

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: 42
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Marc	MI K	OFFICE USE ONLY	
	NICKNAME	LAST Whyte	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; 9240 Marymont Park San Antonio TX 78217				Date Received 1/15/2026 3:13:41PM
	AREA CODE (210)	PHONE NUMBER 562-2870	EXTENSION		
5 CANDIDATE / OFFICEHOLDER PHONE					Date Hand-delivered or Date Postmarked
	MS / MRS / MR Mr	FIRST Eddie	MI		
6 CAMPAIGN TREASURER NAME	NICKNAME	LAST Aldrete	SUFFIX	Receipt #	Amount \$
					Date Processed 1/15/2026 3:13:41PM
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 335 Countrywood Dr. San Antonio TX 78216				STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 492-8383	EXTENSION		
9 REPORT TYPE	January 15: Semi-Annual				
10 PERIOD COVERED	Month Day Year 7/1/2025			Month Day Year 12/31/2025	
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) Council District 10			13 OFFICE SOUGHT (if known) Council District 10	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mr Marc K Whyte		15 Filer ID (Ethics Commission Filers)																		
16 NOTICE FROM POLITICAL COMMITTEE(S) <div style="float: right; margin-right: 10px;"> <small>THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</small> </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; vertical-align: top; padding: 5px;"> <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> Additional Pages </td> <td style="width: 85%; vertical-align: top; padding: 5px;"> <small>COMMITTEE TYPE</small> <small>COMMITTEE NAME</small> <small>COMMITTEE ADDRESS</small> <small>COMMITTEE CAMPAIGN TREASURER NAME</small> <small>COMMITTEE CAMPAIGN TREASURER ADDRESS</small> </td> </tr> </table>			<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> Additional Pages	<small>COMMITTEE TYPE</small> <small>COMMITTEE NAME</small> <small>COMMITTEE ADDRESS</small> <small>COMMITTEE CAMPAIGN TREASURER NAME</small> <small>COMMITTEE CAMPAIGN TREASURER ADDRESS</small>																
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17 CONTRIBUTION TOTALS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; vertical-align: top; padding: 5px;">EXPENDITURE TOTALS</td> <td style="width: 60%; vertical-align: top; padding: 5px;">1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</td> <td style="width: 25%; vertical-align: top; padding: 5px; text-align: right;">\$ 0</td> </tr> <tr> <td style="vertical-align: top; padding: 5px;">CONTRIBUTION BALANCE</td> <td style="vertical-align: top; padding: 5px;">2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</td> <td style="vertical-align: top; padding: 5px; text-align: right;">\$ 36550.00</td> </tr> <tr> <td style="vertical-align: top; padding: 5px;">OUTSTANDING LOAN TOTALS</td> <td style="vertical-align: top; padding: 5px;">3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.</td> <td style="vertical-align: top; padding: 5px; text-align: right;">\$ 0</td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"></td> <td style="vertical-align: top; padding: 5px;">4. TOTAL POLITICAL EXPENDITURES</td> <td style="vertical-align: top; padding: 5px; text-align: right;">\$ 7651.43</td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"></td> <td style="vertical-align: top; padding: 5px;">5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</td> <td style="vertical-align: top; padding: 5px; text-align: right;">\$ 114522.19</td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"></td> <td style="vertical-align: top; padding: 5px;">6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</td> <td style="vertical-align: top; padding: 5px; text-align: right;">\$ 50000.00</td> </tr> </table>			EXPENDITURE TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0	CONTRIBUTION BALANCE	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 36550.00	OUTSTANDING LOAN TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0		4. TOTAL POLITICAL EXPENDITURES	\$ 7651.43		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 114522.19		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50000.00
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18 AFFIDAVIT <div style="text-align: center; margin-top: 10px;"> <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 style="text-align: right;">* * * Electronically Certified * * *</p> <hr/> <p style="text-align: right;">Signature of Candidate or Officeholder</p> </div> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said <u>Mr Marc K Whyte</u> this the <u>15th</u> day of <u>January</u>, 2026, to certify which, witness my hand and seal of office.</p> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: left; padding-bottom: 5px;">Signature of officer administering oath</td> <td style="width: 33%; text-align: center; padding-bottom: 5px;">Printed name of officer administering oath</td> <td style="width: 33%; text-align: right; padding-bottom: 5px;">Title of officer administering oath</td> </tr> </table>			Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath															
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SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME Mr Marc K Whyte	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 36550.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7651.43
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: 1 of 23</p>
<p>2 FILER NAME Mr Marc K Whyte</p>			<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 7/9/2025</p>	<p>5 Full name of contributor Shad Schmid</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>6 Contributor address; 318 Waxberry Trl San Antonio, TX 78256</p>		<p>7 Amount of contribution (\$) 200.00</p>
<p>8 Principal occupation / Job title (See instructions) Self</p>		<p>9 Employer (See instructions) Self</p>	
<p>Date 7/11/2025</p>	<p>Full name of contributor Jeffrey Czar</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>Contributor address; 307 Huntington Place San Antonio, TX 78231</p>		<p>Amount of contribution (\$) 200.00</p>
<p>Principal occupation / Job title (See instructions) Attorney</p>		<p>Employer (See instructions) Self</p>	
<p>Date 7/15/2025</p>	<p>Full name of contributor Tyler Horstmann</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>Contributor address; 24751 Buck Crk San Antonio, TX 78255</p>		<p>Amount of contribution (\$) 50.00</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>	
<p>Date 7/15/2025</p>	<p>Full name of contributor William Crawford</p> <p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>Contributor address; 3162 Barton Hill Drive Bulverde, TX 78163</p>		<p>Amount of contribution (\$) 100.00</p>
<p>Principal occupation / Job title (See instructions) Homebuilder</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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 2 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 7/16/2025	5 Full name of contributor Timothy Pruski	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 26227 High Timber Pass San Antonio, TX 78260			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Land Manager		9 Employer (See instructions) Bella Vista Homes	
Date 7/16/2025	Full name of contributor PAC I SAB	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3625 Paesanos Pkw San Antonio, TX 78231			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 7/16/2025	Full name of contributor Kristi Sutterfield	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 18523 Wild Onion San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive Officer		Employer (See instructions) Greater San Antonio Builders Association	
Date 7/16/2025	Full name of contributor Paul Kuwamura	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7428 Gallery Ridge San Antonio, TX 78250			City; State; Zip Code
Principal occupation / Job title (See instructions) Director of Purchasing		Employer (See instructions) Sitterle Homes	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 3 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 7/16/2025	5 Full name of contributor Jeanne Conger	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 23834 Village Blacksmith San Antonio, TX 78255			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Exec		9 Employer (See instructions) On3	
Date 7/16/2025	Full name of contributor Ed Berlanga	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 14929 Cadillac Dr. San Antonio, TX 78248			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Texas Hones	
Date 7/30/2025	Full name of contributor SEAN Goertz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 225 Castano Ave San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Administrative		Employer (See instructions) Texas Medical Legal Consultants, LLC	
Date 7/30/2025	Full name of contributor Kathryn Goertz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 225 Castano Ave San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Texas Medical Legal Consultants, LLC	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 4 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 7/31/2025	5 Full name of contributor Amanda Lopez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 5922 Spring Bow San Antonio, TX 78247			
8 Principal occupation / Job title (See instructions) Business Development		9 Employer (See instructions) Gibson Plumbing	
Date 7/31/2025	Full name of contributor PAC Valero	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; PO Box 696000 San Antonio, TX 78269			
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 7/31/2025	Full name of contributor Gary Joeris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; PO Box 790086 San Antonio, TX 78279			
Principal occupation / Job title (See instructions) General Contractor		Employer (See instructions) Joeris General Contractors, Ltd	
Date 7/31/2025	Full name of contributor Maria Joeris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; PO Box 790086 San Antonio, TX 78279			
Principal occupation / Job title (See instructions) Self		Employer (See instructions) Self Employed	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 5 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/1/2025	5 Full name of contributor Christian Hummel Sr	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 7519 Bridgewater dr. San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) retired		9 Employer (See instructions)	
Date 8/1/2025	Full name of contributor Christian Hummel Jr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 7519 Bridgewater dr. San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Property Manager		Employer (See instructions) self	
Date 8/1/2025	Full name of contributor BJ Hummel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 7519 Bridgewater dr. San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions)	
Date 8/1/2025	Full name of contributor Hillary Hummel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 7519 Bridgewater dr. San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) homemaker		Employer (See instructions)	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 6 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/4/2025	5 Full name of contributor BRAD JOHNSON	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 2211 Camelback Dr San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Financial Advisory		9 Employer (See instructions) JDK Wealth Advisors	
Date 8/4/2025	Full name of contributor LISA JOHNSON	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2211 Camelback Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Homemaker		Employer (See instructions)	
Date 8/6/2025	Full name of contributor Pat Frost	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 520 Geneseo Road San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired	
Date 8/7/2025	Full name of contributor & Sampson, LLP Linebarger Coggan Blair	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; PO Box 17428 Austin, TX 78760			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 7 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/11/2025	5 Full name of contributor Anne Spencer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 30804 Buck Lane Bulverde, TX 78163			City; State; Zip Code
8 Principal occupation / Job title (See instructions) retired		9 Employer (See instructions) retired	
Date 8/11/2025	Full name of contributor John Bellinger	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 19431 Settlers Crk San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) homemaker		Employer (See instructions) Self-Employed	
Date 8/11/2025	Full name of contributor Gina Bellinger	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 19431 Settlers Crk San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 8 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/12/2025	5 Full name of contributor Jacqueline Kemper	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 6217 E 77th PI Tulsa, OK 74136			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Owner CEO		9 Employer (See instructions) Granite Ridge Consulting	
Date 8/12/2025	Full name of contributor Brandon Seale	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 202 Ridgehaven PI San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired	
Date 8/12/2025	Full name of contributor Richard Wells	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 610 E. Market San Antonio, TX 78266			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Dailey and Wells Comm	
Date 8/12/2025	Full name of contributor JoAnne Wells	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 610 E. Market San Antonio, TX 78266			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Dailey and Wells Comm	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 9 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/13/2025	5 Full name of contributor JOHN AGATHER	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
	6 Contributor address; 300 West French PI San Antonio, TX 78212	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Musician		9 Employer (See instructions) John Agather	
Date 8/13/2025	Full name of contributor Chris Cheever	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 4242 Broadway St San Antonio, TX 78209	City; State; Zip Code	
Principal occupation / Job title (See instructions) Banker		Employer (See instructions) Broadway Bank	
Date 8/13/2025	Full name of contributor APRIL ANCIRA	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 31305 Kenneland Dr Boerne, TX 78015	City; State; Zip Code	
Principal occupation / Job title (See instructions) Vp		Employer (See instructions) ANCIRA	
Date 8/14/2025	Full name of contributor Yvonne Marks	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 14122 Churchill Estates San Antonio, TX 78248	City; State; Zip Code	
Principal occupation / Job title (See instructions)		Employer (See instructions) Self	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 10 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/17/2025	5 Full name of contributor Rob Myers	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 1214 Willow Knoll San Antonio, TX 78258			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Golf Professional		9 Employer (See instructions) R II M, LLC	
Date 8/18/2025	Full name of contributor Bob Parks	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 3219 Tavern Oaks St San Antonio, TX 78247			City; State; Zip Code
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Texas Mgt Associates, Inc.	
Date 8/18/2025	Full name of contributor Myrtle Parks	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 3219 Tavern Oaks St San Antonio, TX 78247			City; State; Zip Code
Principal occupation / Job title (See instructions) homemaker		Employer (See instructions)	
Date 8/18/2025	Full name of contributor Hope Andrade	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 123 Lexington Ave San Antonio, TX 78205			City; State; Zip Code
Principal occupation / Job title (See instructions) Entrepreneur		Employer (See instructions) Self	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 11 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/18/2025	5 Full name of contributor Seth Bell	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 7801 Broadway San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Law Office of Seth K. Bell	
Date 8/18/2025	Full name of contributor Brad Beldon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 101 Paseo Encinal St San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) VP		Employer (See instructions) Progressive Roofing	
Date 8/18/2025	Full name of contributor Rick Cavender	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 21105 W. Interstate 10 San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) Auto Dealer		Employer (See instructions) Cavender Auto Family	
Date 8/18/2025	Full name of contributor Daniel Kustoff	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2 Westelm Cir San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Kustoff & Sanders LLP	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 12 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/18/2025	5 Full name of contributor Allison Kustoff	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 2 Westelm Cir San Antonio, TX 78230			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Volunteer		9 Employer (See instructions) self	
Date 8/18/2025	Full name of contributor Pat Garrison Garrison	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 335 Oak Glen Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Host		Employer (See instructions) Chick fil A	
Date 8/18/2025	Full name of contributor Perry Donop Jr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 7744 Broadway #108 San Antonio, TX 78208			City; State; Zip Code
Principal occupation / Job title (See instructions) Developer		Employer (See instructions) Self	
Date 8/19/2025	Full name of contributor Richard Sheldon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 4006 Green Oak Waco, TX 76710			City; State; Zip Code
Principal occupation / Job title (See instructions) Real Estate		Employer (See instructions) Rick Sheldon Real Estate, LLC	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 13 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/19/2025	5 Full name of contributor Lisa Sheldon	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 4006 Green Oak Waco, TX 76710			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Realtor		9 Employer (See instructions) Rick Sheldon Real Estate, LLC	
Date 8/19/2025	Full name of contributor Donald Macaulay	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 5903 Lost Creek St San Antonio, TX 78247			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired	
Date 8/19/2025	Full name of contributor Elizabeth Hepp	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2904 Bison Ridge Dr Bulverde, TX 78163			City; State; Zip Code
Principal occupation / Job title (See instructions) Vice President		Employer (See instructions) Valero	
Date 8/20/2025	Full name of contributor Gerald W. Lee	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 18907 Calle Cierra San San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) GAP Consultants	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 14 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/20/2025	5 Full name of contributor Silver Vasquez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 16006 Ponderosa Pass Helotes, TX 78023			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Quatro Strategics Solutions	
Date 8/20/2025	Full name of contributor Matthew Wymer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 428 Normandy Ave San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Wymer & Tom, PC	
Date 8/20/2025	Full name of contributor Henry Bonilla	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 610 E. Market St. San Antonio, TX 78205			City; State; Zip Code
Principal occupation / Job title (See instructions) Partner		Employer (See instructions) The Normandy Group	
Date 8/20/2025	Full name of contributor Daniel Gostylo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2150 Encino Loop San Antonio, TX 78259			City; State; Zip Code
Principal occupation / Job title (See instructions) Commercial Broker		Employer (See instructions) Partners Real Estate	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 15 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/20/2025	5 Full name of contributor John Montford	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 1 Buckingham Ct San Antonio, TX 78257			City; State; Zip Code
8 Principal occupation / Job title (See instructions) President & CEO		9 Employer (See instructions) JTM Consulting	
Date 8/20/2025	Full name of contributor John Brenneman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4 Bromwich San Antonio, TX 78218			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions)	
Date 8/20/2025	Full name of contributor Joel Ferdin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2 Walden Elms San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) owner		Employer (See instructions) Joel's Collision Repair LLC	
Date 8/20/2025	Full name of contributor Linda Ferdin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2 Walden Elms San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) Self Employed		Employer (See instructions) Self Employed	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 16 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/20/2025	5 Full name of contributor Juan Flores	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 150.00
6 Contributor address; 439 Calumet PI San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Executive		9 Employer (See instructions) Port San Antonio	
Date 8/20/2025	Full name of contributor Ken Brown	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 100 NE Loop 410 #1385 San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Brown & McDonald	
Date 8/20/2025	Full name of contributor Daniel Mullins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 217 Tuttle Rd San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Real Estate Developer		Employer (See instructions) Southerland Communities	
Date 8/20/2025	Full name of contributor Leslie Mullins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 217 Tuttle Rd San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Homemaker		Employer (See instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 17 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/20/2025	5 Full name of contributor Fermin Rajunov	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 5 Wayward Oaks San Antonio, TX 78248			City; State; Zip Code
8 Principal occupation / Job title (See instructions) President		9 Employer (See instructions) Cultiva Financial	
Date 8/20/2025	Full name of contributor Group Sabinal	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 237 W. Travis #200 San Antonio, TX 78205			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 8/20/2025	Full name of contributor PAC Killen Griffin & Farrimond	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 10101 Reunion PI #250 San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 8/21/2025	Full name of contributor Summer Greathouse	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 125 West Agarita Avenue San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Bracewell	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 18 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/21/2025	5 Full name of contributor Paul Basaldua	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 24 Inwood Manor San Antonio, TX 78248			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Real Estate		9 Employer (See instructions) VersaTerra Development	
Date 8/22/2025	Full name of contributor David Heard	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 414 Prinz Dr. San Antonio, TX 78213			City; State; Zip Code
Principal occupation / Job title (See instructions) CMO		Employer (See instructions) SecureLogix	
Date 8/25/2025	Full name of contributor Phil Bakke	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 207 Roosevelt Ave San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) President		Employer (See instructions) Bakke Development	
Date 8/25/2025	Full name of contributor Michael Little	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 214 Tuttle Rd San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Anesthesiologist		Employer (See instructions) UT Health SA	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 19 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/25/2025	5 Full name of contributor Nikki Little 6 Contributor address; 214 Tuttle Rd San Antonio, TX 78209	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Self		9 Employer (See instructions) Self Employed	
Date 8/25/2025	Full name of contributor Jennifer Hoff Contributor address; 5615 Kirby Dr Houston, TX 77005	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Executive VP		Employer (See instructions) IBC Bank	
Date 8/25/2025	Full name of contributor PAC IBC State Contributor address; 5615 Kirby Dr Houston, TX 77005	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 8/27/2025	Full name of contributor PAC Bracewell Contributor address; 711 Louisiana St #2300 Houston, TX 77002	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions)		Employer (See instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 20 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/28/2025	5 Full name of contributor Marshall Miller	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 20742 Stone Oak Pkwy #107 San Antonio, TX 78258			
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Jackson Walker	
Date 8/28/2025	Full name of contributor APRIL ANCIRA	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 400.00
Contributor address; 31305 Kenneland Dr Boerne, TX 78015			
Principal occupation / Job title (See instructions) Vp		Employer (See instructions) ANCIRA	
Date 8/29/2025	Full name of contributor Ronnie Villanueva	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 809 Wyoming San Antonio, TX 78203			
Principal occupation / Job title (See instructions) Vice President		Employer (See instructions) Tru-Matrix Contracting Services LLC	
Date 8/29/2025	Full name of contributor Kristi Villanueva	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 809 Wyoming San Antonio, TX 78203			
Principal occupation / Job title (See instructions) Managing Partner		Employer (See instructions) Tru-Matrix Contracting	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 21 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 8/29/2025	5 Full name of contributor W. Reed Williams	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 517 Geneseo Rd San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions)	
Date 9/3/2025	Full name of contributor Stan Waterhouse	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 7672 Dianjou Dr El Paso, TX 79912			City; State; Zip Code
Principal occupation / Job title (See instructions) Self Employed		Employer (See instructions) Self Employed	
Date 9/4/2025	Full name of contributor R.B. Pablos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 805 Pinon Blvd San Antonio, TX 78260			City; State; Zip Code
Principal occupation / Job title (See instructions) Advisor		Employer (See instructions) Cross National	
Date 9/7/2025	Full name of contributor Jack Hebdon Jr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 8102 Nufy Rdg San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Real Estate		Employer (See instructions) Bakke Development Corp	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 22 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 9/10/2025	5 Full name of contributor Shay Bluntzer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 26135 Sunny Mdw San Antonio, TX 78260			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Owner		9 Employer (See instructions) Marlin Blue Strategists	
Date 9/10/2025	Full name of contributor James McKnight	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2019 Flint Oak Dr. San Antonio, TX 78248			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Ortiz McKnight PLLC	
Date 9/10/2025	Full name of contributor Daniel Ortiz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 112 E Pecan Street San Antonio, TX 78205			City; State; Zip Code
Principal occupation / Job title (See instructions) Shareholder/Attorney		Employer (See instructions) Ortiz McKnight PLLC	
Date 9/10/2025	Full name of contributor Cassandra Ortiz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 9103 Mellbrook St San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Shareholder/Attorney		Employer (See instructions) Ortiz McKnight PLLC	
<p style="text-align: center;">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>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 23 of 23
2 FILER NAME Mr Marc K Whyte			3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2025	5 Full name of contributor Lew Moorman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 121 E Mariposa Dr San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) General Partner		9 Employer (See instructions) Scaleworks	
Date 9/30/2025	Full name of contributor PAC USAA	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 9800 Fredericksburg San Antonio, TX 78288			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 11/25/2025	Full name of contributor Jay David Heller	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2165 East Maya Palm Dr. Boca Raton, FL 33432			City; State; Zip Code
Principal occupation / Job title (See instructions) President & CEO		Employer (See instructions) The NRP Group	
Date 12/20/2025	Full name of contributor Melinda Montford	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 1 Buckingham Ct San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self Employed	
<p style="text-align: center;">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 Mr Marc K Whyte</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 Mr Marc K Whyte</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 1
2 FILER NAME Mr Marc K Whyte		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)
Is lender a financial institution?	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
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 4	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)	
4 Date 7/3/2025	5 Payee name Raconteur Media Company		
6 Amount (\$) 96.80	7 Payee address; PO Box 26511 Austin, TX 78755	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description media	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 7/30/2025	Payee name Erika Guzman		
Amount (\$) 300.00	Payee address; 12002 Los Cerdos St. San Antonio, TX 78233		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Campaign Finance Report
	<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 7/31/2025	Payee name Paloma Blanca		
Amount (\$) 100.00	Payee address; 5800 Broadway #300 San Antonio, TX 78209		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense		Description Deposit for Fundraising Event
	<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 4	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)	
4 Date 8/12/2025	5 Payee name Raconteur Media Company		
6 Amount (\$) 433.75	7 Payee address; City; State; Zip Code PO Box 26511 Austin, TX 78755		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description media	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 8/22/2025	Payee name Paloma Blanca		
Amount (\$) 1544.20	Payee address; City; State; Zip Code 5800 Broadway #300 San Antonio, TX 78209		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Fundraising Event	
	<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 9/5/2025	Payee name NORMA DENHAM & ASSOCIATES		
Amount (\$) 3200.00	Payee address; City; State; Zip Code 15706 Knoll Cliff San Antonio, TX 78247		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Fundraising	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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: 3 of 4	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)														
4 Date 9/12/2025	5 Payee name Raconteur Media Company															
6 Amount (\$) 225.10	7 Payee address; PO Box 26511 Austin, TX 78755	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Media														
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 10/23/2025</td> <td>Payee name Raconteur Media Company</td> </tr> <tr> <td>Amount (\$) 319.62</td> <td>Payee address; PO Box 26511 Austin, TX 78755</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description media</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 10/23/2025	Payee name Raconteur Media Company	Amount (\$) 319.62	Payee address; PO Box 26511 Austin, TX 78755	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description media	<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 10/23/2025	Payee name Raconteur Media Company															
Amount (\$) 319.62	Payee address; PO Box 26511 Austin, TX 78755															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description media														
	<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													
<table border="1"> <tr> <td>Date 11/21/2025</td> <td>Payee name Amazon.com</td> </tr> <tr> <td>Amount (\$) 78.32</td> <td>Payee address; 410 Terry Ave. N. Seattle, WA 98109</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Other: Office Supplies</td> <td>Description office supplies</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 11/21/2025	Payee name Amazon.com	Amount (\$) 78.32	Payee address; 410 Terry Ave. N. Seattle, WA 98109	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Office Supplies	Description office supplies	<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 11/21/2025	Payee name Amazon.com															
Amount (\$) 78.32	Payee address; 410 Terry Ave. N. Seattle, WA 98109															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Office Supplies	Description office supplies														
	<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: 4 of 4	2 FILER NAME Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)	
4 Date 12/15/2025	5 Payee name Raconteur Media Company		
6 Amount (\$) 399.24	7 Payee address; PO Box 26511 Austin, TX 78755	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description media	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 12/31/2025	Payee name Anedot		
Amount (\$) 954.40	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Credit Card Processing	
	<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 Mr Marc K Whyte	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
---	------

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

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

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

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

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

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 Mr Marc K Whyte</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 Mr Marc K Whyte	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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

SCHEDULE I

The Instruction Guide explains how to complete this form.

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

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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 Mr Marc K Whyte</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 Mr Marc K Whyte</p>		<p>3 Filer ID (Ethics Commission Filers)</p>												
<p>4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee</p>														
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<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>													
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<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
Mr Marc K Whyte

Filer ID (Ethics Commission Filers)

SIGNATURE

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

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

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

A. CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

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

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

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

Signature of Candidate

OFFICEHOLDER

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

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

Signature of Officeholder