

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 53		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Marc	MI K	OFFICE USE ONLY		
	NICKNAME	LAST Whyte	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 9240 Marymont Park San Antonio TX 78217			Date Received		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (210)	PHONE NUMBER 562-2870	EXTENSION			Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Eddie	MI			Receipt #
	NICKNAME	LAST Aldrete	SUFFIX	Date Processed		
				Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 335 Country Wood Drive San Antonio TX 78216					
8 CAMPAIGN TREASURER PHONE	AREA CODE ()	PHONE NUMBER -	EXTENSION			
9 REPORT TYPE	8th Day Before General Election					
10 PERIOD COVERED	Month Day Year 3/28/2023		THROUGH	Month Day Year 4/26/2023		
11 ELECTION	ELECTION DATE Month Day Year 5/6/2023		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Council District 10			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Mr Marc K Whyte

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	San Antonio Equity Alliance
<input checked="" type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS PO Box 15751 San Antonio TX 78212
	COMMITTEE CAMPAIGN TREASURER NAME Mr Darryl Byrd
	COMMITTEE CAMPAIGN TREASURER ADDRESS 212 W. laurel San Antonio TX 78212

☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 38040.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 136.65
	4. TOTAL POLITICAL EXPENDITURES	\$ 75069.59
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 71016.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50000.00

18 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.

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Mr Marc K Whyte**, this the **1st** day of **May**, 2023, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Mr Marc K Whyte		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 38040.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 75069.59
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
3/28/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Andrew Casillas

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**229 West Rosewood Avenue
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Casillas Law Firm PLLC

Date
3/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guy Clumpner

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**154 E Hollywood Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Holt Development Services, Inc.

Date
3/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Perry Donop Jr

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**7744 Broadway #108
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Real Estate Developer

Employer (See instructions)
Perry Donop Properties

Date
3/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Doe Florsheim

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1910 Wroxtton Road
Houston, TX 77005**

Principal occupation / Job title (See instructions)
Housewife

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
3/28/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
C. John Muller IV

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**111 West Sunset Road
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
CJ Muller & Associates, PLLC

Date
3/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rod Riordan

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**444 Ranch Pass
Fair Oaks Ranch, TX 78015**

Principal occupation / Job title (See instructions)
Finance

Employer (See instructions)
Embrey Partners, LLC

Date
3/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Patrick Rouse

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**405 Canterbury Hill
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Langley and Banack

Date
3/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Valero Political Action Committee

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 696000
San Antonio, TX 78269**

Principal occupation / Job title (See instructions)

Employer (See instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
3/29/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Bret Broussard

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**1008 Garraty Rd.
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Owner

9 Employer (See instructions)
Broussard Group

Date
3/29/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Anne-Marie Grube

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2136 W Summit Ave
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
COO

Employer (See instructions)
Northwestern Mutual

Date
3/30/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jenny Carnes

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2911 Trailend Drive
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Non-Profit Executive

Employer (See instructions)
San Antonio Sports

Date
3/30/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Joe Hoffer

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**66 Champion Cliff
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
SLHA LLP

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
3/31/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Chris Karl

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**140 Palo Duro
San Antonio, TX 78232**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Valdez & Trevino

Date
3/31/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jonathan Melendez

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**17038 Bulverde Road
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
Insurance

Employer (See instructions)
Christus Health

Date
4/1/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Patty Cacace

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3511 Trailway Park Street
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
Administration

Employer (See instructions)
Alamo Community College District

Date
4/3/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jo Alexander

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**4243 Thousand Oaks #165
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <div style="text-align: right;">5 of 26</div>
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/3/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Sharfman 6 Contributor address; City; State; Zip Code 6502 Trotwood Court Baltimore, MD 21209	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Physician		9 Employer (See instructions) Johns Hopkins University
Date 4/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gayle Embrey Contributor address; City; State; Zip Code 7600 Broadway #300 San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Homemaker		Employer (See instructions)
Date 4/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walter Embrey Contributor address; City; State; Zip Code 7600 Broadway #300 San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Real Estate Developer		Employer (See instructions) Embrey Partners, LLC
Date 4/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dustin Jessop Contributor address; City; State; Zip Code 2902 Sonora Creek Drive San Antonio, TX 78232	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Sales		Employer (See instructions) e-Tel
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/6/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
James Goudge

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**200 Claiborne Way
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)

Date
4/6/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ajeya Joshi

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**70 Three Lakes Drive
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
South Texas Spinal Clinic

