

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.				1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 47
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST John	MI P	OFFICE USE ONLY	
	NICKNAME	LAST Atwood	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; 401 E. Sonterra Blvd #375 San Antonio TX 78258				Date Received 1/15/2025 3:15:49PM
	AREA CODE (210)	PHONE NUMBER 817-4771	EXTENSION		
5 CANDIDATE / OFFICEHOLDER PHONE					Date Hand-delivered or Date Postmarked
	MS / MRS / MR	FIRST John	MI P		
6 CAMPAIGN TREASURER NAME	NICKNAME	LAST Atwood	SUFFIX	Receipt #	Amount \$
					Date Processed 1/15/2025 3:15:49PM
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 401 E. Sonterra Blvd #375 San Antonio TX 78258				STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 817-4771	EXTENSION		
9 REPORT TYPE	January 15: Semi-Annual				
10 PERIOD COVERED	Month Day Year 7/1/2024			Month Day Year 12/31/2024	
11 ELECTION	ELECTION DATE Month Day Year 5/3/2025	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description _____			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known) Mayor	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME John P Atwood		15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)		THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS
17 CONTRIBUTION TOTALS		1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0
EXPENDITURE TOTALS		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 425.00
CONTRIBUTION BALANCE		3. TOTAL UNITEMIZED POLITICAL EXPENDITURES. \$ 609.17
OUTSTANDING LOAN TOTALS		4. TOTAL POLITICAL EXPENDITURES \$ 7155.01
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 0
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0
18 AFFIDAVIT		
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p>*** Electronically Certified ***</p> <p>_____ Signature of Candidate or Officeholder</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said <u>John P Atwood</u> this the <u>14th</u> day of <u>January</u> , 2025, to certify which, witness my hand and seal of office.		
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME John P Atwood	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 425.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 6721.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 367.80
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 6787.21
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: 1 of 1</p>
<p>2 FILER NAME John P Atwood</p>			<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 8/30/2024</p>	<p>5 Full name of contributor Crystal Villanueva</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>6 Contributor address; 13702 Locklear Way San Antonio, TX 78253</p>		<p>7 Amount of contribution (\$) 200.00</p>
<p>8 Principal occupation / Job title (See instructions)</p>		<p>9 Employer (See instructions)</p>	
<p>Date 10/4/2024</p>	<p>Full name of contributor Crystal Villanueva</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>Contributor address; 13702 Locklear Way San Antonio, TX 78253</p>		<p>Amount of contribution (\$) 200.00</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>	
<p>Date 10/5/2024</p>	<p>Full name of contributor Celicia Garza</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>Contributor address; 5107 Cinderella San Antonio, TX 78219</p>		<p>Amount of contribution (\$) 25.00</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>	
<p>Date</p>	<p>Full name of contributor</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>Contributor address;</p>		<p>Amount of contribution (\$)</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: 1 of 1</p>
<p>2 FILER NAME John P Atwood</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$ 0</p>
<p>5 Date</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)</p> <p>.....</p> <p>7 Contributor address; City; State; Zip Code</p>	<p>8 Amount of Contribution \$</p> <p>9 In-kind contribution description</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)</p> <p>.....</p> <p>Contributor address; City; State; Zip Code</p>	<p>Amount of Contribution \$</p> <p>In-kind contribution description</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

PLEDGED CONTRIBUTIONS

SCHEDULE B

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule B: 1 of 1</p>
<p>2 FILER NAME John P Atwood</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED PLEDGES</p>		<p>\$ 0</p>
<p>5 Date</p>	<p>6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>8 Amount of Pledge \$ 9 In-kind contribution description</p>
	<p>7 Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>10 Principal occupation / Job title (See instructions)</p>		<p>11 Employer (See instructions)</p>
<p>Date</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>Amount of Pledge \$ In-kind contribution description</p>
	<p>Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>
<p>Date</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>Amount of Pledge \$ In-kind contribution description</p>
	<p>Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>
<p>Date</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>Amount of Pledge \$ In-kind contribution description</p>
	<p>Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 8/7/2024	7 Name of lender John Atwood	<input type="checkbox"/> out-of-state PAC (ID# _____)
6 Is lender a financial institution? N	8 Lender address; City; State; Zip Code 401 E. Sonterra Blvd #375 San Antonio TX 78258	9 Loan Amount (\$) 1101.00
		10 Interest rate 0.000000
		11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 8/26/2024	Name of lender John P Atwood	<input type="checkbox"/> out-of-state PAC (ID# _____) Loan Amount (\$) 400.00
Is lender a financial institution? N	Lender address; City; State; Zip Code 401 E. Sonterra Blvd #375 San Antonio TX 78258	 Interest rate 0.000000
		 Maturity date
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
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		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 2 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 8/28/2024	7 Name of lender John P Atwood	9 Loan Amount (\$) 400.00
6 Is lender a financial institution? N	8 Lender address; 401 E. Sonterra Blvd #375 San Antonio TX 78258	10 Interest rate 0.000000
		11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 8/31/2024	Name of lender John P Atwood	Loan Amount (\$) 400.00
Is lender a financial institution? N	Lender address; 401 E. Sonterra Blvd #375 San Antonio TX 78258	Interest rate 0.000000
		Maturity date
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
Principal occupation (See instructions)		Employer (See instructions)

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 3 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 9/1/2024	7 Name of lender John P Atwood	8 Lender address; City; State; Zip Code 401 E. Sonterra Blvd #375 San Antonio TX 78258
6 Is lender a financial institution? N	9 Loan Amount (\$) 400.00	
		10 Interest rate 0.000000
		11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 9/3/2024	Name of lender John Atwood	Loan Amount (\$) 140.00
Is lender a financial institution? N	Lender address; City; State; Zip Code 401 E. Sonterra Blvd #375 San Antonio TX 78258	Interest rate 0.000000
		Maturity date
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
Principal occupation (See instructions)		Employer (See instructions)

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 4 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 9/10/2024	7 Name of lender John Atwood	8 Lender address; City; State; Zip Code
6 Is lender a financial institution? N	401 E. Sonterra Blvd #375 San Antonio TX 78258	
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 9/14/2024	Name of lender John Atwood	Loan Amount (\$) 400.00
Is lender a financial institution? N	Lender address; City; State; Zip Code	Interest rate 0.000000
Principal occupation / Job title (See instructions)		Maturity date
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
Principal occupation (See instructions)		Employer (See instructions)

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 5 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 9/15/2024	7 Name of lender John Atwood	8 Lender address; City; State; Zip Code
6 Is lender a financial institution? N	401 E. Sonterra Blvd #375 San Antonio TX 78258	
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 9/17/2024	Name of lender John Atwood	Loan Amount (\$) 80.00
Is lender a financial institution? N	Lender address; City; State; Zip Code	Interest rate 0.000000
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
Principal occupation (See instructions)		Employer (See instructions)

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 6 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 9/18/2024	7 Name of lender John Atwood	8 Lender address; City; State; Zip Code
6 Is lender a financial institution? N	401 E. Sonterra Blvd #375 San Antonio TX 78258	
	9 Loan Amount (\$) 40.00	
10 Interest rate 0.000000	11 Maturity date	
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 9/20/2024	Name of lender John Atwood	Loan Amount (\$) 40.00
Is lender a financial institution? N	Lender address; City; State; Zip Code	
	401 E. Sonterra Blvd #375 San Antonio TX 78258	
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
Principal occupation (See instructions)		Employer (See instructions)

