CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction G		2 Total pages filed: 10		
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Claren	nce Thomas	МІ	OFFICE USE ONLY Date Received
		NICKNAME LAST Warre	n III	SUFFIX	0.
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE PO Box 295	#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
	Change of Address	Amarillo, TX 79105			Date Processed Date Imaged
<u> </u>	CAMPAIGN	MS / MRS / MR FIRST		MI	
5	TREASURER NAME	JA 3	50N	WII	
		NICKNAME LAST		SUFFIX	
		F061	iëson6		
6	CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PL		/ SUITE#; CITY;	STATE; ZIP CODE
	(Residence or Business)	1144 SHASTA D	LMARI	THO 1X	1110
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER OF STREET STRE			
8	REPORT TYPE		lay before election	Runoff Exceeded modified eporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9	PERIOD COVERED	Month Day Year 02/25/2024	THROUGH	Month Day 06/30/2024	Year 4
10	ELECTION	ELECTION DATE Month Day Year 03/05/2024	X Primary General	ELECTION TYPE Runoff Special	Other
11	L OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT Potter County Ta	(if known) x Assessor-Collector

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

CAMPAIG	N FINANCE REPORT	
15 C/OH NAME Warren, Clarence The	omas	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 500.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,812.55
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 36.00
ero anne utoto cho anne eso o anna su	4. TOTAL POLITICAL EXPENDITURES	\$ 3,958.08
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	st DAY \$ 61.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* 0.00
(1) Affidavit	Please complete either option below	<i>i</i> :
NOTARY STAMP/SEA		
	before me by this the which, witness my hand and seal of office.	day or
Signature of officer administ	ering oath Printed name of officer administering oath	Title of officer administering oath
(2) Unsworn Declarat		00/04/4008
My name is Thomas V		09/04/1990
My address is PO Box	295 Amarillo T	X 79109 USA
Executed in Potter	(street) (city) (city) (County, State of Texas , on the 15 day of July (month)	state) (zip code) (country) 20 24 (year)
	Signature of Candi	date/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 of 10			
18 FIL	ER NAM	IE .	19 Filer ID					
Wa	Warren III, Clarence Thomas							
	HEDULE ME OF S		SUBTOTAL AMOUNT					
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,000.00			
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	312.55			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4.		SCHEDULE E: LOANS		\$				
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	2,540.07			
6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	1,000.00			
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$				
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	418.01			
10		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$				
12		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				

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	MONETARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/10	
2	FILER NAME Warren III, Clarence Thomas	3	Filer ID	
4	Date 02/29/2024 5 Full name of contributor out-of-state PAC (ID#:) Elizalde, David 6 Contributor address; City; State; Zip Code 1751 SE 16th Ave Suite B Amarillo, TX 79102	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occupation / Job title (See Instructions) Owner 9 Employer (See Instructions) David's Quality Electric	<u> </u> s)		
			Varcion VA 1	0.4279040

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A2:				
		Sch: 1/1 Rpt: 5/10				
2 FILER NAME		3 Filer ID				
	Warren III, Clarence Thomas					
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution			
03/05/2024	Dawson, Noah		contribution (\$) description \$12.55 Food for sign holders at			
	7 Contributor address; City; State; Zip Code		polling place			
	1133 Sugarloaf Dr		i			
			_			
	Amarillo, TX 79110		Check if travel outside of Texas. Complete Schedule T,			
i	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See Instructions)			
Columnist		Amarillo Pioneer				
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 contribute	or's spouse (if any) (FOR JUDICIAL)			
16 If contributes	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	l				
16 if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
	The American Street Control of the C					
Date	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution contribution (\$) description			
02/26/2024			\$300.00 Photograph for use in			
	Contributor address; City; State; Zip Code		campaign materials			
	1605 S 2nd Street		į į			
	Tugumgari NIM 99401		-			
Driver all acco	Tucumcari, NM 88401	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. JUDICIAL) (See instructions)			
	upation / Job title (FOR NON-JUDICIAL) (See instructions)					
Owner	principal contraction (FOR TUDICIAL)	Jim Livingston Photography Contributor's job title (FOR JUDICIAL) (See instructions)				
Contributors	principal occupation (FOR JUDICIAL)	Contributor 5 job tide	(FOR JUDICIAL) (See Halladdons)			
Contributada	ompleyed from (EOD HIDICIAL)	Law firm of contribut	or's spouse (if any) (FOR JUDICIAL)			
Contributors	employer/law firm (FOR JUDICIAL)	Law iiiii oi conuibue	or a spouse (ii arry) (FOR SODICIAL)			
If anothibutes	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>				
ii contributor	is a critic, law firm of parends) (it any) (FOR JODICIAL)					
1						

5 JUL 2024 PHJ 4125

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gitf/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.

EXPENDITURE CATEGORIES FOR BOX 8(a)

		The instruction dutie explains now to complete this form.	_
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 1/3 Rpt: 6/10	Warren III, Clarence Thomas	
4	Date	5 Payee name	
	03/07/2024	Burkett Outdoor	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	PO Box 50372	- 1
			- 1
		Amarillo, TX 79159	- 1
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	\neg
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	- 1
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Billboard	
_	CInto ONII V if disent	Candidate/Officeholder name Office sought Office held	\dashv
9	Complete ONLY if direct expenditure to benefit C/OI	•	
			=
	Date	Payee name Churds	
	03/05/2024	Chuy's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$355.87	8400 I-40	
		Amarillo, TX 79106	
_			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if the set of Taxan Complete Schedule T	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Payee name	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 03/03/2024	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Payee name Hummers Sports Cafe	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Payee name Hummers Sports Cafe Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 03/03/2024 Amount (\$) \$73.40	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd # B2	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 03/03/2024 Amount (\$) \$73.40	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd # B2 Amarillo, TX 79109 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 03/03/2024 Amount (\$) \$73.40	Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd # B2 Amarillo, TX 79109 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 03/03/2024 Amount (\$) \$73.40	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd # B2 Amarillo, TX 79109 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 03/03/2024 Amount (\$) \$73.40 PURPOSE OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 03/03/2024 Amount (\$) \$73.40	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd # B2 Amarillo, TX 79109 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals for volunteers Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 03/03/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd # B2 Amarillo, TX 79109 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals for volunteers Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 03/03/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering and venue for watch party Candidate/Officeholder name Office sought Office held Payee name Hummers Sports Cafe Payee address; City; State; Zip Code 2600 Paramount Blvd # B2 Amarillo, TX 79109 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals for volunteers Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expe Printing Expe Salaries/Wa		Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explains I	how to com	plete this form.	
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID
	Sch: 2/3 Rpt: 7/10	Warren III,	Clarence Thomas			
4	Date	5 Payee name				
	02/27/2024	Lowe's				
6	Amount (\$)	7 Payee addre	ss; City; State;	Zip Cod	e	
_	\$28.10	6401 Lowes				
		Amarillo, T	< 79124			
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this sch	edule) (b) Description	
	OF EXPENDITURE	Supplies				outside of Texas. Complete Schedule T. n, TX, officeholder living expense
						ix broken large signs
					одруже и	
9	Complete ONLY if direct	Candidate/Off	iceholder name C	Office soug	nt	Office held
J	expenditure to benefit C/Ol		Sondia name			
	Date	Payee name				
	02/26/2024	Neel & Par	iners			
Г	Amount (\$)	Payee addre	ss; City; State	; Zip Cod	е	
	\$476.70	8601 Ice H	ouse Dr			
		Unit 7108				
		North Richl	and Hills, TX 76180			
H	PURPOSE	(a) Category (s	Gee Categories listed at the top of this sch	nedule)	b) Description	
ļ	OF	Advertising		,	Check if trave	outside of Texas. Complete Schedule T,
	EXPENDITURE	ا "				in, TX, officeholder living expense
					Advertising	Placement
						22
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name (Office soug	ht	Office held
L	experialitare to benefit Gro					
	Date	Payee name				
	03/01/2024	Neel & Par	tners			
Γ	Amount (\$)	Payee addre	ess; City; State	; Zip Cod	le	
	\$100.00	8601 Ice H	ouse Dr			
		Unit 7108				
		North Rich	land Hills, TX 76180			
-	PURPOSE	(a) Category	See Categories listed at the top of this sci	hedule)	(b) Description	
	OF	Advertising			Check if trave	el outside of Texas. Complete Schedule T.
1	EXPENDITURE					tin, TX, officeholder living expense
					Advertising	Placement
L			-	0/5		06
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	Int	Office held
L	onpondition to benefit of					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equlpment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete the	nis form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 3/3 Rpt: 8/10	Warren III, Clarence Thomas	
4	Date	5 Payee name	
	03/01/2024	Neel & Partners	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$750.00	8601 Ice House Dr	
		Unit 7108	
		North Richland Hills, TX 76180	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Dec	scription
	OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule To
	LA LIDITORE		Check if Austin, TX, officeholder living expense onsulting fees and ad placement
			insularing lees and ad placement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Since field
=	Date	Payee name	
	03/15/2024	Warren, Thomas	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$420.00	PO Box 295	
	Ψ-20.00	1000000	
		Amarillo, TX 79105	
H	PURPOSE	T _n ,	escription
	OF	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		Re	eimbursing expenses made from personal funds
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
_		· 	

LINPAID	INCURRED	OBLIGATIONS	S
OINE AID		ODEIOAIIOIN	_

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political		Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
Candidate/Onceroiden/Folitical	-	ns how to complete this form.	5 (and a day)
Total pages Schedule F2: Sch: 1/1 Rpt: 9/10	2 FILER NAME Warren III, Clarence Thomas	-	3 Filer ID
TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIGAT	TIONS	\$
Dale 03/06/2024	6 Payee name Neel & Partners		
Amount (\$) \$1,000.00	8 Payee address; City; Sta 8601 Ice House Dr Unit 7108 North Richland Hills, TX 76180	tte; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
D PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Consulting Expense	Check if travel	outside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought	Office held

www.ethics.state.tx.us

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Event Expense Food/Beverage Expense Travel in District Consulting Expense Contributions/ Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME Filer ID Warren III, Clarence Thomas Sch: 1/1 Rpt: 10/10 4 Date Payee name 03/01/2024 Airbnb 6 Amount (\$) Payee address; City; State; Zip Code 888 Brannan St \$418.01 Reimbursement from political contributions San Francisco, TX 94103 intended Check if travel outside of Texas. Complete Schedule T. (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Travel In District **EXPENDITURE** Lodging for volunteers Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH