



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

<b>14 C/OH NAME</b> <b>Mr Marc K Whyte</b>	<b>15 Filer ID</b> (Ethics Commission Filers)
---	---

<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>           <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	<b>\$ 0</b>
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 87875.75</b>
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	<b>\$ 11.72</b>
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	<b>\$ 8950.66</b>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 107006.81</b>
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	<b>\$ 50000.00</b>

**18 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

**\*\*\* Electronically Certified \*\*\***

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mr Marc K Whyte, this the 15th day of July, 2024, 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

<b>19</b> FILER NAME <b>Mr Marc K Whyte</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$ 87755.00</b>
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$ 120.75</b>
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		<b>\$ 0</b>
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		<b>\$ 0</b>
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 8950.66</b>
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		<b>\$ 0</b>
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		<b>\$ 0</b>
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		<b>\$ 0</b>
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		<b>\$ 0</b>
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		<b>\$ 0</b>

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**1/16/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mrs Margaret V Hartman**

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

6 Contributor address; City; State; Zip Code  
**1500 Fawn Bluff  
San Antonio, TX 78245**

8 Principal occupation / Job title (See instructions)  
**Co-Founder**

9 Employer (See instructions)  
**Gordon Hartman Family Foundation**

Date  
**1/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Gordon V Hartman**

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

Contributor address; City; State; Zip Code  
**1202 W. Bitters Bldg. 1 #1200  
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**Philanthropist/Founder**

Employer (See instructions)  
**Gordon Hartman Family Foundation**

Date  
**1/26/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**John Brenneman**

Amount of contribution (\$)  
**80.00**

Contributor address; City; State; Zip Code  
**4 Bromwich Ct  
San Antonio, TX 78218**

Principal occupation / Job title (See instructions)  
**Engineer**

Employer (See instructions)  
**Air Force Civil Service**

Date  
**4/5/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jonathan Whyte**

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

Contributor address; City; State; Zip Code  
**4125 Northaven Rd  
Dallas, TX 75229**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Tiago Title, LLC**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**2 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/5/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Stephen Adger**

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

6 Contributor address; City; State; Zip Code  
**2217 Fairview Street  
Houston, TX 77019**

8 Principal occupation / Job title (See instructions)  
**retired**

9 Employer (See instructions)

Date  
**4/9/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anny Whyte**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**2211 Fairview St  
Houston, TX 77019**

Principal occupation / Job title (See instructions)  
**Business development**

Employer (See instructions)

Date  
**4/10/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lawrence Whyte**

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

Contributor address; City; State; Zip Code  
**2215 Alcova Ridge Drive  
Las Vegas, NV 89135**

Principal occupation / Job title (See instructions)  
**Company president**

Employer (See instructions)

Date  
**4/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**KKW Donaldson LLC**

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

Contributor address; City; State; Zip Code  
**8182 Two Winds  
San Antonio, TX 78255**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**3 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/16/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Michael Cortez**

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

6 Contributor address; City; State; Zip Code  
**119 Paddington  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**Owner**

9 Employer (See instructions)  
**Mi Tierra Café**

Date  
**4/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Richard K Sheldon**

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

Contributor address; City; State; Zip Code  
**4006 Green Oak Dr  
Waco, TX 76710**

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

Employer (See instructions)  
**Rick Sheldon Real Estate, LLC**

Date  
**4/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lisa L Sheldon**

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

Contributor address; City; State; Zip Code  
**4006 Green Oak Dr  
Waco, TX 76710**

Principal occupation / Job title (See instructions)  
**Realtor**

Employer (See instructions)  
**Rick Sheldon Real Estate, LLC**

Date  
**4/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Peter Greenblum**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**1041 Shook Ave  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Greenblum LLC**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>4 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/16/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Habitat Construction Services</b> ..... 6 Contributor address; City; State; Zip Code <b>11618 Wood Harbor San Antonio, TX 78249</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date <b>4/16/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Moxi Creative</b> ..... Contributor address; City; State; Zip Code <b>7334 Blanco Rd #100 San Antonio, TX 78216</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date <b>4/17/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mr Charles H Turner</b> ..... Contributor address; City; State; Zip Code <b>7118 Parkside Place San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Safety Manager</b>		Employer (See instructions) <b>Zachry Corp</b>
Date <b>4/17/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mrs Nancy Turner</b> ..... Contributor address; City; State; Zip Code <b>7118 Parkside Place San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**5 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/17/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mr Dennis Cano**

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

6 Contributor address; City; State; Zip Code  
**201 Castano Ave  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**VP**

9 Employer (See instructions)  
**Cano and Company Commercial Real Estate**

Date  
**4/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mrs Stephanie Cano**

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

Contributor address; City; State; Zip Code  
**201 Castano Ave  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Retired**

Employer (See instructions)

Date  
**4/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Paul Morrissey**

Amount of contribution (\$)  
**300.00**

Contributor address; City; State; Zip Code  
**4615 Grass Fight  
San Antonio, TX 78253-5088**

Principal occupation / Job title (See instructions)  
**CEO**

Employer (See instructions)  
**Compass Rose Public Schools**

Date  
**4/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Michael Nava**

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

Contributor address; City; State; Zip Code  
**13823 Ridge Chase Drive  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Nava and Glander Law Firm**

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



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**6 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/17/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Brenna Nava**

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

6 Contributor address; City; State; Zip Code  
**13823 Ridge Chase Drive  
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)  
**Retired**

9 Employer (See instructions)

Date  
**4/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**JOHN AGATHER**

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

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

Principal occupation / Job title (See instructions)  
**MUSICIAN**

Employer (See instructions)  
**AIC**

Date  
**4/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**JOHN AGATHER**

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

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

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**John Agather Realty**

Date  
**4/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Fawzy Shemshack**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**3414 Port Place  
San Antonio, TX 78253**

Principal occupation / Job title (See instructions)  
**School Administrator**

Employer (See instructions)  
**Riverwalk Education Foundation**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**7 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/17/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**RUTH AGATHER**

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

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

8 Principal occupation / Job title (See instructions)  
**Attorney**

9 Employer (See instructions)  
**Rosenthal Pauerstein Sandoloski Agather Attorneys at Law**

Date  
**4/18/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Cruz P Cortez**

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

Contributor address; City; State; Zip Code  
**18215 Lemans Ave  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Marketing**

Employer (See instructions)  
**USAA**

Date  
**4/19/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Brian Mason**

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

Contributor address; City; State; Zip Code  
**2008 Northwest Military Highway  
Castle Hills, TX 78213**

Principal occupation / Job title (See instructions)  
**Consultant**

Employer (See instructions)  
**Mason Tax and Business Solutions**

Date  
**4/19/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lisa Fullerton**