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 7 of 11	
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 9/21/2024	7 Name of lender John Atwood	8 Lender address; 401 E. Sonterra Blvd #375 San Antonio TX 78258	9 Loan Amount (\$) 40.00
6 Is lender a financial institution? N			10 Interest rate 0.000000
		11 Maturity date	
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code		19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)	
Date of loan 9/28/2024	Name of lender John Atwood	□ out-of-state PAC (ID#)	Loan Amount (\$) 350.00
Is lender a financial institution? N	Lender address; 401 E. Sonterra Blvd #375 San Antonio TX 78258		Interest rate 0.000000
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Description of Collateral <input checked="" type="checkbox"/> none		□ Check if personal funds were deposited into political account (See Instructions)	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code		Amount Guaranteed (\$) 0.00
Principal occupation (See instructions)		Employer (See instructions)	

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 8 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/3/2024	7 Name of lender John Atwood	8 Lender address; City; State; Zip Code
6 Is lender a financial institution? N	401 E. Sonterra Blvd #375 San Antonio TX 78258	
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 10/11/2024	Name of lender John Atwood	Loan Amount (\$) 400.00
Is lender a financial institution? N	Lender address; City; State; Zip Code	Interest rate 0.000000
Principal occupation / Job title (See instructions)		Maturity date
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
Principal occupation (See instructions)		Employer (See instructions)

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 9 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/17/2024	7 Name of lender John Atwood	8 Lender address; City; State; Zip Code
6 Is lender a financial institution? N	401 E. Sonterra Blvd #375 San Antonio TX 78258	
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 10/29/2024	Name of lender John Atwood	Loan Amount (\$) 700.00
Is lender a financial institution? N	Lender address; City; State; Zip Code	Interest rate 0.000000
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 10 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 11/8/2024	7 Name of lender John Atwood	8 Lender address; City; State; Zip Code
6 Is lender a financial institution? N	401 E. Sonterra Blvd #375 San Antonio TX 78258	
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 11/23/2024	Name of lender John Atwood	Loan Amount (\$) 330.00
Is lender a financial institution? N	Lender address; City; State; Zip Code	Interest rate 0.000000
Principal occupation / Job title (See instructions)		Maturity date
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 11 of 11
2 FILER NAME John P Atwood		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/19/2024	7 Name of lender John Atwood	9 Loan Amount (\$) 100.00
6 Is lender a financial institution? N	8 Lender address; 401 E. Sonterra Blvd #375 San Antonio TX 78258	10 Interest rate 0.000000
		11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$) 0.00
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan 12/30/2024	Name of lender John Atwood	Loan Amount (\$) 60.00
Is lender a financial institution? N	Lender address; 401 E. Sonterra Blvd #375 San Antonio TX 78258	Interest rate 0.000000
		Maturity date
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$) 0.00
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

1 Total pages Schedule F1: 1 of 2	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 10/8/2024	5 Payee name Facebook		
6 Amount (\$) 50.00	7 Payee address; 1601 Willow Road Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/15/2024	Payee name Facebook		
Amount (\$) 50.00	Payee address; 1601 Willow Road Menlo Park, CA 94025	City; State; Zip Code	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 10/16/2024	Payee name Google		
Amount (\$) 10.65	Payee address; 1600 Amphitheatre Parkway Mountain View, CA 94043	City; State; Zip Code	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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

1 Total pages Schedule F1: 2 of 2	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 10/18/2024	5 Payee name St. Marys Law School		
6 Amount (\$) 250.00	7 Payee address; 1 Camino Santa Maria San Antonio, TX 78228	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Sponsorship	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 10/20/2024	Payee name Facebook		
Amount (\$) 7.15	Payee address; 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F2: 1 of 1	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule F3: 1 of 1</p>
<p>2 FILER NAME John P Atwood</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date</p>	<p>5 Name of person from whom investment is purchased</p> <p>.....</p> <p>6 Address of person from whom investment is purchased; City; State; Zip Code</p>	
	<p>7 Description of investment</p>	
	<p>8 Amount of investment (\$)</p>	
<p>Date</p>	<p>Name of person from whom investment is purchased</p> <p>.....</p> <p>Address of person from whom investment is purchased; City; State; Zip Code</p>	
	<p>Description of investment</p>	
	<p>Amount of investment (\$)</p>	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p>		

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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F4: 1 of 1	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0	
5 Date	6 Payee name		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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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 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

1 Total pages Schedule G: 1 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 8/10/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 8.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/10/2024	Payee name Fiverr International Ltd.		
Amount (\$) 8.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 8/11/2024	Payee name Fiverr International Ltd.		
Amount (\$) 8.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 2 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 8/11/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 25.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/11/2024	Payee name Fiverr International Ltd.		
Amount (\$) 43.23 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 8/14/2024	Payee name Fiverr International Ltd.		
Amount (\$) 337.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Website	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 3 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 8/18/2024	5 Payee Name BuildASign		
6 Amount (\$) 188.54 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 11525 Stonehollow Dr #100 Austin, TX 78758		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Banner / Sign	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/20/2024	Payee name Gotprint.com		
Amount (\$) 44.52 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7651 San Fernando Rd Bursbank, CA 91505		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Printed Materials	
	<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 8/20/2024	Payee name Gotprint.com		
Amount (\$) 146.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7651 San Fernando Rd Bursbank, CA 91505		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Printed Materials	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 4 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 8/21/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 31.32 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/21/2024	Payee name Fiverr International Ltd.		
Amount (\$) 31.81 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 8/21/2024	Payee name Fiverr International Ltd.		
Amount (\$) 14.44 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 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

1 Total pages Schedule G: 5 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 8/21/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 14.67 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/27/2024	Payee name Gotprint.com		
Amount (\$) 62.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7651 San Fernando Rd Bursbank, CA 91505		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Printed Materials	
	<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 8/28/2024	Payee name Fiverr International Ltd.		
Amount (\$) 8.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 6 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 8/30/2024	5 Payee Name Constant Contact		
6 Amount (\$) 203.43 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/31/2024	Payee name Temu		
Amount (\$) 30.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 251 Little Falls Drive Willmington, DE 19808		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description shirts	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/31/2024	Payee name Temu		
Amount (\$) 116.94 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 251 Little Falls Drive Willmington, DE 19808		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Shirts	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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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 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

1 Total pages Schedule G: 7 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 8/31/2024	5 Payee Name Temu		
6 Amount (\$) 123.90 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 251 Little Falls Drive Willmington, DE 19808		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Shirts	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/4/2024	Payee name Gotprint.com		
Amount (\$) 51.67 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7651 San Fernando Rd Bursbank, CA 91505		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Printed Materials	
	<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 9/4/2024	Payee name Gotprint.com		
Amount (\$) 41.78 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7651 San Fernando Rd Bursbank, CA 91505		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Printed Materials	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 8 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 9/5/2024	5 Payee Name Gotprint.com		
6 Amount (\$) 997.13 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 7651 San Fernando Rd Bursbank, CA 91505		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/5/2024	Payee name Fiverr International Ltd.		
Amount (\$) 14.67 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 9/6/2024	Payee name Fiverr International Ltd.		
Amount (\$) 14.67 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 9 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 9/6/2024	5 Payee Name Google		
6 Amount (\$) 10.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/7/2024	Payee name Fiverr International Ltd.		
Amount (\$) 14.67 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 9/7/2024	Payee name Fiverr International Ltd.		
Amount (\$) 14.67 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 10 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 9/8/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 34.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/11/2024	Payee name Texplus		
Amount (\$) 493.10 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4820 Mims Ave #1 Laredo, TX 78041		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Shirts	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/12/2024	Payee name Texplus		
Amount (\$) 33.77 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4820 Mims Ave #1 Laredo, TX 78041		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Postage	Description Shirts	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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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 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

1 Total pages Schedule G: 11 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 9/15/2024	5 Payee Name BuildASign		
6 Amount (\$) 425.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 11525 Stonehollow Dr #100 Austin, TX 78758		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Banner / Sign	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/16/2024	Payee name Google		
Amount (\$) 10.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 9/16/2024	Payee name Google		
Amount (\$) 50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 12 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 9/17/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 34.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/18/2024	Payee name Fiverr International Ltd.		
Amount (\$) 34.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 9/19/2024	Payee name Fiverr International Ltd.		
Amount (\$) 34.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 13 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 9/21/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 34.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/1/2024	Payee name Google		
Amount (\$) 88.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 10/1/2024	Payee name Facebook		
Amount (\$) 50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 14 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 10/9/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 21.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/18/2024	Payee name Fiverr International Ltd.		
Amount (\$) 14.67 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 10/18/2024	Payee name Fiverr International Ltd.		
Amount (\$) 8.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 15 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 10/19/2024	5 Payee Name Fiverr International Ltd.		
6 Amount (\$) 31.81 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 38 Greene St. New York, NY 10013		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/20/2024	Payee name Facebook		
Amount (\$) 7.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 10/20/2024	Payee name Facebook		
Amount (\$) 7.15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 16 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 10/20/2024	5 Payee Name Google		
6 Amount (\$) 200.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/22/2024	Payee name Gotprint.com		
Amount (\$) 39.07 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7651 San Fernando Rd Bursbank, CA 91505		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Printed materials	
	<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 10/24/2024	Payee name Facebook		
Amount (\$) 55.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 17 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 11/1/2024	5 Payee Name Google		
6 Amount (\$) 104.36 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/9/2024	Payee name Facebook		
Amount (\$) 61.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 11/16/2024	Payee name Google		
Amount (\$) 10.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 18 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 11/20/2024	5 Payee Name Facebook		
6 Amount (\$) 58.51 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/24/2024	Payee name Google		
Amount (\$) 350.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 11/30/2024	Payee name Constant Contact		
Amount (\$) 421.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 19 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 12/1/2024	5 Payee Name Google		
6 Amount (\$) 200.36 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/9/2024	Payee name Facebook		
Amount (\$) 68.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 12/16/2024	Payee name Google		
Amount (\$) 10.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	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

1 Total pages Schedule G: 20 of 20	2 FILER NAME John P Atwood	3 Filer ID (Ethics Commission Filers)	
4 Date 12/20/2024	5 Payee Name Facebook		
6 Amount (\$) 71.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/30/2024	Payee name Google		
Amount (\$) 500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By 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

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

SCHEDULE I

The Instruction Guide explains how to complete this form.

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

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: 1 of 1</p>
<p>2 FILER NAME John P Atwood</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date</p>	<p>5 Name of person from whom amount is received</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code</p>	<p>8 Amount (\$)</p>
	<p>7 Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	

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

SCHEDULE T

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule T: 1 of 1</p>												
<p>2 FILER NAME John P Atwood</p>		<p>3 Filer ID (Ethics Commission Filers)</p>												
<p>4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee</p>														
<p>5 Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td><input type="checkbox"/> Schedule B-SS</td> </tr> </table>			<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
<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									
<p>6 Dates of travel</p>	<p>7 Name of person(s) traveling</p>													
	<p>8 Departure city or name of departure location</p>													
	<p>9 Destination city or name of destination location</p>													
<p>10 Means of transportation</p>	<p>11 Purpose of travel (including name of conference, seminar, or other event)</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor / Payee</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td><input type="checkbox"/> Schedule B-SS</td> </tr> </table>			<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
<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									
<p>Dates of travel</p>	<p>Name of person(s) traveling</p>													
	<p>Departure city or name of departure location</p>													
	<p>Destination city or name of destination location</p>													
<p>Means of transportation</p>	<p>Purpose of travel (including name of conference, seminar, or other event)</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor / Payee</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td><input type="checkbox"/> Schedule B-SS</td> </tr> </table>			<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
<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									
<p>Dates of travel</p>	<p>Name of person(s) traveling</p>													
	<p>Departure city or name of departure location</p>													
	<p>Destination city or name of destination location</p>													
<p>Means of transportation</p>	<p>Purpose of travel (including name of conference, seminar, or other event)</p>													
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p>														

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
John P Atwood

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 or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder