of Peace Catholic School	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1600 Hwy 2004	
PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought H	Office held
Date 02/14/2024	Payee name Rick's Outdoor Power	
Amount (\$) \$199.99	Payee address; City; State; Zip Code 609 W. Mulberry	
	Angleton, TX 77515	
PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense PMS
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought H	Office held

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POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - CitfuAwards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form.		Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID		
	Sch: 15/20 Rpt: 19/24	Linder, David		
4	Date 04/30/2024	5 Payee name Rotary Club of Danbury		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
ľ	\$180.00	2315 CR 208		
	φ100.00			
		Danbury, TX 77534		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
	EXPENDITORE	Candidate/Officeholder/Political Committee		
		Donation		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	02/27/2024	Salvation Army		
┢─	Amount (\$)	Payee address; City; State; Zip Code		
	\$500.00	1618 N Ave J		
		Freeport, TX 77541		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
		Candidate/Officeholder/Political Committee Sponsorship - Bunny Hop		
		Sponsorally - During hop		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
Γ	Date	Payee name		
	03/27/2024	St. Jude Childrens Hospital		
Γ	Amount (\$)	Payee address; City; State; Zip Code		
	\$100.00	PO Box 50		
		Memphis, TN 38101		
Γ	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
		Candidate/Officeholder/Political Committee		
		Donation		
<u> </u>	<u> </u>			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
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POLITICAL EXE CONTRIBUTION	PENDITURES FROM POLITIC	CAL		SCHEDULE F1
	EXPENDITURE CATEGORIES	FOR B	DX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loar Fees Offic Food/Beverage Expense Pollii - Gift/Awards/Memorials Expense Print	n Repayme te Overhea ng Expens ing Expen ries/Wage	ent/Reimbursement Id/Rental Expense e se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 16/20 Rpt: 20/24	2 FILER NAME Linder, David			3 Filer ID
4 Date 03/28/2024	5 Payee name Stallman, Bo			
6 Amount (\$) \$200.00	 Payee address; City; State; Zip 110 Black Oak Dr. Angleton, TX 77515 	Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee			outside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office H	sought		Office held
Date 03/28/2024	Payee name Sweeny Chamber of Commerce			
Amount (\$) \$200.00	\$200.00 111 West Third Street			
PURPOSE OF EXPENDITURE	Sweeny, TX 77480 (a) Category (See Categories listed at the top of this schedule) Fees	(b)		outside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought		Office held
Date 04/15/2024	Payee name Sweeny Community Hospital Development	Found	lation	
Amount (\$) \$250.00	Payee address; City; State; Zip 305 N. McKinney	Code		
	Sweeny, TX 77480			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee			outside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O		l sought		Office held

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense		EXPENDITURE CATEGOF Event Expense Fees Food/Beverage Expense	Loan Repay Office Overl Polling Expe	/ment/F head/R ense	8(a) Reimbursement ental Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services		iges/Co	ontract Labor		Travel Out of District OTHER (enter a category not listed above)
	-		The Instruction Guide explains	now to com	plete	this form.	-	
1	Total pages Schedule F1: Sch: 17/20 Rpt: 21/24	2 FILER NAME Linder, Davi					3	Filer ID
4	Date	5 Payee name						
	03/27/2024		ren's Hospital					
6	Amount (\$) \$100.00	7 Payee addres PO Box 300	ss; City; State; 630 Ste. 6226	; Zip Cod	le			
		Houston, TX	(77230					
8	PURPOSE	(a) Category (Se	e Categories listed at the top of this sch	edule) (b) D	escription		
	OF EXPENDITURE		s/Donations Made By		Ē	4		de of Texas. Complete Schedule T.
		Candidate/0	Officeholder/Political Comm	nittee	Ľ	Check if Austin,	, тх,	officeholder living expense
					U	onation		
Ļ	Complete ONUN (Calling	Constitute + 10/	abaldar na	Office	ht			Office held
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offi H	ceholder name C	Office soug	nt	_		Office held
	Date	Payee name						
ł	04/15/2024	The Bridge	Church					
	Amount (\$)	Payee addres	ss; City; State	; Zip Cod	le			
	\$1,500.00	219 N. Arco	-	•				
		Angleton, T	X 77515					
	PURPOSE	(a) Category (se	e Categories listed at the top of this sch	edule)	(b) D	escription		
	OF EXPENDITURE		s/Donations Made By		Ē	4		de of Texas. Complete Schedule T.
		Candidate/0	Officeholder/Political Comm	nittee		J Check if Austin	, TX,	officeholder living expense
					D	Unation		
						••••••		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name (Office soug	iht			Office held
	Date	Payee name						
	05/16/2024	The Bridge	Church					
	Amount (\$)	Payee addre	ss; City; State	; Zip Coo	le			
	\$500.00	219 N. Arco						
		Angleton, T	X 77515					
	PURPOSE OF	••••••	e Categories listed at the top of this sch	iedule)	(b) D	escription		
	EXPENDITURE		s/Donations Made By		Ļ	4		de of Texas. Complete Schedule T.
		Candidate/C	Officeholder/Political Comm	nttee		J Check if Austin	, IX,	officeholder living expense
					U	onution		
\vdash	Complete ONLY if direct	Candidate/Offi	ceholder name 0	Office soug	iht			Office held
	expenditure to benefit C/O			Since Soug	, it			

CONTRIBUTIO	NS SCHEDULE FI								
EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense								
1 Total pages Schedule F1: Sch: 18/20 Rpt: 22/24	2 FILER NAME Linder, David								
4 Date 03/20/2024	5 Payee name The Exchange Club of Angleton								
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code PO Box 1196								
·	Angleton, TX 77515								
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship 								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
02/13/2024	Unbound Now								
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1635 E. Broadway Suite 113 Pearland, TX 77581								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation 								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date 02/06/2024	Payee name VFW Post 8551								
Amount (\$) \$100.00	Payee address; City; State; Zip Code 7011 FM 1459								
	Sweeny, TX 77480								
PURPOSE OF EXPENDITURE	 (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation 								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Sch: 19/20 Rpt: 23/24 Linder, David	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1									
Sch: 19/20 Rpt: 23/24 Linder, David 4 Date 5 Payee name 03/19/2024 Visionary Outreach 6 Amount (\$) 7 Payee address; City; State; Zip Code 32 Lavida Ct. 32 Lavida Ct. Manvel, TX 77578 Manvel, TX 77578 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date Payee name Visionary Outreach Amount (\$) Payee name Office sought Office held Amount (\$) Payee name Visionary Outreach Xisionary Outreach Office held Office held	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District ty - Gitt/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)								
03/19/2024 Visionary Outreach 6 Amount (\$) 7 Payee address; City; State; Zip Code \$250.00 32 Lavida Ct. Manvel, TX 77578 Manvel, TX 77578 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Visionary Outreach Office sought Visionary Outreach Office held Date 06/27/2024 Payee name Visionary Outreach Payee address; City; State; Zip Code State; Zip Code										
\$250.00 32 Lavida Ct. Manvel, TX 77578 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if traveloutside 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 06/27/2024 Payee name Visionary Outreach Visionary Outreach Payee address; City; State; Zip Code	4 Date 03/19/2024									
OF EXPENDITURE Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office sought Date 06/27/2024 Payee name Visionary Outreach Visionary Outreach Amount (\$) Payee address; City; State; Zip Code		32 Lavida Ct.								
expenditure to benefit C/OH Payee name Date Payee name 06/27/2024 Visionary Outreach Amount (\$) Payee address; City; State; Zip Code	OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee								
06/27/2024 Visionary Outreach Amount (\$) Payee address; City; State; Zip Code	9 Complete <u>ONLY</u> if direct expenditure to benefit C/O									
Manvel, TX 77578		32 Lavida Ct.								
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Image: Contribution of the schedule of the s	OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
DatePayee name01/24/2024West Columbia Chamber of Commerce		-								
Amount (\$)Payee address;City;State;Zip Code\$300.00PO Box 837										
West Columbia, TX 77486		West Columbia, TX 77486								
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description (b) Description Check if traveloutside of Texas. Complete Schedule T. (c) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Sponsorship	OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee								
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										

	POLITICAL EX	SCHEDULE F:							
t	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 15 how to complete this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	1 Total pages Schedule F1: Sch: 20/20 Rpt: 24/24	2	FILER NAI Linder, D			3	Filer ID		
	4 Date 06/05/2024	5	r ayee nan	^{ne} umbia Chamber of Comme	rce				

City;

\$100.00 PO Box 837 West Columbia, TX 77486 8 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Fees Check if Austin, TX, officeholder living expense Membership Office sought Office held

State; Zip Code

9 Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

7

Payee address;

6 Amount (\$)