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

Contributor address; City; State; Zip Code  
**11214 Cat Spgs  
Boerne, TX 78006-8586**

Principal occupation / Job title (See instructions)  
**Businessowner**

Employer (See instructions)  
**A Novel Idea**

**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:  
**8 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/19/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Auntie Annes & Cinnabon**

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

6 Contributor address; City; State; Zip Code  
**24165 IH-10 W 217 ##745  
San Antonio, TX 78257**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date  
**4/19/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lloyd A Denton Jr**

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

Contributor address; City; State; Zip Code  
**1 Bitterblue Ln.  
San Antonio, TX 78218-1790**

Principal occupation / Job title (See instructions)  
**CEO**

Employer (See instructions)  
**Denton Companies**

Date  
**4/20/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Brad Beldon**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**35 Royal Waters Drive  
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)  
**CEO**

Employer (See instructions)  
**BELDON Roofing Company**

Date  
**4/23/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lawrence Haass**

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

Contributor address; City; State; Zip Code  
**68 Courtside Cirle  
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**CPA**

Employer (See instructions)  
**Retired**

**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: <b>9 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/23/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jeremy Sanders</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>4103 Parkdale Drive San Antonio, TX 78229</b>		
8 Principal occupation / Job title (See instructions) <b>Owner/CEO</b>		9 Employer (See instructions) <b>Primo Gate Guard Services</b>
Date <b>4/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Blake Yantis</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>6812 West Avenue San Antonio, TX 78213</b>		
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Mosaic Land Development</b>
Date <b>4/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jennifer Yantis</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>6812 West Avenue San Antonio, TX 78213</b>		
Principal occupation / Job title (See instructions) <b>Housewife</b>		Employer (See instructions)
Date <b>4/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Enrique Davila</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>215 N.Center St #1808 San Antonio, TX 78202</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**10 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/24/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Linda Davila**

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

6 Contributor address; City; State; Zip Code  
**215 N. Center St #1808  
San Antonio, TX 78202**

8 Principal occupation / Job title (See instructions)  
**Litigation Manager**

9 Employer (See instructions)  
**Loya Insurance**

Date  
**4/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**George Mery**

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

Contributor address; City; State; Zip Code  
**5157 Blanco Rd. ##E  
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**President & CEO**

Employer (See instructions)  
**Elegant Limousine**

Date  
**4/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jack Vexler**

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

Contributor address; City; State; Zip Code  
**201 Charles Rd.  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Owner**

Employer (See instructions)  
**Monterrey Iron and Metal**

Date  
**4/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jefferson Vexler**

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

Contributor address; City; State; Zip Code  
**405 W. French Pl.  
San Antonio, TX 78212-3606**

Principal occupation / Job title (See instructions)  
**Operations**

Employer (See instructions)  
**Toucan Recycling**

**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: <b>11 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/24/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mary Vexler</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>305 W. Kings Highway San Antonio, TX 78212</b>		
8 Principal occupation / Job title (See instructions) <b>Director</b>		9 Employer (See instructions) <b>MJV Forest Enterprises, LLC</b>
Date <b>4/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jeanine F Whyte</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>2211 Fairview St Houston, TX 77019</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions)
Date <b>4/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rosenberg Family Trust ACCT#1</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>2134 Peckham Houston, TX 77019</b>		
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date <b>4/25/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Andrew Barlowe</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>29739 Slate Creek Boerne, TX 78015</b>		
Principal occupation / Job title (See instructions) <b>Realtor</b>		Employer (See instructions) <b>Vortex Realty</b>

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**12 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/29/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Roberto Facha**

7 Amount of contribution (\$)  
**250.00**

6 Contributor address; City; State; Zip Code  
**5701 Business Park  
San Antonio, TX 78218**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)  
**Technologies US, LLC**

Date  
**4/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**John Cooley**

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

Contributor address; City; State; Zip Code  
**7119 Parkside Place  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Terramark Homes**

Date  
**4/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jane Gonzalez**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**4155 Greco Drive  
San Antonio, TX 78222**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Medwheels Inc**

Date  
**4/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Julissa Carielo**

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

Contributor address; City; State; Zip Code  
**211 Honeysuckle Ln  
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)  
**Owner**

Employer (See instructions)  
**DreamOn Group**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**13 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/30/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Henry Bonilla**

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

6 Contributor address; City; State; Zip Code  
**610 E Market St  
San Antonio, TX 78205**

8 Principal occupation / Job title (See instructions)  
**Partner**

9 Employer (See instructions)  
**The Normandy Group**

Date  
**4/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sheryl Bonilla**

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

Contributor address; City; State; Zip Code  
**610 E Market St  
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)  
**Partner**

Employer (See instructions)  
**homemaker**

Date  
**5/1/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Johnny W Stevens**

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

Contributor address; City; State; Zip Code  
**8120 Killarney Ct.  
Wichita , KS 67206**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**FJM General, Inc.**

Date  
**5/1/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**San Antonio Land Fund I**

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

Contributor address; City; State; Zip Code  
**PO Box 782257  
Wichita , KS 67278**

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



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>14 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/1/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Loop 1604 Group</b> ..... 6 Contributor address; City; State; Zip Code <b>PO Box 782257 Wichita , KS 67278</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date <b>5/1/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Vinyard Shopping Center II LP</b> ..... Contributor address; City; State; Zip Code <b>PO Box 782257 Wichita , KS 67628</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date <b>5/2/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>B S Teeter</b> ..... Contributor address; City; State; Zip Code <b>7501 Loasa Cv Austin, TX 78735</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Bitterblue Investments</b>
Date <b>5/2/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sandra Teeter</b> ..... Contributor address; City; State; Zip Code <b>7501 Loasa Cv Austin, TX 78735</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Director, Property Operations</b>		Employer (See instructions) <b>Really by Roc 360</b>

**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: <b>15 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/2/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ken W Brown</b> ..... 6 Contributor address; City; State; Zip Code <b>100 NE Loop 410 #1385 San Antonio, TX 78216</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Brown and McDonald</b>
Date <b>5/2/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Caroline McDonald</b> ..... Contributor address; City; State; Zip Code <b>100 NE Loop 410 #1385 San Antonio, TX 78216</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Brown and McDonald</b>
Date <b>5/3/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Herbert Krumsick</b> ..... Contributor address; City; State; Zip Code <b>400 N. Woodlawn #210 Wichita , KS 67208</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Senior VP</b>		Employer (See instructions) <b>J.P. Weigand &amp; Sons, Inc.</b>
Date <b>5/5/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joe Gonzalez</b> ..... Contributor address; City; State; Zip Code <b>95 Campden Cir San Antonio, TX 78218-1798</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Realtor</b>		Employer (See instructions) <b>Gonzalez Realty Group</b>



**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:  
**16 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/5/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Diana Gonzalez**

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

6 Contributor address; City; State; Zip Code  
**95 Campden Cir  
San Antonio, TX 78218-1798**

8 Principal occupation / Job title (See instructions)  
**Realtor**

9 Employer (See instructions)  
**Crown Realty Holdings**

Date  
**5/6/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Neill Reagan**

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

Contributor address; City; State; Zip Code  
**342 Dry Bear Creek  
New Braunfels, TX 78132**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**O'Neill's Inflight Catering**

Date  
**5/6/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lisa Reagan**

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

Contributor address; City; State; Zip Code  
**342 Dry Bear Creek  
New Braunfels, TX 78132**

Principal occupation / Job title (See instructions)  
**Homemaker**

Employer (See instructions)

Date  
**5/6/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jack Hebdon Jr**

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

Contributor address; City; State; Zip Code  
**8102 Nufy Ridge  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Bakke Development Corp**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**17 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/8/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Becky Thomas**

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

6 Contributor address; City; State; Zip Code  
**13435 La Vista Dr  
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)  
**Assistant**

9 Employer (See instructions)  
**Gordan Hartman Family Foundation**

Date  
**5/10/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Ed Cross**

Amount of contribution (\$)  
**350.00**

Contributor address; City; State; Zip Code  
**700 East Hildebrand Avenue  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)

Date  
**5/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Marc Gravely**

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

Contributor address; City; State; Zip Code  
**3914 Heights Way  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Gravely PC**

Date  
**5/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Janelle Gravely**

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

Contributor address; City; State; Zip Code  
**3914 Heights Way  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Homemaker**

Employer (See instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>18 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/16/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Edgar Morrison</b>	7 Amount of contribution (\$) <b>250.00</b>
	6 Contributor address; City; State; Zip Code <b>107 Dover Road San Antonio, TX 78209</b>	
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Jackson Walker</b>
Date <b>5/16/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Donald Macaulay</b>	Amount of contribution (\$) <b>100.00</b>
	Contributor address; City; State; Zip Code <b>5903 Lost Crk SAN ANTONIO, BEXAR, TX, TX 78247</b>	
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions)
Date <b>5/16/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James (Bob) Parks</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>3219 Tavern Oaks San Antonio, TX 78247</b>	
Principal occupation / Job title (See instructions) <b>Manager</b>		Employer (See instructions) <b>Texas Mgt Associates, Inc.</b>
Date <b>5/16/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Myrtle Parks</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>3219 Tavern Oaks San Antonio, TX 78247</b>	
Principal occupation / Job title (See instructions) <b>homemaker</b>		Employer (See instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**19 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/16/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Charles E Amato**

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

6 Contributor address; City; State; Zip Code  
**9311 San Pedro Avenue #600  
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)  
**Chairman**

9 Employer (See instructions)  
**SWBC**

Date  
**5/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Suzane Cavender**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**21105 W. Interstate 10 West  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Interior Designer**

Employer (See instructions)  
**Self Employed**

Date  
**5/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**MaryLou Swift**

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

Contributor address; City; State; Zip Code  
**3121 BUFFALO SPEEDWAY  
Houston, TX 77098**

Principal occupation / Job title (See instructions)  
**Art Consultant**

Employer (See instructions)  
**Self**

Date  
**5/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Trace Burton**

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

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

Principal occupation / Job title (See instructions)  
**attorney**

Employer (See instructions)  
**UHI Fitzsimons, PLLC**

**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:  
**20 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/17/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Laura Burton**

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

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

8 Principal occupation / Job title (See instructions)  
**homemaker**

9 Employer (See instructions)

Date  
**5/20/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Phillip Bakke**

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

Contributor address; City; State; Zip Code  
**207 Roosevelt Avenue  
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Bakke Development Corp.**

Date  
**5/20/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Cory Bakke**

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

Contributor address; City; State; Zip Code  
**207 Roosevelt Avenue  
San Antonio, TX 78210**

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

Employer (See instructions)  
**Phyllis Browning Company**

Date  
**5/20/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Elisa Chan**

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

Contributor address; City; State; Zip Code  
**19418 Cannon Hills Ln  
Richmond, TX 77407**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Unitech Consulting Engineers**

**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: <b>21 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/22/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Chris Cheever</b> ..... 6 Contributor address; City; State; Zip Code <b>4242 Broadway San Antonio, TX 78209</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Senior VP</b>		9 Employer (See instructions) <b>Broadway Bank</b>
Date <b>5/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Richard Ramirez</b> ..... Contributor address; City; State; Zip Code <b>804 Vineyard Falls Rd Austin, TX 78748</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>attorney</b>		Employer (See instructions) <b>CRN Law</b>
Date <b>5/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>thomas Yantis</b> ..... Contributor address; City; State; Zip Code <b>14 Dezavala Place San Antonio, TX 78231</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate</b>		Employer (See instructions) <b>Mosaic Development</b>
Date <b>5/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Linebarger Coggan Blair &amp; Sampson LLP</b> ..... Contributor address; City; State; Zip Code <b>PO Box 17428 Austin, TX 78760</b>	Amount of contribution (\$) <b>500.00</b>
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



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**22 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/26/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Albert Gutierrez**

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

6 Contributor address; City; State; Zip Code  
**110 Laburnum Dr.  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**Lawyer**

9 Employer (See instructions)  
**Person Mohrer Morales Boddy Garcia & Gutierrez PLLC**

Date  
**5/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Cory Stehr**

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

Contributor address; City; State; Zip Code  
**107 East Wildwood Drive  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Prosper Urban**

Date  
**5/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Dr Dennis Stuckey**

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

Contributor address; City; State; Zip Code  
**107 Grassmarket  
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)

Date  
**5/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lorri Michel**

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

Contributor address; City; State; Zip Code  
**917 West Lynn St  
Austin, TX 78703-4747**

Principal occupation / Job title (See instructions)  
**lawyer**

Employer (See instructions)  
**Michel Gray Rogers LLP**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**23 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/29/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Michael Ginsberg**

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

6 Contributor address; City; State; Zip Code  
**917 West Lynn St  
Austin, TX 78703-4747**

8 Principal occupation / Job title (See instructions)  
**attorney**

9 Employer (See instructions)  
**MG Law Firm**

Date  
**5/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Larry Mendez**

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

Contributor address; City; State; Zip Code  
**204 Fawn Dr  
Shavano Park, TX 78231**

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

Employer (See instructions)  
**CBRE**

Date  
**5/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**San Antonio Apartment Association PAC**

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

Contributor address; City; State; Zip Code  
**7525 Babcock  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**5/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Eric King**

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

Contributor address; City; State; Zip Code  
**333 Elizabeth Rd  
Terrell Hills, TX 78209**

Principal occupation / Job title (See instructions)  
**Owner**

Employer (See instructions)  
**BE enterprises**

**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: <b>24 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/30/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Natalia King</b>	7 Amount of contribution (\$) <b>500.00</b>
	6 Contributor address; City; State; Zip Code <b>333 Elizabeth Rd Terrell Hills, TX 78209</b>	
8 Principal occupation / Job title (See instructions) <b>Homemaker</b>		9 Employer (See instructions)
Date <b>5/31/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>William Ford</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>10001 Reunion Place San Antonio, TX 78216</b>	
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Ford Murray, PLLC</b>
Date <b>5/31/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James griffin</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>247 Stanford Dr San Antonio, TX 78212</b>	
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Killen Griffin &amp; Farriond PLLC</b>
Date <b>5/31/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cecilia griffin</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>247 Stanford Dr San Antonio, TX 78212</b>	
Principal occupation / Job title (See instructions) <b>VP of Development (fundraising)</b>		Employer (See instructions) <b>UTSA</b>

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: <b>25 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/31/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mr John T Steen Jr</b>	7 Amount of contribution (\$) <b>500.00</b>
	6 Contributor address; City; State; Zip Code <b>1250 NE Loop 410 #305 San Antonio, TX 78209</b>	
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Self Employed</b>
Date <b>5/31/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mrs Weisie Steen</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>1250 NE Loop 410 #305 San Antonio, TX 78209</b>	
Principal occupation / Job title (See instructions) <b>Investor</b>		Employer (See instructions) <b>Self Employed</b>
Date <b>6/4/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Chris Aldrete</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>335 Country Wood Drive San Antonio, TX 78216</b>	
Principal occupation / Job title (See instructions) <b>consultant</b>		Employer (See instructions) <b>Aldrete Strategic Partners, LLC</b>
Date <b>6/4/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michael Kent</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>31725 Meadow Creek Trail Fair Oaks Ranch, TX 78015</b>	
Principal occupation / Job title (See instructions) <b>Real Estate</b>		Employer (See instructions) <b>Stream Realty Partners</b>

**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: <b>26 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/5/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Pat Garrison</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>335 Oak Glen San Antonio, TX 78209</b>		
8 Principal occupation / Job title (See instructions) <b>Marketing Director</b>		9 Employer (See instructions) <b>Chick-fil-A</b>
Date <b>6/6/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ernesto Ancira</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>9103 Autumn Leaf San Antonio, TX 78217</b>		
Principal occupation / Job title (See instructions) <b>Auto and RV Dealer</b>		Employer (See instructions) <b>Ancira Enterprises</b>
Date <b>6/7/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>JAMES RACKLEY</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>535 Ullrich Rd Marion, TX 78124</b>		
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Guerra LLP</b>
Date <b>6/7/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Margery Beitzel</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>15403 Forest Mist San Antonio, TX 78232</b>		
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>27 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/8/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Kustoff</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>2 Westelm Circle San Antonio, TX 78230</b>		
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Kustoff &amp; Sanders LLP</b>
Date <b>6/10/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>George Salinas</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>214 Blackjack Oak Shavano Park, TX 78230</b>		
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>George Salinas Injury Lawyers</b>
Date <b>6/10/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Pat Boone</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>17339 Redland Road San Antonio, TX 78247</b>		
Principal occupation / Job title (See instructions) <b>lawyer</b>		Employer (See instructions) <b>Self</b>
Date <b>6/10/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Illianna Cervantes</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>1807 Cassandra #100 San Antonio, TX 78224</b>		
Principal occupation / Job title (See instructions) <b>Administrative</b>		Employer (See instructions) <b>Abasto Properties</b>

**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: <b>28 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/11/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patrick Frost</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>520 Geneseo Road San Antonio, TX 78209</b>		
8 Principal occupation / Job title (See instructions) <b>retired</b>		9 Employer (See instructions)
Date <b>6/11/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gary Lomax</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>7600 Broadway San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions)
Date <b>6/13/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robert L Worth Jr</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>270 Terrell Rd #201 San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Real Estate Developer</b>		Employer (See instructions) <b>Worth Associates</b>
Date <b>6/14/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Clark R Mandigo</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>317 Geneseo Road San Antonio, TX 78209-6124</b>		
Principal occupation / Job title (See instructions) <b>President &amp; CEO</b>		Employer (See instructions) <b>Pizza Venture</b>

**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: <b>29 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/15/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Abel Martinez</b>	7 Amount of contribution (\$) <b>250.00</b>
	6 Contributor address; City; State; Zip Code <b>105 Hibiscus Lane Castle Hills, TX 78213</b>	
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>HEB</b>
Date <b>6/17/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Raymond Welder</b>	Amount of contribution (\$) <b>100.00</b>
	Contributor address; City; State; Zip Code <b>100 West Olmos San Antonio, TX 78212</b>	
Principal occupation / Job title (See instructions) <b>Geologist</b>		Employer (See instructions) <b>WelderXP Ltd.</b>
Date <b>6/17/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Nadine Baker</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>5604 Southwest Parkway #3314 Austin, TX 78735</b>	
Principal occupation / Job title (See instructions) <b>Pharmacist</b>		Employer (See instructions) <b>Eversana</b>
Date <b>6/17/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>William Mitchell</b>	Amount of contribution (\$) <b>250.00</b>
	Contributor address; City; State; Zip Code <b>704 Canterbury Hill St. San Antonio, TX 78209</b>	
Principal occupation / Job title (See instructions) <b>General Contractor</b>		Employer (See instructions) <b>GW Mitchell Construction</b>

**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:  
**30 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/18/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Gardner Peavy**

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

6 Contributor address; City; State; Zip Code  
**117 Ridgemont Avenue  
San Antonio, TX 78209**

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

9 Employer (See instructions)  
**SageView Partners**

Date  
**6/18/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jill Peavy**

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

Contributor address; City; State; Zip Code  
**117 Ridgemont Avenue  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Retail**

Employer (See instructions)  
**Memory Lane Monograms**

Date  
**6/19/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**William Germany**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**2930 Chisolm Trail  
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Germany Law, PLLC**

Date  
**6/19/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Daiana A Lambrecht**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**81 Empire St #Apt 6  
Allston, MA 02134-1519**

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

Employer (See instructions)  
**Futuro**

**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: <b>31 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/20/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Randy Boatright</b>	7 Amount of contribution (\$) <b>100.00</b>
	6 Contributor address; City; State; Zip Code <b>PO Box 17962 San Antonio, TX 78217</b>	
8 Principal occupation / Job title (See instructions) <b>Land Manager</b>		9 Employer (See instructions) <b>Marrs McLean Minerals Group</b>
Date <b>6/20/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dan A Hughes</b>	Amount of contribution (\$) <b>250.00</b>
	Contributor address; City; State; Zip Code <b>745 E. Mulberry Ave #100 San Antonio, TX 78212</b>	
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Dan A. Hughes Co.</b>
Date <b>6/20/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>San Antonio Chapter of AGC PAC</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>10806 Gulfdale San Antonio, TX 78216</b>	
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date <b>6/20/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Inderjit S Mehat</b>	Amount of contribution (\$) <b>500.00</b>
	Contributor address; City; State; Zip Code <b>11219 Jadestone Blvd San Antonio, TX 78249-5007</b>	
Principal occupation / Job title (See instructions) <b>Business Owner</b>		Employer (See instructions) <b>Retail/Convenience Store</b>

**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:  
**32 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/20/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Fermin Rajunov**

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

6 Contributor address; City; State; Zip Code  
**5 Wayward Oaks  
San Antonio, TX 78248**

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

9 Employer (See instructions)  
**Cultiva Financial**

Date  
**6/20/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Barry Menick**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**306 Belvidere Drive  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**physician**

Employer (See instructions)  
**South Texas Radiology Group**

Date  
**6/21/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Zaar Songadwala**

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

Contributor address; City; State; Zip Code  
**211 Fox Hill  
Spring Branch, TX 78070**

Principal occupation / Job title (See instructions)  
**student**

Employer (See instructions)

Date  
**6/21/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Hector Garcia**

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

Contributor address; City; State; Zip Code  
**13915 Summerfair Ct  
Houston, TX 77044**

Principal occupation / Job title (See instructions)  
**Owner**

Employer (See instructions)  
**BrandNation LLC**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**33 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/21/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Eva Garcia**

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

6 Contributor address; City; State; Zip Code  
**13915 Summerfair Ct  
Houston, TX 77044**

8 Principal occupation / Job title (See instructions)  
**HR & Accounting**

9 Employer (See instructions)  
**BrandNation LLC**

Date  
**6/21/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rick Cavender**

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

Contributor address; City; State; Zip Code  
**21105 W. Interstate 10 West  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Auto Dealer**

Employer (See instructions)  
**Cavender Auto Family**

Date  
**6/21/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**W R Williams**

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

Contributor address; City; State; Zip Code  
**517 Geneseo Road  
San Antonio, TX 78209-6165**

Principal occupation / Job title (See instructions)  
**Politician**

Employer (See instructions)

Date  
**6/21/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Edward Kelley**

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

Contributor address; City; State; Zip Code  
**7 Links Green  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**34 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/22/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Laurence Kurth**

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

6 Contributor address; City; State; Zip Code  
**2806 Urban Crest Drive  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**retired**

9 Employer (See instructions)

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Michele Torres**

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

Contributor address; City; State; Zip Code  
**151 Algerita Dr  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Owner**

Employer (See instructions)  
**The Pauli Group**

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Alann Torres**

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

Contributor address; City; State; Zip Code  
**151 Algerita Dr  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Owner**

Employer (See instructions)  
**Cutting Edge Courier**

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jennifer Noyola**

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

Contributor address; City; State; Zip Code  
**3250 FM 1922  
Floresville, TX 78114**

Principal occupation / Job title (See instructions)  
**VP of Compensation and Benefits**

Employer (See instructions)  
**Y&L Consulting**

**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:  
**35 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/24/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lynda Baldwin**

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

6 Contributor address; City; State; Zip Code  
**3250 Farm to Market Road 1922  
Floresville, TX 78114**

8 Principal occupation / Job title (See instructions)  
**CAO**

9 Employer (See instructions)  
**Y & L Consulting, Inc.**

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**MARCO BARROS**

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

Contributor address; City; State; Zip Code  
**14108 Sage Bluff  
San Antonio, TX 78216-1935**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**MARCO BARROS MANAGEMENT**

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anne Ballantyne**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**214 Morningside Drive  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Bridie Chaudoir**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**8822 Pineridge Road  
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**36 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/24/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mohammad Rana**

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

6 Contributor address; City; State; Zip Code  
**13426 Baldwin Ridge  
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)  
**Business Owner**

9 Employer (See instructions)  
**Retail/Convenience Store**

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Veronica G Garibay**

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

Contributor address; City; State; Zip Code  
**13426 Baldwin Ridge  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Retail Manager**

Employer (See instructions)  
**Retail/Convenience Store**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anwar M Tahir**

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

Contributor address; City; State; Zip Code  
**13538 Barsan Rd  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Association of Convenience Store Retailers**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Abida Tahir**

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

Contributor address; City; State; Zip Code  
**13538 Barsan Rd  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Business Owner**

Employer (See instructions)  
**Retail/Convenience Store**

**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:  
**37 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/25/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Erika Guzman**

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

6 Contributor address; City; State; Zip Code  
**12002 Los Cerdos St  
San Antonio, TX 78233**

8 Principal occupation / Job title (See instructions)  
**Paralegal**

9 Employer (See instructions)  
**Whyte PLLC**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Louis Guzman**

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

Contributor address; City; State; Zip Code  
**12002 Los Cerdos St  
San Antonio, TX 78233**

Principal occupation / Job title (See instructions)  
**Asset Recovery**

Employer (See instructions)  
**Nightcrawler Recovery**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**John Clay**

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

Contributor address; City; State; Zip Code  
**401 W. 15th Street  
Austin, TX 78701**

Principal occupation / Job title (See instructions)  
**Consultant**

Employer (See instructions)  
**Crestline Solutions**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Chris Kridel**

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

Contributor address; City; State; Zip Code  
**836 River Forest Drive  
New Braunfels, TX 78132**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Kridel Law Firm, PLLC**

**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:  
**38 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/25/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Debra Guerrero**

7 Amount of contribution (\$)  
**250.00**

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

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

9 Employer (See instructions)  
**The NRP Group**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Roland Gonzales**

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

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

Principal occupation / Job title (See instructions)  
**Lawyer/Artist/Poet/Dad**

Employer (See instructions)  
**Germer PLLC**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Victoria Rico**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**212 E Wildwood  
San Antonio, TX 78212-1754**

Principal occupation / Job title (See instructions)  
**Trustee**

Employer (See instructions)  
**Self-Employed**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jason Arechiga**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**22603 Impala Bend  
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)  
**Developer**

Employer (See instructions)  
**The NRP Group**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**39 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/25/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**grant prater**

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

6 Contributor address; City; State; Zip Code  
**11181 U.S. Highway 87 West  
La Vernia, TX 78121**

8 Principal occupation / Job title (See instructions)  
**Managing Partner**

9 Employer (See instructions)  
**HP Safety**

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jan Scott**

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

Contributor address; City; State; Zip Code  
**1148 Herkimer Street  
Houston, TX 77008**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)

Date  
**6/25/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Wenhao Deng**

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

Contributor address; City; State; Zip Code  
**1110 Rodeo Rd  
Arcaida, CA 91006**

Principal occupation / Job title (See instructions)  
**Businessman**

Employer (See instructions)  
**Wenhao Deng**

Date  
**6/26/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**JAVIER ESPINOZA**

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

Contributor address; City; State; Zip Code  
**10202 HERITAGE BLVD  
SAN ANTONIO, TX 78216**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Espinoza & Brock, PLLC**

**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: <b>40 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/26/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dustin Burrows</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>401 Guadalupe St Austin, TX 78701</b>		
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Burrows Law Firm</b>
Date <b>6/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Elisabeth Burrows</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>401 Guadalupe St Austin, TX 78701</b>		
Principal occupation / Job title (See instructions) <b>Homemaker</b>		Employer (See instructions)
Date <b>6/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James Bagby</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>704 5 Campus Drive Colorado Springs, CO 80920</b>		
Principal occupation / Job title (See instructions) <b>attorney</b>		Employer (See instructions) <b>Bagby Law</b>
Date <b>6/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Brennen Jenkins</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>27402 Smokey Chase Boerne, TX 78015</b>		
Principal occupation / Job title (See instructions) <b>Lawyer</b>		Employer (See instructions) <b>Crosley Law Firm</b>

**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:  
**41 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/26/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**John Shepherd**

7 Amount of contribution (\$)  
**25.00**

6 Contributor address; City; State; Zip Code  
**9210 Marymont Park  
San Antonio, TX 78217-3400**

8 Principal occupation / Job title (See instructions)  
**Pediatric Anesthesia**

9 Employer (See instructions)  
**University medical Associates**

Date  
**6/26/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rolando Pablos**

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

Contributor address; City; State; Zip Code  
**805 Pinon Blvd  
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Cross National**

Date  
**6/26/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Laura Pablos**

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

Contributor address; City; State; Zip Code  
**805 Pinon Blvd  
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)  
**Homemaker**

Employer (See instructions)

Date  
**6/26/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Harry Hausman**

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

Contributor address; City; State; Zip Code  
**9347 Bianca  
San Antonio, TX 78254**

Principal occupation / Job title (See instructions)  
**Land developer**

Employer (See instructions)  
**Hausman Managment**

**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:  
**42 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/26/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Kristi G Villanueva**

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

6 Contributor address; City; State; Zip Code  
**809 Wyoming  
San Antonio, TX 78203**

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

9 Employer (See instructions)  
**Tru-Matrix Contracting Services, LLC**

Date  
**6/26/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Ronnie Villanueva**

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

Contributor address; City; State; Zip Code  
**809 Wyoming  
San Antonio, TX 78203**

Principal occupation / Job title (See instructions)  
**Vice President**

Employer (See instructions)  
**Tru-Matrix Contracting Services LLC**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Amegy Bank of Texas PAC**

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

Contributor address; City; State; Zip Code  
**1717 West Loop S  
Houston, TX 77027**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Perry Donop**

Amount of contribution (\$)  
**250.00**

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

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

Employer (See instructions)  
**Donop Realty**

**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: <b>43 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/27/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Emily Buescher</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>9225 Marymont Park San Antonio, TX 78217</b>		
8 Principal occupation / Job title (See instructions) <b>homemaker</b>		9 Employer (See instructions)
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gregory Mann</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>401 morningside San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Real Estate</b>		Employer (See instructions) <b>Mann Venture Partners</b>
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jay Heller</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2165 East Maya Palm Dr. Boca Raton, FL 33432</b>		
Principal occupation / Job title (See instructions) <b>President &amp; CEO</b>		Employer (See instructions) <b>The NRP Group</b>
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>John Lujan IV</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>11843 Braesview San Antonio, TX 78213</b>		
Principal occupation / Job title (See instructions) <b>Software Engineer</b>		Employer (See instructions) <b>Johnson and Johnson</b>

**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:  
**44 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/27/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Duane Bunce**

7 Amount of contribution (\$)  
**250.00**

6 Contributor address; City; State; Zip Code  
**134 Stanford Drive  
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)  
**Lawyer**

9 Employer (See instructions)  
**Zachry**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Ryan Pape**

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

Contributor address; City; State; Zip Code  
**701 Wiltshire Ave  
Terrell Hills, TX 78209**

Principal occupation / Job title (See instructions)  
**CEO**

Employer (See instructions)  
**XPEL**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Margaret Pape**

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

Contributor address; City; State; Zip Code  
**701 Wiltshire Ave  
Terrell Hills, TX 78209**

Principal occupation / Job title (See instructions)  
**homemaker**

Employer (See instructions)

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jordan Ghawi**

Amount of contribution (\$)  
**150.00**

Contributor address; City; State; Zip Code  
**903 W Huisache Ave  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**Healthcare**

Employer (See instructions)  
**STRAC**

**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: <b>45 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/27/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Navarro</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>544 Ranch Valley Fair Oaks Ranch, TX 78015</b>		
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>HFGC</b>
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kelli Borbon</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>24006 Vecchio San Antonio, TX 78260</b>		
Principal occupation / Job title (See instructions) <b>attorney</b>		Employer (See instructions) <b>King &amp; Sommer PLLC</b>
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Elizabeth LaBarge</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>17734 Cantera Golf San Antonio, TX 78255</b>		
Principal occupation / Job title (See instructions) <b>attorney/owner</b>		Employer (See instructions) <b>Texas Medical Legal Consultants, LLC</b>
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kelli Epp</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>7415 Quail Run Dr San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Patti Larsen Consulting</b>

**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 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/27/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Chupi Casas**

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

6 Contributor address; City; State; Zip Code  
**2632 Broadway  
San Antonio, TX 78215**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Matt Badders**

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

Contributor address; City; State; Zip Code  
**2632 Broadway  
San Antonio, TX 78215**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Drought Drought & Bobbit LLP**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Darren Kuyrkendall**

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

Contributor address; City; State; Zip Code  
**538 Bluffestates  
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Kuyrkendall and Company**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Bob Girling MD**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**5 Salado Ridge  
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)  
**Doctor**

Employer (See instructions)  
**Sports medicine associates**

**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: <b>47 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/28/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tim Matus</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>12918 Delivery San Antonio, TX 78247</b>		
8 Principal occupation / Job title (See instructions) <b>Founder</b>		9 Employer (See instructions) <b>Renu Robotics</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joannah Pickett</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>336 Alta Avenue San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Development</b>		Employer (See instructions) <b>Trinity University</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Christopher Pickett</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>336 Alta Avenue San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>STTC</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dan Mullins</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>217 Tuttle Road San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Real Estate Developer</b>		Employer (See instructions) <b>Southerland Communities</b>

**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:  
**48 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/28/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Leslie Mullins**

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

6 Contributor address; City; State; Zip Code  
**217 Tuttle Road  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**Homemaker**

9 Employer (See instructions)

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Summer Greathouse**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**125 West Agarita Avenue  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Bracewell LLP**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Thomas Marks**

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

Contributor address; City; State; Zip Code  
**14122 Churchill Estates  
San Antonio, TX 78248-1135**

Principal occupation / Job title (See instructions)  
**Consultant**

Employer (See instructions)  
**Fleur de lis Consulting**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Justin Sheedy**

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

Contributor address; City; State; Zip Code  
**216 Tuttle  
San antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Consultant**

Employer (See instructions)  
**J&B design and Technology**

**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:  
**49 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/28/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Edward Hart**

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

6 Contributor address; City; State; Zip Code  
**2311 Woodmen Drive  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**Financial Advisor**

9 Employer (See instructions)  
**Sendero**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Manuel Villa**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**906 Fredericksburg Road  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**Business owner**

Employer (See instructions)  
**Via technology**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Landon Lawson**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**2535 Cedar Springs Road  
Dallas, TX 75201**

Principal occupation / Job title (See instructions)  
**Founder**

Employer (See instructions)  
**ReadiVet**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Richard Barber**

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

Contributor address; City; State; Zip Code  
**13550 Camino De Plata  
Corpus Christi, TX 78418**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Bona Fide Medical**

**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: <b>50 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/28/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Stuart Falkin</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>354 North Avenue East Cranford, NJ 07016</b>		
8 Principal occupation / Job title (See instructions) <b>President</b>		9 Employer (See instructions) <b>Falkin Financial</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Melissa Chalfant</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1823 East Lawndale Drive San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Operations</b>		Employer (See instructions) <b>Inventures</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gina Eisenberg</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>16 Garden Square San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Public Relations Consultant</b>		Employer (See instructions) <b>The Eisenberg Group</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Keith Sutton</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>12500 San Pedro Avenue San Antonio, TX 78216</b>		
Principal occupation / Job title (See instructions) <b>Development</b>		Employer (See instructions) <b>Yellowstone Real Estate Inc.</b>

**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:  
**51 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/28/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**David M. Adelman**

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

6 Contributor address; City; State; Zip Code  
**1221 Broadway  
San Antonio, TX 78215**

8 Principal occupation / Job title (See instructions)  
**Principal**

9 Employer (See instructions)  
**AREA Real Estate**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Samuel Houston**

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

Contributor address; City; State; Zip Code  
**4040 Broadway  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Houston Dunn, PLLC**

Date  
**6/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Luke Holland**

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

Contributor address; City; State; Zip Code  
**344 Harmon Dr  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Contractor**

Employer (See instructions)  
**Copperhead Construction Services**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Andrew Flores**

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

Contributor address; City; State; Zip Code  
**12830 Castle George St  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Director of Innovation**

Employer (See instructions)  
**USAA**

**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: <b>52 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/29/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jacob Lujan</b>	7 Amount of contribution (\$) <b>200.00</b>
6 Contributor address; City; State; Zip Code <b>20003 Fm 1937 San Antonio, TX 78221</b>		
8 Principal occupation / Job title (See instructions) <b>Account manager</b>		9 Employer (See instructions) <b>Y&amp;L Consulting</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Edward Kolovson</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>5924 s congress Ave Austin, TX 78745</b>		
Principal occupation / Job title (See instructions) <b>Data Analyst</b>		Employer (See instructions) <b>Oli</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dale Garner</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>10408 Country Breeze San Antonio, TX 78240</b>		
Principal occupation / Job title (See instructions) <b>Account Manager</b>		Employer (See instructions) <b>Ariat International</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Manuel Mungia</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>222 Cloverleaf Avenue San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Lawyer</b>		Employer (See instructions) <b>Norton Rose Fulbright</b>

**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: <b>53 of 56</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/29/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jim Carter</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>145 Hillview Drive San Antonio, TX 78209</b>		
8 Principal occupation / Job title (See instructions) <b>retired</b>		9 Employer (See instructions) <b>retired</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jimmy Carter</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>4040 Broadway San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>JW Carter Law, PLLC</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robert Myers</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>1214 Willow Knoll San Antonio, TX 78258</b>		
Principal occupation / Job title (See instructions) <b>CEO</b>		Employer (See instructions) <b>Hard Rock Infrastructure Services</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Pablos</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>805 Pinon Blvd San Antonio, TX 78260</b>		
Principal occupation / Job title (See instructions) <b>Engineer</b>		Employer (See instructions) <b>Turner Construction</b>

**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:  
**54 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/29/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Cristina Pablos**

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

6 Contributor address; City; State; Zip Code  
**805 Pinon Boulevard  
San Antonio, TX 78260**

8 Principal occupation / Job title (See instructions)  
**Economist**

9 Employer (See instructions)  
**RB Pablos PC Attorney At Law**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**David Prichard**

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

Contributor address; City; State; Zip Code  
**43 Granburg Circle  
San Antonio, TX 78218**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Prichard YoungLLp**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Stephen Fogle**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**10001 Reunion Place  
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**Managing Member**

Employer (See instructions)  
**Fogle Law Firm, PLLC**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Linda Kinney**

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

Contributor address; City; State; Zip Code  
**158 Napa Ridge  
Comfort, TX 78013**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)  
**retired**

**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:  
**55 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/30/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sean Goertz**

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

6 Contributor address; City; State; Zip Code  
**225 W Castano Ave  
Alamo Heights, TX 78209**

8 Principal occupation / Job title (See instructions)  
**Operations Officer**

9 Employer (See instructions)  
**Texas Medical Legal Consultants**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Kathryn Goertz**

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

Contributor address; City; State; Zip Code  
**225 W Castano Ave  
Alamo Heights, TX 78209**

Principal occupation / Job title (See instructions)  
**Operations Officer**

Employer (See instructions)  
**Texas Medical Legal Consultants**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Logan Rodgers**

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

Contributor address; City; State; Zip Code  
**8622 Crownhill Boulevard  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Insurance**

Employer (See instructions)  
**Rodgers Group, LLC**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jeremy Sloan**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**122 Warbler Way  
Shavano Park, TX 78231-1459**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Jeremy Sloan**

**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:  
**56 of 56**

2 FILER NAME  
**Mr Marc K Whyte**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/30/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lauren Valkenaar**

7 Amount of contribution (\$)  
**250.00**

6 Contributor address; City; State; Zip Code  
**403 Pike Road  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**Attorney**

9 Employer (See instructions)  
**Valkenaar PLLC**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Seth Bell**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**7801 Broadway  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Law Office of Seth K. Bell**

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: <b>1 of 1</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
5 Date <b>6/20/2024</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Henry Gonzalez</b>	8 Amount of Contribution \$ <b>120.75</b> 9 In-kind contribution description <b>Fundraising Refreshments</b>
7 Contributor address; City; State; Zip Code <b>9601 McAllister Freeway #401 San Antonio, TX 78216</b>		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) <b>Attorney</b>		11 Employer (FOR NON-JUDICIAL) (See instructions) <b>Gonzalez Chiscano Angulo &amp; Kasson, PC</b>
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

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: <b>1 of 1</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		<b>\$ 0</b>
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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: <b>1 of 1</b>
<b>2</b> FILER NAME <b>Mr Marc K Whyte</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$ 0</b>
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; . . . . . City; State; Zip Code	<b>10</b> Interest rate
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See instructions)		<b>13</b> Employer (See instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> none		<b>15</b> <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; . . . . . City; State; Zip Code	
<b>20</b> Principal occupation (See instructions)		<b>21</b> Employer (See instructions)
Date of loan	Name of lender <input type="checkbox"/> 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 <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; . . . . . City; State; Zip Code	
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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>1 of 4</b>	<b>2</b> FILER NAME <b>Mr Marc K Whyte</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/10/2024</b>	<b>5</b> Payee name <b>NORMA DENHAM &amp; ASSOCIATES</b>	
<b>6</b> Amount (\$) <b>1075.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>15706 Knoll Cliff San Antonio, TX 78247</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description <b>Fundraising</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
	Office held	
Date <b>1/22/2024</b>	Payee name <b>GODADDY.COM</b>	
Amount (\$) <b>210.85</b>	Payee address; City; State; Zip Code <b>2155 E. GoDaddy Way Tempe, AZ 85284</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Media</b>
	<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 <b>1/22/2024</b>	Payee name <b>GODADDY.COM</b>	
Amount (\$) <b>599.95</b>	Payee address; City; State; Zip Code <b>2155 E. GoDaddy Way Tempe, AZ 85284</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Media</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
	Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>2 of 4</b>	<b>2</b> FILER NAME <b>Mr Marc K Whyte</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>1/29/2024</b>	<b>5</b> Payee name <b>SP FATHEAD, LLC</b>	
<b>6</b> Amount (\$) <b>150.42</b>	<b>7</b> Payee address; City; State; Zip Code <b>1201 Woodward Avenue Livonia , MI 48226</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Poster</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>1/31/2024</b>	Payee name <b>GODADDY.COM</b>	
Amount (\$) <b>22.17</b>	Payee address; City; State; Zip Code <b>2155 E. GoDaddy Way Tempe, AZ 85284</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Media</b>
	<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 <b>2/8/2024</b>	Payee name <b>Erika Guzman</b>	
Amount (\$) <b>260.00</b>	Payee address; City; State; Zip Code <b>12002 Los Cerdos St. San Antonio, TX 78233</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>Campaign finance report</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>3 of 4</b>	<b>2</b> FILER NAME <b>Mr Marc K Whyte</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/15/2024</b>	<b>5</b> Payee name <b>Raconteur Media Company</b>	
<b>6</b> Amount (\$) <b>1367.27</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO Box 26511 Austin, TX 78755</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Media</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>3/6/2024</b>	Payee name <b>Raconteur Media Company</b>		
Amount (\$) <b>1084.92</b>	Payee address; City; State; Zip Code <b>PO Box 26511 Austin, TX 78755</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Media</b>	
	<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 <b>3/15/2024</b>	Payee name <b>4 Imprint</b>		
Amount (\$) <b>207.65</b>	Payee address; City; State; Zip Code <b>101 Commerce St Oshkosh, WI 54901</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>coffee clutch</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>4 of 4</b>	<b>2</b> FILER NAME <b>Mr Marc K Whyte</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/4/2024</b>	<b>5</b> Payee name <b>Raconteur Media Company</b>	
<b>6</b> Amount (\$) <b>1521.51</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO Box 26511 Austin, TX 78755</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Media</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>4/16/2024</b>	Payee name <b>Erika Guzman</b>		
Amount (\$) <b>100.00</b>	Payee address; City; State; Zip Code <b>12002 Los Cerdos St. San Antonio, TX 78233</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Salaries/Wages/Contract Labor</b>	Description <b>1st Qtr finance report</b>	
	<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 <b>6/30/2024</b>	Payee name <b>Anedot</b>		
Amount (\$) <b>2339.20</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>Contribution platform processing fees 4/01/24-6/30/24</b>	
	<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**

# 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

<b>1</b> Total pages Schedule F2: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Marc K Whyte</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$ 0</b>
--	-------------

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

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

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

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

Date	Payee name
------	------------

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

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

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

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

--

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F3**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F3:  
**1 of 1**

**2** FILER NAME  
**Mr Marc K Whyte**

**3** Filer ID (Ethics Commission Filers)

**4** Date

**5** Name of person from whom investment is purchased

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

**7** Description of investment

**8** Amount of investment (\$)

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	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)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F4: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Marc K Whyte</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$ 0</b>
--	-------------

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

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

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

<b>11</b> 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**

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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

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

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

## SCHEDULE H

### 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**

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

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

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

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



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

## SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
1 of 1

2 FILER NAME  
Mr Marc K Whyte

3 Filer ID (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received	8 Amount (\$)
	..... 6 Address of person from whom amount is received; City; State; Zip Code	
	7 Purpose for which amount is received <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> Check if political contribution returned to filer	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# 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: <b>1 of 1</b>
2 FILER NAME <b>Mr Marc K Whyte</b>		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
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: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
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: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
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 Marc K Whyte**

Filer ID (Ethics Commission Filers)

**SIGNATURE**

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

\_\_\_\_\_  
Signature of Candidate / Officeholder

**FILER WHO IS NOT AN OFFICEHOLDER**

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

**A. CAMPAIGN FUNDS**

Check only one:

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

**B. ASSETS**

Check only one:

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

\_\_\_\_\_  
Signature of Candidate

**OFFICEHOLDER**

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

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

\_\_\_\_\_  
Signature of Officeholder