

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: 83		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST John	MI K	OFFICE USE ONLY		
	NICKNAME	LAST Courage	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1938 Broken Oak St San Antonio TX 78232-3104			Date Received		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (210)	PHONE NUMBER 216-5050	EXTENSION			Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr	FIRST Ryan	MI T			Receipt #
	NICKNAME	LAST Takao	SUFFIX	Date Processed		
				Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 19206 Barrow Bay San Antonio TX 78258					
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 859-9106	EXTENSION			
9 REPORT TYPE	30th Day Before General Election					
10 PERIOD COVERED	Month Day Year 1/1/2023		THROUGH	Month Day Year 5/27/2023		
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) Council District 9		13 OFFICE SOUGHT (if known) Council District 9			

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mr John K Courage	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S)	<small>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.</small>	
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS

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)	\$ 34061.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 51384.75
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 35902.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 31933.00

18 AFFIDAVIT		
<p>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.</p> <p>*** Electronically Certified ***</p> <p>_____ Signature of Candidate or Officeholder</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said <u>Mr John K Courage</u> , this the <u>10th</u> day of <u>April</u> , <u>2023</u> , 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 John K Courage		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 34061.00
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	\$ 51384.75
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 46

2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/3/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Gloria Green

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**1413 Brookstone
San Antonio, TX 78248**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
1/3/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Zada True-Courage

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1938 Broken Oak
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Financial Analyst

Employer (See instructions)
CPS Energy

Date
1/5/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Ian Straus

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**6307 Ridge Forest Dr
San Antonio, TX 78233**

Principal occupation / Job title (See instructions)
Marketng Research

Employer (See instructions)
RETIRED

Date
1/7/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Pamela Peck

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**13710 Money Tree
San Antonio, TX 78232-4993**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

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 46

2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/13/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Charles Gonzalez

7 Amount of contribution (\$)
150.00

6 Contributor address; City; State; Zip Code
**134 E Mulberry
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Ogletree Deakins, P.C.

Date
1/15/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Pablo Escamilla

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1047 W 17th St
Houston , TX 77008**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Escamilla & Poneck, LLP

Date
1/17/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr John Steen Jr

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1250 N.E. Loop 410 #305
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Lawyer Investor

Employer (See instructions)
Self

Date
1/17/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Weisie Steen

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1250 N.E. Loop 410 #305
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Investor

Employer (See instructions)
Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/18/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Eileen Shiman

7 Amount of contribution (\$)
20.00

6 Contributor address; City; State; Zip Code
**1130 Tranquil Trl
San Antonio, TX 78232**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
1/18/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Chien Liu

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**18510 Eagle Frd
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Realtor

Employer (See instructions)
Self-employed

Date
1/18/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Steve Schnipper

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**11807 Buttonwillow Cv
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
1/18/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Jim Barshop

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**250 Treeline Park
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
NonProfit fundraising

Employer (See instructions)
City Year SA

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/18/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Marie Y Crittenden

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**614 Birdsong South
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
1/18/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Don Hoening

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3207 Crystal Path
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
1/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Ilene Devlin

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**27 Inwood Mnr
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Writer

Employer (See instructions)
Ilene W. Devlin, Author

Date
1/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Kenneth Phelps

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**18222 Crystal Cv
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
seeker of wisdom

Employer (See instructions)
retired

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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: 5 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Michael Putman 6 Contributor address; City; State; Zip Code 120 E Edgewood San Antonio, TX 78209	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) lawyer		9 Employer (See instructions) Putman Law Firm
Date 1/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Richard Ayres Contributor address; City; State; Zip Code 1918 Parhaven Dr San Antonio, TX 78232	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 1/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr T Paul Furukawa Contributor address; City; State; Zip Code 18328 Edwards Oaks San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Social Worker		Employer (See instructions) N/A
Date 1/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Rita Caton Contributor address; City; State; Zip Code 12502 Misty Crk San Antonio, TX 78232-4629	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
<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.

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/20/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Doug Smith

7 Amount of contribution (\$)
35.00

6 Contributor address; City; State; Zip Code
**3110 Whisper Brk
San Antonio, TX 78230**

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

9 Employer (See instructions)
UTSA

Date
1/20/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Louis Barr

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**1102 Morgans Peak
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Los Barrios

Date
1/20/2023

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**4218 Misty Glade
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
none

Date
1/20/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Carolee Moore

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**4218 Misty Glade
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
none

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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:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/20/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Enrique H Flores

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1913 Chalk Rock Cv
Austin, TX 78735**

8 Principal occupation / Job title (See instructions)
President

9 Employer (See instructions)
Madhouse Development

Date
1/21/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Jo Anne Kaplan

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**112 Stone Hill Dr
San Antonio, TX 78258-3657**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
1/21/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Nicole TRUE

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**14 Heritage Oaks Dr
Austin, TX 78737**

Principal occupation / Job title (See instructions)
Lawyer

Employer (See instructions)
Nicole True Law Firm PC

Date
1/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Gordon Hartman

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**5210 Thousand Oaks #1200
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
President CEO

Employer (See instructions)
Gordon Hartman Enterprises

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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:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/23/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Margaret Hartman

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
1300 Fawn Bluff
San Antonio, TX 78248

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
1/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Gregg Kowalski

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
PO Box 1361
San Antonio, TX 78295-1361

Principal occupation / Job title (See instructions)
Hospitality

Employer (See instructions)
The RK Group

Date
1/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Bekki Kowalski

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
PO Box 1361
San Antonio, TX 78295-1361