Date
4/7/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brian Kozel

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3609 Hilltop View Court
Pearland, TX 77584**

Principal occupation / Job title (See instructions)
Sales

Employer (See instructions)
Certified Laboratories

Date
4/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shelley Bass

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**265 Cave Lane
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/9/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Theresa Pittl

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**2115 Oak Creek Drive
San Antonio, TX 78232**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Adami, Shuffield,Mask PC

Date
4/10/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paul Basaldua

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**3 Woltwood
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Real Estate

Employer (See instructions)
VersaTerra Development

Date
4/10/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Christopher Corso

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**23007 Camelback Drive
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
General Contractor

Employer (See instructions)
Joeris General Contractors

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Robert Copeland Jr

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1036 Central Parkway N
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Engineer

Employer (See instructions)
Macina, Bose, Copeland and Associates, Inc.

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/11/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Travis Edlund

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**104 Fleetwood Dr.
Hollywood Park, TX 78232**

8 Principal occupation / Job title (See instructions)
VP-Regional Manager

9 Employer (See instructions)
Amarillo National Bank

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lynnette Embrey

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**405 Wiltshire Ave.
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Homemaker

Employer (See instructions)

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walter Embrey III

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**405 Wiltshire Ave.
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
Embry DC

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Clay Jackson

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2047 Rigsby Ave.
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
Clay Consulting

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/11/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jeremy Jessop

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**5150 Broadway #300
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Real Estate Broker

9 Employer (See instructions)
Jeremy Jessop Real Estate Company

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sara Jessop

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**5150 Broadway #300
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Realtor

Employer (See instructions)
Jeremy Jessop Real Estate Company

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jeffrey Kothman

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**326 Big Oak Dr.
Adkins, TX 78101**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Texas Towing

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roger Martinez

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**14211 Fairway Oaks
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/11/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Marcus Rogers

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**2135 Hildebrand Avenue
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Law Office of Marcus P. Rogers

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marc Ross

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 28490
San Antonio, TX 78228**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Ross Properties

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Maurine Shipp

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**318 East Nottingham Drive
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Clark Hill

Date
4/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Joe Carlton Soules Jr

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**3523 Marymont Dr.
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Pahmeyer GP, LLC

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 26
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mathew Wolff 6 Contributor address; City; State; Zip Code 9619 Nona Kay Dr. San Antonio, TX 78217	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Event Producer		9 Employer (See instructions) Galaxy Productions LLC
Date 4/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Landrys Restaurants, PAC Contributor address; City; State; Zip Code 1510 West Loop South Houston, TX 77027	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 4/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Bullard Contributor address; City; State; Zip Code 28331 Hollow Springs Lane Spring, TX 77386	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) VP		Employer (See instructions) Conimet Corp.
Date 4/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duane Bunce Contributor address; City; State; Zip Code 134 Stanford Drive San Antonio, TX 78212	Amount of contribution (\$) 400.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Zachry Corp
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/12/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Bradford Irelan

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**2520 Caroline Street 2nd Floor
Houston, TX 77004**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Irelan McDaniel

Date
4/12/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bradford Kaufman

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**211 Ridgehaven Place
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Commercial Real Estate Broker

Employer (See instructions)
CBRE

Date
4/12/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Danny Mills

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**10226 San Pedro Avenue
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Investor

Employer (See instructions)
Self

Date
4/12/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bobby Perez

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**327 East Huisache Avenue
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Spurs Sports & Entertainment

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/12/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Stephen Rose

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**11907 Louvre Ct
Houston, TX 77082**

8 Principal occupation / Job title (See instructions)
Radiologist

9 Employer (See instructions)
Rose Imaging Specialists

Date
4/13/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scott Breimeister

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**223 West 32nd Street
Houston, TX 77018**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

Date
4/13/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
The Honorable Lyle Larson

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**632 High Country Ridge
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

Date
4/14/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jill Amonica

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**3191 Orange Sun Street
Las Vegas, NV 89135**

Principal occupation / Job title (See instructions)
Mortgage Loan Officer

Employer (See instructions)
Fairway Independent

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/14/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Inga Cotton

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**537 Abiso Avenue
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Executive Director

9 Employer (See instructions)
San Antonio Charter Moms

Date
4/14/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Glen Mitts

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**608 Haskin Drive
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

Date
4/15/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Diana Salinas

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**12512 Will Cloudsley
Schertz, TX 78154**