Principal occupation / Job title (See instructions)
Hospitality

Employer (See instructions)
The RK Group

Date
1/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Harriette Furino

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
18323 Sonterra Place #1202
San Antonio, TX 78258

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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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 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms April Brahinsky 6 Contributor address; City; State; Zip Code 407 Rio Seco St San Antonio, TX 78232	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Musician		9 Employer (See instructions) self-employed
Date 1/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Ed Dylia Contributor address; City; State; Zip Code 13310 La Vista Dr San Antonio, TX 78216	Amount of contribution (\$) 30.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 1/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Michael Beldon Contributor address; City; State; Zip Code 4 Westelm Cir San Antonio, TX 78230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 1/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Huong Y Pham Contributor address; City; State; Zip Code 11603 Buck Springs Trl Tomball, TX 77377-9318	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Broker		Employer (See instructions) Atom Realty
<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: 10 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Teresa Y Tien_Pharm 6 Contributor address; City; State; Zip Code 11603 Buck Springs Trl Tomball, TX 77377-9318	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Student		9 Employer (See instructions) N/A
Date 1/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Roman V Torres Contributor address; City; State; Zip Code 8181 El Mundo St #1002 Houston, TX 77054-7108	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Student		Employer (See instructions) N/A
Date 1/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Javier Espinoza Contributor address; City; State; Zip Code 10202 Heritage Blvd San Antonio, TX 78216	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Espinoza Law Firm, PLLC
Date 1/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Eugene Marck Contributor address; City; State; Zip Code 345 Argyle San Antonio, TX 78209	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
<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: 11 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Larry Lamborn 6 Contributor address; City; State; Zip Code 2410 Border Lane San Antonio, TX 78232	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 1/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Minerva Sanchez Contributor address; City; State; Zip Code 3711 River Falls San Antonio, TX 78259	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) Associate		Employer (See instructions) Andrada-Vandeputte & Associates
Date 1/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Melinda Cox Contributor address; City; State; Zip Code 3255 Roan Way San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Smart Driving Club Spronsor		Employer (See instructions) NEISD
Date 1/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Art Downey Contributor address; City; State; Zip Code 730 Arch Stone San Antonio, TX 78258-2352	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) US Army Retired		Employer (See instructions) Colonel
<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: 12 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Leslie Newton 6 Contributor address; City; State; Zip Code 11114 Auldine Dr San Antonio, TX 78230	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 1/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Patricia Armstrong Contributor address; City; State; Zip Code 2215 Predness Lane San Antonio, TX 78248	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 1/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Jackie Rust Contributor address; City; State; Zip Code 1315 Chalisas Way San Antonio, TX 78216	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 1/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Gabrien Gregory Contributor address; City; State; Zip Code PO Box 700293 San Antonio, TX 78270	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Soldier/Educator		Employer (See instructions) N/A

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:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/28/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Robert Schultz

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**1022 navarro St
San antonio, TX 78205**

8 Principal occupation / Job title (See instructions)
Investor

9 Employer (See instructions)
RRS

Date
1/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Lee Imbimbo

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**13535 Vista Bonita
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Architect

Employer (See instructions)
Michael Imbimbo Inc

Date
1/29/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Pat Maloney Jr

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**239 E Commerce
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
The Law Offices of Maloney

Date
1/30/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr William Bedwell

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**15722 Mission Crst
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
na

Employer (See instructions)
retired

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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 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Ernestine Moore 6 Contributor address; City; State; Zip Code 12806 Laguna Vista Dr San Antonio, TX 78216-7712	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) N/A		9 Employer (See instructions) N/A
Date 1/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Steve McLeod Contributor address; City; State; Zip Code 0 Classen Crest San Antonio, TX 78258	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Sales		Employer (See instructions) Insightin Health
Date 1/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Thomas Corser Contributor address; City; State; Zip Code 10321 Sunflower Ln San Antonio, TX 78213	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Arboretum San Antonio
Date 1/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Susanne OBrien Contributor address; City; State; Zip Code 3239 Gazelle Range San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Software Developer		Employer (See instructions) retired
<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:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/31/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Jennifer Bowen-Shauver

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**1322 Arrow HI
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
substitute teacher

9 Employer (See instructions)
NEISD

Date
1/31/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Lawrence Romo

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4811 Isaac Ryan
San Antonio, TX 78253**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
1/31/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Kenneth Phelps

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**18222 Crystal Cv
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
seeker of wisdom

Employer (See instructions)
retired

Date
1/31/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Michael Pasquarella

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**107 Jardin Vis
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Field Artillery, then Medical Corps

Employer (See instructions)
US ARMY (RETIRED)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
1/31/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr John Facey

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**1935 Far Niente
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
USAF Retired

Date
1/31/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Freda Facey

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1935 Far Niente
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
1/31/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Patricia Newberry

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3414 Cardita
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
2/1/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Samuel N Hinton

Amount of contribution (\$)
75.00

Contributor address; City; State; Zip Code
**15634 Mission Crst
San Antonio, TX 78232-3452**

Principal occupation / Job title (See instructions)
N/A

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: 17 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/1/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Samuel M Hinton 6 Contributor address; City; State; Zip Code 15634 Mission Crst San Antonio, TX 78232-3452	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) N/A		9 Employer (See instructions) N/A
Date 2/1/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Charlie Jackson Contributor address; City; State; Zip Code 1108 Lavaca St Austin, TX 78701	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Technologist		Employer (See instructions) Acceleros
Date 2/1/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr David Anderson Contributor address; City; State; Zip Code 2007 Jolie Blossom San Antonio, TX 78247-7258	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) NEISD
Date 2/1/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms CJ Winckler Contributor address; City; State; Zip Code 13603 Oak Pebble San Antonio, TX 78232	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) UT Health

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/1/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Michael Gibbs 6 Contributor address; City; State; Zip Code 611 Hillsong San Antonio, TX 78258	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Retired
Date 2/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Gerald D Aldorf Contributor address; City; State; Zip Code 2018 Encino White San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 2/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Richard Garcia Contributor address; City; State; Zip Code 1902 Encino Bluff St San Antonio, TX 78259	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 2/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Tom Cummins Contributor address; City; State; Zip Code 5923 Woodridge Rock San Antonio, TX 78249-3032	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
<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: 19 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/6/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Annette Macias 6 Contributor address; City; State; Zip Code 21009 Pedregoso Ln San Antonio, TX 78258	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See instructions) Administrative Asst		9 Employer (See instructions) Macias & Associates
Date 2/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Cindy Carft Contributor address; City; State; Zip Code 1718 Encino Spg San Antonio, TX 78259	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 2/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Bill Carft Contributor address; City; State; Zip Code 1718 Encino Spg San Antonio, TX 78259	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 2/7/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Kim Petit Contributor address; City; State; Zip Code 2034 Oak Mist San Antonio, TX 78232-5473	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Self
<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**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/7/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Molly Cox

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**122 Jeanette Dr
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
Consultant

9 Employer (See instructions)
Self

Date
2/7/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Samuel Vesa

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2104 Pipestone Dr
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Senior Living Care

Employer (See instructions)
Pipestone Place Assisted Living

Date
2/7/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Terry Burns

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**13139 Vista del Mundo
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
MD

Employer (See instructions)
retired

Date
2/7/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Kimberly Bragman

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**PO Box 701983
San Antonio, TX 78270**

Principal occupation / Job title (See instructions)
Realtor

Employer (See instructions)
Self employed

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SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/7/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr David Neisen

7 Amount of contribution (\$) **50.00**

6 Contributor address; City; State; Zip Code
**6 Gemsbuck Isle
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
retired

9 Employer (See instructions)
n/a

Date
2/7/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Albert Carrisalez

Amount of contribution (\$) **50.00**

Contributor address; City; State; Zip Code
**111 W Huisache
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Community Affairs

Employer (See instructions)
UTSA

Date
2/7/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Jules Dufresne

Amount of contribution (\$) **35.00**

Contributor address; City; State; Zip Code
**141 Lindy Hls
Cibolo, TX 78108**

Principal occupation / Job title (See instructions)
Training Manager

Employer (See instructions)
Complete Data Systems

Date
2/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Caleb H Jonkman

Amount of contribution (\$) **500.00**

Contributor address; City; State; Zip Code
**136 N Jay Street
Griffith, IN 46319**

Principal occupation / Job title (See instructions)
Business Development Officer

Employer (See instructions)
Vehicle Management Solutions

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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 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/8/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Eduardo Parra 6 Contributor address; City; State; Zip Code 7323 Eagle Ledge San Antonio, TX 78249-2785	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) CEO		9 Employer (See instructions) Parra & Co
Date 2/8/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Mary Jane Chisholm Contributor address; City; State; Zip Code 1319 Muleshoe Pass San Antonio, TX 78258-3443	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 2/8/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr James Schwartz Contributor address; City; State; Zip Code 1510 Stag PT San Antonio, TX 78248	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 2/8/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Robin Tefft Contributor address; City; State; Zip Code 311 Woodway Forest San Antonio, TX 78216	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) robinjt15@gmail.com
<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**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/8/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms John Agather

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**300 W French Pl
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Musician

9 Employer (See instructions)
Self

Date
2/8/2023

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2310 winding Vw
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
Developer

Employer (See instructions)
Hillstar investments

Date
2/8/2023

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

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**15638 Dawn Crst
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Surgeon

Employer (See instructions)
Self-Employed

Date
2/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Margo Moreno

Amount of contribution (\$)
30.00

Contributor address; City; State; Zip Code
**1003 Queen Oak
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Business Intelligence

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/8/2023

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

7 Amount of contribution (\$)
500.00

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

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
N/A

Date
2/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Yehonati Leor

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**127 Sandhill Woods
Rockport, TX 78382**

Principal occupation / Job title (See instructions)
Drought/Climate Analyst

Employer (See instructions)
Self-employed

Date
2/9/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Gemma T Kennedy

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**509 River Road
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
2/9/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Edward J Morales

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**76 W Adams Ave #505
Detroit, MI 48226-1665**

Principal occupation / Job title (See instructions)
Agent

Employer (See instructions)
U.S. Customs Border Patrol

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Kathy Pham 6 Contributor address; City; State; Zip Code 806 Kayton Ave San Antonio, TX 78210-3604	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Agent		9 Employer (See instructions) U.S. Customs Border Patrol
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Linda A Comeaux Contributor address; City; State; Zip Code 3185 Morning Creek San Antonio, TX 78247	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Robert Corbo Contributor address; City; State; Zip Code 14607 Cadillac Dr San Antonio, TX 78248-1005	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Clif Douglass Contributor address; City; State; Zip Code 606 Garraty Rd San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Linebarger Goggan Blair & Sampson LLP
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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 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Greg Collins 6 Contributor address; City; State; Zip Code 11510 Whisper Cir San Antonio, TX 78230	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Professor		9 Employer (See instructions) UTHSCSA
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Russell Thompson Contributor address; City; State; Zip Code 19030 Mountain Pl San Antonio, TX 78259-2641	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Greg Rolater Contributor address; City; State; Zip Code 12542 Enfield Park San Antonio, TX 78232	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Structural Engineer		Employer (See instructions) Self
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Daniel Laser Contributor address; City; State; Zip Code 9539 Sinsonte St San Antonio, TX 78230	Amount of contribution (\$) 36.00
Principal occupation / Job title (See instructions) RETIRED		Employer (See instructions) RETIRED (BUT SERVING ON ARB BOARD)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 27 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr William Whiting 6 Contributor address; City; State; Zip Code 2203 Sun Wood St San Antonio, TX 78232	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Na		9 Employer (See instructions) Na
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Michael J Gomez Contributor address; City; State; Zip Code 1843 Pipestone Dr San Antonio, TX 78232	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 2/9/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Michael Jouffray Contributor address; City; State; Zip Code 2015 Oak Vista St San Antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) RETIRED		Employer (See instructions) RETIRED
Date 2/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linebarger Groggan Blair & Sampson LLP Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
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SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/10/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Mark Camman

7 Amount of contribution (\$) **50.00**

6 Contributor address; City; State; Zip Code
**3342 W Laurel Way
San Antonio, TX 78228**

8 Principal occupation / Job title (See instructions)
Instructor

9 Employer (See instructions)
ACCD

Date
2/10/2023

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

Amount of contribution (\$) **100.00**

Contributor address; City; State; Zip Code
**1924 Creek HI
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
Adjunct Professor

Employer (See instructions)
San Antonio College

Date
2/10/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Christian Archer

Amount of contribution (\$) **500.00**

Contributor address; City; State; Zip Code
**134 W mistletoe
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Self

Date
2/10/2023

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

Amount of contribution (\$) **500.00**

Contributor address; City; State; Zip Code
**1409 Quaker Ridge Dr
Austin, TX 78746**

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

Employer (See instructions)
Kelly Graphics

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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:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/13/2023

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

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
PO Box 781609
San Antonio, TX 78278-1609

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
2/13/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr John Nicholls

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
2310 Shadow Cliff
San Antonio, TX 78232

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
2/15/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Mary Rose Brown

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
48 Vineyard
San Antonio, TX 78257

Principal occupation / Job title (See instructions)
CAO

Employer (See instructions)
NuStar

Date
2/15/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr William E Greeehy

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
PO Box 780489
San Antonio, TX 78278

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/15/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Michael A Hogan

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1535 Yosemite Oaks Cr
San Antonio, TX 78213-1637**

8 Principal occupation / Job title (See instructions)
President CEO

9 Employer (See instructions)
Hogan Properties Company

Date
2/15/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Mary Hogan

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**1535 Yosemite Oaks Cr
San Antonio, TX 78213-1637**

Principal occupation / Job title (See instructions)
Dir. Special Projects and Facilities

Employer (See instructions)
University of Texas at San Antonio

Date
2/16/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Kevin Corcoran

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9723 Garden Way
Saint John, IN 46373**

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
URVMS

Date
2/18/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr John Kent

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**735 Walder Trail
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 31 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Homer Nelson 6 Contributor address; City; State; Zip Code 510 Texas Point San Antonio, TX 78260	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 2/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Taryn McCain Contributor address; City; State; Zip Code 3402 Windy Ridge Ct San Antonio, TX 78259	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 2/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Jean Latsha Contributor address; City; State; Zip Code 5014 W. Frances Pl Austin, TX 78731	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Housing Developer		Employer (See instructions) Pedcor Invedstments
Date 2/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr David Miller Contributor address; City; State; Zip Code 15834 Mission Ridge San Antonio, TX 78232	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Sales		Employer (See instructions) Eckert Insurance

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
2/23/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Don LeBlanc

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**70 Courtside Circle
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
2/24/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Kevin N Eichelbaum

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**18618 Corsini Dr
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
2/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Larry K Travis

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**230 Lovera
San Antonio, TX 78212-1213**

Principal occupation / Job title (See instructions)
Architect

Employer (See instructions)
Self

Date
2/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Richard Adcock

Amount of contribution (\$)
35.00

Contributor address; City; State; Zip Code
**14806 Dancers Image
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Accountant

Employer (See instructions)
Schuh Browne P.C.

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 33 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Walter Paulissen 6 Contributor address; City; State; Zip Code 15919 Alsace San Antonio, TX 78232	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Immigration Judge		9 Employer (See instructions) U.S. Dept. of Justice
Date 3/1/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Garrett Brown Contributor address; City; State; Zip Code 48 Vineyard San Antonio, TX 78257	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Lead Public Affairs Specialist		Employer (See instructions) NuStar
Date 3/1/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Marilyn O Ellis Contributor address; City; State; Zip Code 15232 Antler Creek San Antonio, TX 78248-2009	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Robert L Worth Contributor address; City; State; Zip Code 270 Terrell Rd San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Developer		Employer (See instructions) Worth & Associates
<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:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
3/2/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Mary H Worth

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**270 Terrell Rd
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
3/2/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Joy E Hastings

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2222 Pear Blossom St
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
3/2/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Jean Copeland

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**947 Riverstone Dr
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/a

Date
3/2/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Jim Copeland

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**947 Riverstone Dr
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/a

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 35 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Russell Thompson 6 Contributor address; City; State; Zip Code 19030 Mountain Pl San Antonio, TX 78259-2641	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr David Goff Contributor address; City; State; Zip Code 19538 Mill Oak San Antonio, TX 78258-3125	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Medical Physicist		Employer (See instructions) Medical & Radiation Physics, Inc.
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Erik Solmundson Contributor address; City; State; Zip Code 15219 Bent Moss St San Antonio, TX 78232	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Contracts administrator		Employer (See instructions) Park Place Recreation Designs, Inc.
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Alice Penrod Contributor address; City; State; Zip Code 14819 Turkey Trail San Antonio, TX 78232	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) None
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 36 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Parrish Ticer 6 Contributor address; City; State; Zip Code 1507 Santa Fe Trail Dr San Antonio, TX 78232	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Design		9 Employer (See instructions) Self
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Jimmy Toubin Contributor address; City; State; Zip Code 230 W Sunset Rd San Antonio, TX 78209-2682	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) President		Employer (See instructions) Toubin Insurance Agency
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Robert W Miller Contributor address; City; State; Zip Code 14215 Jones Maltzberger Rd San Antonio, TX 78247	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) none
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Eligio Obregon Contributor address; City; State; Zip Code 19202 Redriver Pass San Antonio, TX 78259	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 37 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Irene Obregon 6 Contributor address; City; State; Zip Code 19202 Redriver Pass San Antonio , TX 78259	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See instructions) N/A		9 Employer (See instructions) Retired
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Pat Ezell Contributor address; City; State; Zip Code 1911 Archway Dr San Antonio, TX 78232	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Edward Powers Contributor address; City; State; Zip Code 3523 Red Oak Ln San Antonio , TX 78230	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/ A
Date 3/2/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Donna Talbott Contributor address; City; State; Zip Code 2622 Crow Vly San Antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
3/2/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Roland Rodriguez

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**18262 Emerald Forest Dr
San Antonio, TX 78259**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
3/2/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Edward Ray

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**18126 Beargrass Ct
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
3/3/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Doug Smith

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**3110 Whisper Brk
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
UTSA

Date
3/3/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Bryan D Baker

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**427 Stonewood St
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Self employed

Employer (See instructions)
Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 39 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/5/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Richard Murphy 6 Contributor address; City; State; Zip Code 1342 Oak Path San Antonio, TX 78258	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) retired		9 Employer (See instructions) retired
Date 3/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr David Smith Contributor address; City; State; Zip Code 3338 Yorktown Dr San Antonio, TX 78230	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 3/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Wendy Drezek Contributor address; City; State; Zip Code 6 Westelm Gdns San Antonio, TX 78230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
Date 3/5/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Bruce Akright Contributor address; City; State; Zip Code 322 Bluffcrest San antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) NE Ob/Gyn Associates
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 40 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/5/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Angel R Santiago 6 Contributor address; City; State; Zip Code 2706 Caledonian Ct San Antonio, TX 78230	7 Amount of contribution (\$) 40.00
8 Principal occupation / Job title (See instructions) N/A		9 Employer (See instructions) N/A
Date 3/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Judith Vallery Contributor address; City; State; Zip Code 15106 Morning Tree San Antonio, TX 78232	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 3/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Jeanette Wyland Contributor address; City; State; Zip Code 1107 COUNTRY PIKE San Antonio, TX 78216	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 3/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Richard Sexton Contributor address; City; State; Zip Code 839 Visor Dr San Antonio, TX 78258	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 41 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Mary Jane Verette 6 Contributor address; City; State; Zip Code 115 Palo Grande San Antonio, TX 78232	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) President & CEO		9 Employer (See instructions) San Antonio Parks Foundation
Date 3/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Jill A Williamson Contributor address; City; State; Zip Code 8 Remington San Antonio, TX 78258-7710	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 3/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Denise P Schneider Contributor address; City; State; Zip Code 11322 Whisper Falls San Antonio, TX 78230-3540	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 3/6/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Patricia L Wood Contributor address; City; State; Zip Code 1719 Forest Spring St San Antonio, TX 78232-4724	Amount of contribution (\$) 35.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
3/7/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Judith C Trotti

7 Amount of contribution (\$)
35.00

Contributor address; City; State; Zip Code
25267 Cambridge Well
San Antonio, TX 78261

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
3/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Stephen L Hixon

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
114 Rio Bravo
San Antonio, TX 78232

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
3/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Martha M Hixon

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
114 Rio Bravo
San Antonio, TX 78232

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
3/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Janet U Lancaster

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
1903 Creek Hollow
San Antonio, TX 78259

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 43 of 46
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/8/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Hanes A Segler 6 Contributor address; City; State; Zip Code 13000 Vista Del Norte #732 San Antonio, TX 78216	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 3/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Ryan T Takao Contributor address; City; State; Zip Code 19206 Barrow Bay San Antonio, TX 78258-3846	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Tennis Coach		Employer (See instructions) Self
Date 3/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Zada C Takao Contributor address; City; State; Zip Code 19206 Barrow Bay San Antonio, TX 78258-3846	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Accountant		Employer (See instructions) FHK Accounting
Date 3/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Caroline Brown Contributor address; City; State; Zip Code 7510 Quail Run Dr San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Brown & McDonald
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
3/13/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Minerva A Sanchez

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**3711 River Falls
San Antonio, TX 78259**

8 Principal occupation / Job title (See instructions)
Associate

9 Employer (See instructions)
Andrada-Vandeputte & Associates

Date
3/15/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Joel Pollack

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**24611 Fairway Spgs
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
Managing Partner

Employer (See instructions)
Streamline Advisory Partners

Date
3/18/2023

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

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Real Estate

Employer (See instructions)
Versa Terra Development

Date
3/21/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Alana Woods

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**12106 Apricot Dr
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

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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:
45 of 46

2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
3/21/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Bonnie Connor

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
3750 Hunters Cir
San Antonio, TX 78230

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
N/B

Date
3/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Michael McNaughton

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
20031 Encino Ridge
San Antonio, TX 78259

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
3/24/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms Kathy McNaughton

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
20031 Encino Ridge
San Antonio, TX 78232

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
3/24/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mr Robert Stevens

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
1843 Wood Grove
San Antonio, TX 78729

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self

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:
46 of 46

2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
3/24/2023

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

7 Amount of contribution (\$)
20.00

6 Contributor address; City; State; Zip Code
**8605 Snowden Cove
Austin, TX 78729**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

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

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 John K Courage		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)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

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 John K Courage		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 John K Courage

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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/2/2023	5 Payee name Mr Colt Osburn		
6 Amount (\$) 2500.00	7 Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Consulting		(b) Description Consulting-Campaign
	(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 John Courage		Office sought Council District 9	Office held N/A

Date 1/4/2023	Payee name Alamo Mailing		
Amount (\$) 2935.12	Payee address; City; State; Zip Code 13114 Lookout Run San Antonio, TX 78250		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Vote by Mail Mailer
	<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 John Courage		Office sought Council District 9	Office held N/A

Date 1/4/2023	Payee name Weebly		
Amount (\$) 102.34	Payee address; City; State; Zip Code 460 Bryant St San Francisco, CA 94107		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Website Svcs
	<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 John Courage		Office sought Council District 9	Office held N/A

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: 2 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/4/2023	5 Payee name Weebly		
6 Amount (\$) 102.34	7 Payee address; City; State; Zip Code 460 Bryant St San Francisco, CA 94107		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Website Svcs
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 1/6/2023	Payee name Viva Politics		
Amount (\$) 2000.00	Payee address; City; State; Zip Code 1850 Fredericksburg San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Campaign Consulting
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 1/6/2023	Payee name CPRK-II Ltd		
Amount (\$) 6000.00	Payee address; City; State; Zip Code 350 N Saint Paul St Dallas, TX 75201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Office Expense		Description Lease for office
	<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 John Courage Office sought Council District 9 Office held N/A			

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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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/9/2023	5 Payee name John the Greek		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 16602 San Pedro San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Office Expense		(b) Description Campagn meeting food
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 1/9/2023	Payee name Texas Democratic Party		
Amount (\$) 965.00	Payee address; City; State; Zip Code 1106 Lavaca #100 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description VAN use
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 1/13/2023	Payee name Cricket Wireless		
Amount (\$) 30.00	Payee address; City; State; Zip Code 575 Morosgo Dr Atlanta, GA 30324		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Utilities		Description phone service
	<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 John Courage Office sought Council District 9 Office held N/A			

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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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)			
4 Date 1/13/2023	5 Payee name Rocket Science Group, LLC					
6 Amount (\$) 122.59	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308					
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Advertising			
	(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 <table border="0" style="width:100%"> <tr> <td>Candidate / Officeholder name John Courage</td> <td>Office sought Council District 9</td> <td>Office held N/A</td> </tr> </table>				Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A
Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A				
Date 1/15/2023	Payee name Mr Colt Osburn					
Amount (\$) 2500.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Consulting-Campaign			
	<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 <table border="0" style="width:100%"> <tr> <td>Candidate / Officeholder name John Courage</td> <td>Office sought Council District 9</td> <td>Office held N/A</td> </tr> </table>				Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A
Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A				
Date 1/17/2023	Payee name NationBuilder					
Amount (\$) 35.00	Payee address; City; State; Zip Code 520 S. Grand Ave Los Angeles, CA 90071					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Website Svcs			
	<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 <table border="0" style="width:100%"> <tr> <td>Candidate / Officeholder name John Courage</td> <td>Office sought Council District 9</td> <td>Office held N/A</td> </tr> </table>				Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A
Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A				

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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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/17/2023	5 Payee name ZOOM US		
6 Amount (\$) 16.00	7 Payee address; City; State; Zip Code 55 Almanden Blvd San Jose, CA 95113		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Video Meeting		(b) Description Website Svcs
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 1/17/2023	Payee name Whitleys Lock and Safe		
Amount (\$) 104.46	Payee address; City; State; Zip Code 14542 Brook Hollow Blvd San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Office Expense		Description Lock change and keys
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 1/18/2023	Payee name City of San Antonio		
Amount (\$) 100.00	Payee address; City; State; Zip Code PO Box 839975 San Antonio, TX 78283-3975		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Legal fees		Description City Filing Fee
	<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 John Courage Office sought Council District 9 Office held N/A			

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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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/20/2023	5 Payee name Jesse Trevino Insurance		
6 Amount (\$) 729.55	7 Payee address; City; State; Zip Code 7611 Bluesage CV San Antonio, TX 78249		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Insurance		(b) Description General Liability Insurance
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 1/21/2023	Payee name 3-D Signs		
Amount (\$) 2435.63	Payee address; City; State; Zip Code 7986 First St Somerset, TX 78069		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Signs
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 1/23/2023	Payee name Hustle Inc		
Amount (\$) 100.00	Payee address; City; State; Zip Code 548 Market St San Francisco, CA 94104		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Phne/texting
	<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 John Courage Office sought Council District 9 Office held N/A			

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: 7 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2023	5 Payee name Campaign Verify		
6 Amount (\$) 95.00	7 Payee address; City; State; Zip Code 1215 31st Street Washington, DC 20007-9998		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Campaign 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 John Courage Office sought Council District 9 Office held N/A			
Date 1/23/2023	Payee name Simply Easier Payments		
Amount (\$) 23.71	Payee address; City; State; Zip Code 3000 Cosddaile Dr Durham, NC 27705		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Service Charges		Description Payment 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 John Courage Office sought Council District 9 Office held N/A			
Date 1/23/2023	Payee name Prestige Printing LLC		
Amount (\$) 3309.20	Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Campaign vote publication
	<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 John Courage Office sought Council District 9 Office held N/A			

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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/27/2023	5 Payee name Mr Colt Osburn		
6 Amount (\$) 238.00	7 Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Consulting		(b) Description Consulting for Phone Calls
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 1/27/2023	Payee name Mr Colt Osburn		
Amount (\$) 238.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Consulting for Phone Calls
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 1/27/2023	Payee name Blue Sky Printing		
Amount (\$) 458.00	Payee address; City; State; Zip Code 143 Westknoll San Antonio, TX 78227		
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 John Courage Office sought Council District 9 Office held N/A			

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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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/2023	5 Payee name Office Max		
6 Amount (\$) 57.37	7 Payee address; City; State; Zip Code 17700 US Hwy 281 #800 San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Vote by Mail Print
	(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 John Courage	Office sought Council District 9	Office held N/A

Date 1/30/2023	Payee name Carriqui		
Amount (\$) 500.00	Payee address; City; State; Zip Code 239 E Grayson San Antonio, TX 78215		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Deposit for Campaign Fundraiser
	<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 John Courage	Office sought Council District 9	Office held N/A

Date 1/31/2023	Payee name Mr Colt Osburn		
Amount (\$) 2500.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Consulting-Campaign
	<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 John Courage	Office sought Council District 9	Office held N/A

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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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2023	5 Payee name Uprinting		
6 Amount (\$) 714.00	7 Payee address; City; State; Zip Code 800 Haskell Ave Van Nuys, CA 91406		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Campaign Materials
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 1/31/2023	Payee name Frost Bank		
Amount (\$) 5.00	Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Service Charges		Description Bank Service Charge
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 2/1/2023	Payee name Frost Bank		
Amount (\$) 44.85	Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Service Charges		Description Bank Check Order
	<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 John Courage Office sought Council District 9 Office held N/A			

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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 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/1/2023	5 Payee name Hustle Inc		
6 Amount (\$) 612.72	7 Payee address; City; State; Zip Code 548 Market St San Francisco, CA 94104		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Phne/texting
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 2/3/2023	Payee name Mr Colt Osburn		
Amount (\$) 967.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Consulting Phone and Text
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 2/6/2023	Payee name 3-D Signs		
Amount (\$) 811.88	Payee address; City; State; Zip Code 7986 First St Somerset, TX 78069		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Signs
	<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 John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: 12 of 22	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
4 Date 2/13/2023	5 Payee name Rocket Science Group, LLC	
6 Amount (\$) 122.59	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Advertising
	(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 John Courage	Office sought Council District 9 Office held N/A
Date 2/13/2023	Payee name Cricket Wireless	
Amount (\$) 30.00	Payee address; City; State; Zip Code 575 Morosgo Dr Atlanta, GA 30324	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Utilities	Description phone service
	<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 John Courage	Office sought Council District 9 Office held N/A
Date 2/15/2023	Payee name Mr Colt Osburn	
Amount (\$) 2500.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting	Description Consulting-Campaign
	<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 John Courage	Office sought Council District 9 Office held N/A

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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: 13 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/16/2023	5 Payee name ZOOM US		
6 Amount (\$) 16.00	7 Payee address; City; State; Zip Code 55 Almanden Blvd San Jose, CA 95113		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Video Meeting		(b) Description Website Svcs
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 2/16/2023	Payee name NationBuilder		
Amount (\$) 35.00	Payee address; City; State; Zip Code 520 S. Grand Ave Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Website Svcs
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 2/22/2023	Payee name AT&T		
Amount (\$) 88.53	Payee address; City; State; Zip Code 13127 San Pedro San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Utilities		Description Internet
	<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 John Courage Office sought Council District 9 Office held N/A			

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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: 14 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/22/2023	5 Payee name CPS Energy		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code PO Box 2678 San Antonio, TX 78289		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Utilities		(b) Description Electricity
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 2/27/2023	Payee name Restoration Center		
Amount (\$) 50.00	Payee address; City; State; Zip Code 5251 Old Pearsall Road San Antonio, TX 78242		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Campaign Table
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 2/28/2023	Payee name Mr Colt Osburn		
Amount (\$) 2500.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Consulting-Campaign
	<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 John Courage Office sought Council District 9 Office held N/A			

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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: 15 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2023	5 Payee name Frost Bank		
6 Amount (\$) 5.00	7 Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Service Charges		(b) Description Bank Service Charge
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 3/1/2023	Payee name Hustle Inc		
Amount (\$) 929.79	Payee address; City; State; Zip Code 548 Market St San Francisco, CA 94104		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Phone/texting
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 3/2/2023	Payee name Arthur Pfeil Smart Flowers		
Amount (\$) 100.00	Payee address; City; State; Zip Code 803 W Ashby Pl San Antonio, TX 78212		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Community Recognition R. Castro
	<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 John Courage Office sought Council District 9 Office held N/A			

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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: 16 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2023	5 Payee name 3-D Signs		
6 Amount (\$) 1299.00	7 Payee address; City; State; Zip Code 7986 First St Somerset, TX 78069		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description 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 John Courage Office sought Council District 9 Office held N/A			
Date 3/3/2023	Payee name TOSKR, Inc		
Amount (\$) 287.97	Payee address; City; State; Zip Code 1999 Harrison St San Francisco, CA 94612		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Phone/texting 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 John Courage Office sought Council District 9 Office held N/A			
Date 3/11/2023	Payee name Ms Jennifer Hernandez		
Amount (\$) 760.00	Payee address; City; State; Zip Code 9655 Seagate Park San Antonio, TX 78245		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Blockwalking
	<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 John Courage Office sought Council District 9 Office held N/A			

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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: 17 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/13/2023	5 Payee name Rocket Science Group, LLC		
6 Amount (\$) 122.59	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Advertising
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 3/13/2023	Payee name Cricket Wireless		
Amount (\$) 30.00	Payee address; City; State; Zip Code 575 Morosgo Dr Atlanta, GA 30324		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Utilities		Description phone service
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 3/15/2023	Payee name Mr Colt Osburn		
Amount (\$) 2500.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consulting		Description Consulting-Campaign
	<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 John Courage Office sought Council District 9 Office held N/A			

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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: 18 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/16/2023	5 Payee name Neighborhood News Inc		
6 Amount (\$) 2728.00	7 Payee address; City; State; Zip Code 3740 Colony Dr. San Antonio, TX 78230		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Advertising in Neighborhood News
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 3/16/2023	Payee name ZOOM US		
Amount (\$) 17.07	Payee address; City; State; Zip Code 55 Almanden Blvd San Jose, CA 95113		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Video Meeting		Description Website Svcs
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 3/16/2023	Payee name NationBuilder		
Amount (\$) 35.00	Payee address; City; State; Zip Code 520 S. Grand Ave Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Website Svcs
	<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 John Courage Office sought Council District 9 Office held N/A			

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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: 19 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/18/2023	5 Payee name Mr Robert Schultz		
6 Amount (\$) 380.00	7 Payee address; City; State; Zip Code 1022 Navarro #305 San Antonio, TX 78205		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Expense		(b) Description Blockwalking
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 3/18/2023	Payee name Ms Jennifer Hernandez		
Amount (\$) 380.00	Payee address; City; State; Zip Code 9655 Seagate Park San Antonio, TX 78245		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Blockwalking
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 3/22/2023	Payee name Ms Carmen Torres		
Amount (\$) 510.00	Payee address; City; State; Zip Code 2926 War Feather San Antonio, TX 78238		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Phone Banking
	<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 John Courage Office sought Council District 9 Office held N/A			

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: 20 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2023	5 Payee name Ms Michelle McBurney		
6 Amount (\$) 510.00	7 Payee address; City; State; Zip Code 2926 War Feather San Antonio, TX 78238		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Expense		(b) Description Phone Banking
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 3/22/2023	Payee name Ms Herlinda Torres		
Amount (\$) 476.00	Payee address; City; State; Zip Code 619 N Hackberry San Antonio, TX 78202		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Phone Banking
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 3/23/2023	Payee name AT&T		
Amount (\$) 99.11	Payee address; City; State; Zip Code 13127 San Pedro San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Utilities		Description Internet
	<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 John Courage Office sought Council District 9 Office held N/A			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: 21 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2023	5 Payee name Ms Jennifer Hernandez		
6 Amount (\$) 620.00	7 Payee address; City; State; Zip Code 9655 Seagate Park San Antonio, TX 78245		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Expense		(b) Description Blockwalking
	(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 John Courage Office sought Council District 9 Office held N/A			
Date 3/24/2023	Payee name Mr Robert Schultz		
Amount (\$) 600.00	Payee address; City; State; Zip Code 1022 Navarro #305 San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Blockwalking
	<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 John Courage Office sought Council District 9 Office held N/A			
Date 3/24/2023	Payee name Mr Kevin Sittenauer		
Amount (\$) 460.00	Payee address; City; State; Zip Code 224 Willow Crest Cibolo, TX 78108		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Expense		Description Blockwalking
	<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 John Courage Office sought Council District 9 Office held N/A			

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: 22 of 22	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
4 Date 3/27/2023	5 Payee name 3-D Signs	
6 Amount (\$) 1028.38	7 Payee address; City; State; Zip Code 7986 First St Somerset, TX 78069	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description 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 John Courage	Office sought Council District 9 Office held N/A

Date 3/27/2023	Payee name Office Max	
Amount (\$) 29.77	Payee address; City; State; Zip Code 17700 US Hwy 281 #800 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Printing Flyers
	<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 John Courage	Office sought Council District 9 Office held N/A

Date 3/27/2023	Payee name PayPal	
Amount (\$) 582.19	Payee address; City; State; Zip Code 2211 N. First St. San Jose, CA 95131	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Processing Expenses	Description Service Charges
	<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 John Courage	Office sought Council District 9 Office held N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 John K Courage	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 John K Courage

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 John K Courage	3 Filer ID (Ethics Commission Filers)
--	---	--

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
--	-------------------------------	---------------	-------------

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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 John K Courage	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 John K Courage	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 Candidate / Officeholder name Office sought Office held		
Date	Business name	
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 Candidate / Officeholder name Office sought Office held		
Date	Business name	
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 Candidate / Officeholder name Office sought Office held		

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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 John K Courage		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 John K Courage

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 John K Courage		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)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

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 John K Courage

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