Principal occupation / Job title (See instructions)
Finance

Employer (See instructions)
Frost Bank

Date
4/16/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Emma Guerrero

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**3915 Skylark
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/17/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Nataliya Allard

7 Amount of contribution (\$)
300.00

6 Contributor address; City; State; Zip Code
**11907 Louvre Court
Houston, TX 77082**

8 Principal occupation / Job title (See instructions)
Realtor

9 Employer (See instructions)
David Rose Realty

Date
4/17/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jaime Arechiga

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2310 Winding View
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
Land Developer

Employer (See instructions)
Hillstar Investments

Date
4/17/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
David Baker

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**12511 Enchanted Oaks St.
Live Oak, TX 78233**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

Date
4/17/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Beth Brunton

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**243 Winding Ln
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 26
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maria Ninfa Cano 6 Contributor address; City; State; Zip Code 8260 Jamestown Sq. Boerne, TX 78015	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions)
Date 4/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Clamp Contributor address; City; State; Zip Code 5227 Stormy Trail San Antonio, TX 78247	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) VP Finance & Administration		Employer (See instructions) The DoSeum
Date 4/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Javier Duran Contributor address; City; State; Zip Code 8338 Athenian Dr. Universal City, TX 78148	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Shelton and Valadez
Date 4/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory Gibson Contributor address; City; State; Zip Code 304 Cliffside Dr. Shavano Park, TX 78231	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Development Partner		Employer (See instructions) Endura Advisory Group
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17 of 26
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ortiz McKnight PLLC 6 Contributor address; City; State; Zip Code 153 Treeline Park #330 San Antonio, TX 78209	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 4/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) TREPAC/Texas Association of Realtors PAC Contributor address; City; State; Zip Code PO Box 2246 Austin, TX 78768	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 4/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tom Furlow Contributor address; City; State; Zip Code 901 NE Loop 410 #530 San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Furlow Law Firm
Date 4/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steven Badger Contributor address; City; State; Zip Code 3039 Nowitzki Way #2902 Dallas, TX 75219	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Zelle LLP
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
18 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/19/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Pete Cortez

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**800 Dolorosa #204
San Antonio, TX 78207-4559**

8 Principal occupation / Job title (See instructions)
Foodservice

9 Employer (See instructions)
MTC Inc.

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ashley Farrimond

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**11903 11903 SandBar Hill
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Killen, Griffin and Farrimond PLLC

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Joe F. Garcia

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**3115 Morning Creek
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roland Gonzales Jr

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**7500 Callahan Rd. Apt 343
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Un-employed

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/19/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Louis Gross

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**11903 11903 SandBar Hill
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Benjamin, Vana, Martinez, and Cano LLP

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Allan D Hoover

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9 Jason Rd.
Boerne, TX 78006**

Principal occupation / Job title (See instructions)
VP Development

Employer (See instructions)
Mosaic Land Development

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kathleen Hoover

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9 Jason Rd.
Boerne, TX 78006**

Principal occupation / Job title (See instructions)
Homemaker

Employer (See instructions)

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gaynor Huey-Senyszyn

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**15714 Dawn Crest
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
20 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/19/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Melissa Killen

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**29 29 Winthrop Downs
San Antonio, TX 78257**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Killen, Griffin and Farrimond PLLC

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paul Robert Killen

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**29 29 Winthrop Downs
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Killen, Griffin and Farrimond PLLC

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Eric King

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**333 Elizabeth Rd
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
CSO Founder

Employer (See instructions)
Legent

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kimberley McNight

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2019 Flint Oak
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Retired Nurse

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
21 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/19/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Cassidy Patterson

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**231 Private Road 1493
Alvord, TX 76225**

8 Principal occupation / Job title (See instructions)
Land Development

9 Employer (See instructions)
Mosaic Land Development

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roy Richard Jr

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**519 Main St.
Schertz, TX 78154**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Law Offices of Roy Richard, Jr.

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roy Richard III

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**14106 Touch Gold
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Mortgage Loan Officer

Employer (See instructions)
Cross Country Mortgage, LLC

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
George Salinas Jr

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**214 214 Blackjack Oak
Shavano Park, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
George Salinas Injury Lawyers

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
22 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/19/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Paxton Weidner

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**24345 Wilderness Oak #1207
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
Real Estate

9 Employer (See instructions)
Mosaic Land Development

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kethleen Weiss

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6812 West Avenue
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Homemaker

Employer (See instructions)

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mike Weiss

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6812 West Avenue
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Real Estate

Employer (See instructions)
4M Properties

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Susan Yantis

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6812 West Ave.
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Embroidery Concepts

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
23 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/19/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Thomas Yantis

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**6812 West Ave.
San Antonio, TX 78213**

8 Principal occupation / Job title (See instructions)
CEO

9 Employer (See instructions)
Mosaic Land Development

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown and McDonald PLLC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**100 100 NE Loop 410 #1385
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
4/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Daniel Ortiz

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9103 Mellbrook St.
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Ortiz McKnight PLLC

Date
4/20/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kelly Dickens

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1463 Bolton Road
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Construction

Employer (See instructions)
D&D Contractors, Inc.

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
24 of 26

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date
4/20/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Michelle Dickens

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1463 Bolton Road
Helotes, TX 78023**

8 Principal occupation / Job title (See instructions)
Heavy Civil Construction

9 Employer (See instructions)
D&D Contractors, Inc.

Date
4/20/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roland Gonzales

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**5103 Newcastle Lane
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Germer PLLC

Date
4/20/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Thomas "Chance" Mazurek IV

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1919 North Saint Marys Street
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
MBB

Date
4/21/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sam Millsap

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**19207 Reata Cove
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25 of 26
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James White 6 Contributor address; City; State; Zip Code PO Box 22 Hillister, TX 77624	7 Amount of contribution (\$) 15.00
8 Principal occupation / Job title (See instructions) Executive Director		9 Employer (See instructions) State of Tx
Date 4/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dennis Stuckey Contributor address; City; State; Zip Code 107 Grassmarket San Antonio, TX 78259	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions)
Date 4/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Little Contributor address; City; State; Zip Code 214 Tuttle Rd San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Anesthesiologist		Employer (See instructions) UT Health SA
Date 4/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geoffrey Shaw Contributor address; City; State; Zip Code 11315 Massive Mt Helotes, TX 78023	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Insurance Investigator		Employer (See instructions) USAA
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26 of 26
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bob Girling MD 6 Contributor address; City; State; Zip Code 5 Salado Ridge San Antonio, TX 78217	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Orthopedic Surgeon		9 Employer (See instructions) Sports Medicine Associates of San Antonio
Date 4/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephanie Girling Contributor address; City; State; Zip Code 5 Salado Ridge San Antonio, TX 78217	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Self Employed		Employer (See instructions) Dream Riser Communication
Date 4/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Samuel Houston Contributor address; City; State; Zip Code 4040 Broadway Street #515 San Antonio, TX 78209	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Houston Dunn, PLLC
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1	
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Contributor address; City; State; Zip Code	8 Amount of Contribution \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
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)			
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PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID# _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral

☐ none

15 ☐ Check if personal funds were deposited into political
account (See instructions)

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID# _____)

Loan Amount (\$)

Is lender a
financial
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral

☐ none

☐ Check if personal funds were deposited into political
account (See Instructions)

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 1 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2023	5 Payee name BDR Services		
6 Amount (\$) 2320.00	7 Payee address; City; State; Zip Code 2610 Tillie Dr. San Antonio, TX 78222		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Blockwalkers
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 3/28/2023	Payee name Joan Teeter		
Amount (\$) 400.00	Payee address; City; State; Zip Code 12038 Stoney Drive San Antonio, TX 78247		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Other		Description Reimbursement to constituent re: wet concrete damage
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 3/29/2023	Payee name Lizzy Aranibar		
Amount (\$) 1525.83	Payee address; City; State; Zip Code 1903 Cambria San Antonio, TX 78258		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Event coordinator
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 2 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 3/29/2023	5 Payee name Anedot		
6 Amount (\$) 203.20	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		(b) Description Contribution platform processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date 3/29/2023	Payee name Anedot		
Amount (\$) 97.80	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date 3/29/2023	Payee name Sign Busters		
Amount (\$) 1120.00	Payee address; City; State; Zip Code PO Box 24108 San Antonio, TX 78224		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Campaign signs, installation, maintenance
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 3 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/2023	5 Payee name Election Support Services		
6 Amount (\$) 1755.75	7 Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Printing		(b) Description Doorhangers, pushcards and business cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 3/31/2023	Payee name Anedot		
Amount (\$) 78.40	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/1/2023	Payee name Christopher Sanchez		
Amount (\$) 1350.00	Payee address; City; State; Zip Code 11001 Wurzbach Rd #503 San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Blockwalker
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 4 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/4/2023	5 Payee name Hops & Hounds		
6 Amount (\$) 207.05	7 Payee address; City; State; Zip Code 13838 Jones Maltsberger San Antonio, TX 78247		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Event		(b) Description Meet & Greet with the Candidate
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/4/2023	Payee name Anedot		
Amount (\$) 35.20	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/4/2023	Payee name BDR Services		
Amount (\$) 2340.00	Payee address; City; State; Zip Code 2610 Tillie Dr. San Antonio, TX 78222		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Blockwalkers
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/4/2023	5 Payee name GOFISH ADVERTISING		
6 Amount (\$) 216.50	7 Payee address; City; State; Zip Code 19315 FM 2252 #312 Garden Ridge, TX 78266		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Website services
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/5/2023	Payee name Anedot		
Amount (\$) 4.30	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/6/2023	Payee name Anedot		
Amount (\$) 8.60	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/6/2023	5 Payee name Raconteur Media Company		
6 Amount (\$) 16530.00	7 Payee address; City; State; Zip Code PO Box 26511 Austin, TX 78755		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Social Media
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/10/2023	Payee name Anedot		
Amount (\$) 75.20	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/10/2023	Payee name BDR Services		
Amount (\$) 2290.00	Payee address; City; State; Zip Code 2610 Tillie Dr. San Antonio, TX 78222		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Blockwalkers
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/10/2023	5 Payee name 3-D Signs		
6 Amount (\$) 557.49	7 Payee address; City; State; Zip Code 7986 1st Street Somerset, TX 78069		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Campaign signs
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/12/2023	Payee name Anedot		
Amount (\$) 34.90	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/12/2023	Payee name Anedot		
Amount (\$) 14.60	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 8 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/13/2023	5 Payee name Election Support Services		
6 Amount (\$) 15488.00	7 Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Direct mail design, printing, and mailing
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date 4/13/2023	Payee name NORMA DENHAM & ASSOCIATES		
Amount (\$) 6153.60	Payee address; City; State; Zip Code 15706 Knoll Cliff San Antonio, TX 78247		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Fundraising
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date 4/14/2023	Payee name Anedot		
Amount (\$) 124.40	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 9 of 12	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)
4 Date 4/17/2023	5 Payee name BDR Services	
6 Amount (\$) 1600.00	7 Payee address; City; State; Zip Code 2610 Tillie Dr. San Antonio, TX 78222	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Blockwalkers
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held

Date 4/18/2023	Payee name Anedot		
Amount (\$) 62.50	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Contribution platform processing fees	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

Date 4/19/2023	Payee name Anedot		
Amount (\$) 40.60	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Contribution platform processing fees	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 10 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/20/2023	5 Payee name Anedot		
6 Amount (\$) 73.20	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		(b) Description Contribution platform processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/24/2023	Payee name Anedot		
Amount (\$) 192.40	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/24/2023	Payee name BDR Services		
Amount (\$) 1875.00	Payee address; City; State; Zip Code 2610 Tillie Dr. San Antonio, TX 78222		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Blockwalkers
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 11 of 12	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date 4/24/2023	5 Payee name Election Support Services		
6 Amount (\$) 15664.00	7 Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Direct mail design, printing, and mailing
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 4/24/2023	Payee name Election Support Services		
Amount (\$) 2249.53	Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Campaign Services
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 4/24/2023	Payee name JVC Media		
Amount (\$) 211.09	Payee address; City; State; Zip Code 3106 Fall Crest Dr San Antonio, TX 78247		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Campaign t-shirts
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 12 of 12	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)
4 Date 4/26/2023	5 Payee name Anedot	
6 Amount (\$) 13.50	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Contribution platform processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held
Date 4/26/2023	Payee name Anedot	
Amount (\$) 20.30	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Contribution platform processing fees
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held

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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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: 1 of 1	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

.....
6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

.....
Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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 F4: 1 of 1	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
--	-------------

5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
----------------------	---

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule G: 1 of 1	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee Name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held

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PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule H: 1 of 1	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)	

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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1 of 1
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

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CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

C/OH NAME
Mr Marc K Whyte

Filer ID (Ethics Commission Filers)

SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

OFFICEHOLDER

•• Complete this section *only* if you are an officeholder. ••

- ☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest of other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder