## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

_										
Th	e C/OH Instruction G	uide explains how to complete	e this form.		2 Total pages filed: 18					
3	CANDIDATE / OFFICEHOLDER NAME		FIRST Clarence Thomas	MI	OFFICE USE ONLY  Date Received					
			AST Varren III	SUFFIX	RECEIVED JAN 16 2024					
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / S PO Box 295	SUITE#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked  Receipt # Amount					
	Change of Address	Amarillo, TX 79105			Date Processed  Date Imaged					
5	CAMPAIGN TREASURER NAME		Jason	MI						
			ast oglesones	SUFFIX						
6	CAMPAIGN TREASURER ADDRESS (Residence or Business)	TO9 S Maryland	•	TISUITE#; CITY;	STATE; ZIP CODE					
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE 906 477 - 1	NUMBER EXTENSION							
8	REPORT TYPE	X January 15 July 15	8th day before election	Runoff  Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only)     Final Report (Attach C/OH-FR)					
9	PERIOD COVERED	Month Day Year 09/20/2023	THROUGH	Month Day 12/31/202	Year 3					
1.0	ELECTION	ELECTION DATE Month Day Year 03/05/2024	X Primary General	ELECTION TYPE Runoff Special	Other					
11	OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT Potter County Ta	(if known) x Assessor-Collector					
			GO TO PAGE 2							

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME Warren III, Clarence	Γhomas			16 File	r ID (Ethics	Commission Filers)
17 CONTRIBUTION TOTALS	1,:	TOTAL UNITEMIZED POLITICAL CON PLEDGES, LOANS, OR GUARANTEE CONTRIBUTIONS MADE ELECTRONI	S OF LOANS, OR	N	\$	0
	2,	TOTAL POLITICAL CONTRIBUTIO (OTHER THAN PLEDGES, LOANS, OF		)	\$ 13	3,650.49
EXPENDITURE TOTALS		\$	0			
	4.	TOTAL POLITICAL EXPENDITURE	s		\$	7,356.46
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS OF REPORTING PERIOD	MAINTAINED AS OF THE LA	ST DAY	\$	9,788.95
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL C LAST DAY OF THE REPORTING PER		F THE	\$	0
		ffirm, under penalty of perjury, that the		ie and co	orrect and ir	ncludes all information
			$\bigcirc$ 11			
			( ) hul			
			Signature of C	andidate	or Officeho	older
		Diago complete	oither ention hele	473		
		Please complete	either option belov	N.		
(1) Affidavit						
NOTARY STAMP/SEA	L					
Sworn to and subscribed	before me	e by	this the		_ day of _	
20, to certify	which, witr	ness my hand and seal of office.				
Signature of officer administe	ering oath	Printed name of officer add	ministering oath		Title of offi	cer administering oath
		OR		Mary Co		X264, 31.3
(2) Unsworn Declarati	ion					
My name is C. Thomas	s Warren	III	and my date of birth i	s 9/4/19	998	
My address is PO Box 2			Amarillo T	X	79109	USA
		(street)	, ,,		(zip code)	(country)
Executed in Potter		County, State of Texas , or	the 16 day of Janua (mon	ary th)	, 20 <mark>_24</mark> (year	<del>-)</del> -
			Signature of Cand	lidate/Offi	iceholder (D	eclarant)

## **SUBTOTALS - C/OH**

**COVER SHEET PG 3** 

					3 01 18
	LER NAM	ME , Clarence Thomas	19 Filer ID		
	CHEDULI AME OF	SUB	TOTAL AMOUNT		
1.	×	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	13,650.49
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	3,909.46
6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	200.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	3,247.00
10	D. 🗌	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
1:	ı. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	2. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	47.92

					RECEIVED H	AN 16 2020
	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/18	
2	FILER NAME			3	Filer ID	
	Warren III, C	larence Thomas		Ļ		
4	Date 12/17/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Beals, Richard</li> <li>Contributor address; City; State; Zip Code</li> </ul>	7	Amount of Contribution (\$)	<b>\$104.1</b> 0	
		PO Box 8286				
		Amarillo, TX 79114		L		
8	Principal occu Constable	pation / Job title (See Instructions)	9 Employer (See Instructions Randall County	s)		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	11/15/2023	Boatler, Tam				\$100.00
		Contributor address; City; State; Zip Code				
		3909 Kingston Rd				
		Amarillo, TX 79109				
H	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	County Com	missioner	Randall County			
-	Date	Full name of contributor out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	12/05/2023	Bowen, Scott				\$52.05
		Contributor address; City; State; Zip Code				
		15703 Firthridge Ct				
		Webster, TX 77598				
H	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instruction:	s)		
	Chemical Er	ngineer	TPC Group			
F	Date	Full name of contributor out-of-state PAC (ID#:		T	Amount of Contribution (\$)	
	09/21/2023	Fairly, Alex				\$10,000.00
		Contributor address; City; State; Zip Code				
		1800 S Washington				
		Amarillo, TX 79102				
r	Principal occu	upation / Job title (See Instructions)	s)			
	President		Fairly Group			
Г	Date	Full name of contributor out-of-state PAC (ID#:_		Τ	Amount of Contribution (\$)	
	12/16/2023	Foglesong, Jason				\$26.03
		Contributor address; City; State; Zip Code				
		709 S Maryland				
		Amarillo, TX 79106				
r	Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	ıs)		

Educator

Amarillo ISD

#### RECEIVED JAN 15 202 MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/4 Rpt: 5/18 3 Filer ID 2 FILER NAME Warren III, Clarence Thomas 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#:\_ \$100.00 12/13/2023 Gualtiere, Craig 6 Contributor address; City; State; Zip Code 6822 Marika Circle Amarillo, TX 79124 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Self Businessman Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: Date \$52.05 12/09/2023 Heath, Edward Contributor address; City; State; Zip Code 8711 Adair Amarillo, TX 79108 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$200.00 10/16/2023 Hutto, Ted Contributor address; City; State; Zip Code PO Box 33 Pampa, TX 79066 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self **Business Owner** out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 11/03/2023 \$500.00 Marshall, William & Tracy Contributor address; City; State; Zip Code 6422 Del Norte Ln Dallas, TX 75225 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$832.81 12/12/2023 Paetzold, Gary R. Contributor address; City; State; Zip Code 5312 Elmdale Drive Watauga, TX 76137 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

#### RECEIVED JAN 16 2024 MONETARY POLITICAL CONTRIBUTIONS 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/4 Rpt: 6/18 3 Filer ID 2 FILER NAME Warren III, Clarence Thomas 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: \$260.25 12/09/2023 Rogers, Dan 6 Contributor address; City; State; Zip Code 506 S Lipscomb Amarillo, TX 79101 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Property Manager LEMC Realty** Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 12/12/2023 Roller, Tom \$350.00 Contributor address; City; State; Zip Code 109 Chucker Amarillo, TX 79124 Principal occupation / Job title (See Instructions) Employer (See Instructions) Coldwell Banker First Equity Commercial Realtor Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 12/08/2023 Russell, Jeff Contributor address; City; State; Zip Code 1703 Redbud Odessa, TX 79761 Principal occupation / Job title (See Instructions) **Employer (See Instructions) Business** owner Self Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/10/2023 \$208.20 Scherlen, Tom Contributor address; City; State; Zip Code 3512 Meadow Dr Amarillo, TX 79109 Employer (See Instructions) Principal occupation / Job title (See Instructions) City of Amarillo City Councilman Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date 09/20/2023 Warren III, Thomas \$750.00 Contributor address; City; State; Zip Code PO Box 295 Amarillo, TX 79105 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amarillo Pioneer **Editor**

## RECEIVED JAN 16 20 MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 7/18 3 Filer ID 2 FILER NAME Warren III, Clarence Thomas 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 4 Date \$7.50 10/31/2023 Warren III, Thomas 6 Contributor address; City; State; Zip Code PO Box 295 Amarillo, TX 79105 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amarillo Pioneer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$7.50 11/30/2023 Warren III, Thomas Contributor address; City; State; Zip Code PO Box 295 Amarillo, TX 79105 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amarillo Pioneer Editor

www.ethics.state.tx.us

Forms provided by Texas Ethics Commission

Version V3.5.1.99923476

SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 1/6 Rpt: 8/18	2 FILER NAME Warren III, Clarence Thomas	
4	Date 09/29/2023	5 Payee name Deluxe	
6	Amount (\$) \$19.65	7 Payee address; City; State; Zip Code 105 Rt 46 West  Mountain Lakes, NJ 07046	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Check printing	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date 10/01/2023	Payee name Neel & Partners	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 8601 Ice House Dr Unit 7108 North Richland Hills, TX 76180	
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Consulting fees	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 12/13/2023	Payee name Neel & Partners	
	Amount (\$) \$172.58	Payee address; City; State; Zip Code  8601 Ice House Dr  Unit 7108  North Richland Hills, TX 76180	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payment of invoice for flyer printing	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

RECEIVED JAN 16 20 SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Political Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/6 Rpt: 9/18	Warren III, Clarence Thomas
4	Date	5 Payee name
	11/14/2023	Pope Reproduction & Supply
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$259.80	900 S Jefferson St
		Amarillo, TX 79101
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule To Check if Austin, TX, officeholder living expense
		Flyers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	12/07/2023	Potter County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	4217 SW 21st Ave
		Amarillo, TX 79106
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Ballot filling fee
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	12/21/2023	Squarespace Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.00	225 Varick Street
		New York City, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Purchase of campaign website domain
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

RECESCHEDULE F12004

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 3/6 Rpt: 10/18	Warren III, Clarence Thomas
4	Date	5 Payee name
	12/13/2023	Warren, Thomas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,369.00	PO Box 295
L		Amarillo, TX 79105
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Reimbursement for yard sign expenditure on
		12/13/2023
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/13/2023	Warren, Thomas
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 295
L		Amarillo, TX 79105
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Reimbursement for Neel & Partners consulting fee
		payment on 12/13/2023
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L	experialiture to benefit Crof	
	Date	Payee name
L	12/15/2023	Warren, Thomas
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 295
		A
_		Amarillo, TX 79105
1	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
1		Reimbursement for payment from personal funds for consulting services by Neel & Partners
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	,	

RECEIVED JAN 15 202

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/6 Rpt: 11/18	Warren III, Clarence Thomas
4	Date	5 Payee name WinRed
L	12/05/2023	
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.05	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T, Check if Austin, TX, officeholder living expense
		Fundraising fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	12/08/2023	WinRed
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code
	\$3.94	1776 Wilson Blvd
	ψ3.54	Suite 530
L		Arlington, VA 22209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Fundraising fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
	12/09/2023	WinRed
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$2.05	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22209
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Fundraising fees
H	Complete ONEV II June	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
-		
1		

RECEIVED JAN 16.2024 SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above The Instruction Guide explains how to complete this form.							OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 5/6 Rpt: 12/18	2		Elarence Thomas	6				3	Filer ID
4	Date 12/09/2023	5	Payee name WinRed							
6	Amount (\$) \$10.25	7	Payee addre 1776 Wilson Suite 530 Arlington, V	n Blvd	State;	Zip Coo	de			
8	PURPOSE OF EXPENDITURE	(a)	Category (S Fees	ee Categories listed at the	e top of this sched	dule)	(b)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense S
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office held
	Date 12/10/2023		Payee name WinRed							
	Amount (\$) \$8.20		Payee addre 1776 Wilso Suite 530 Arlington, V	n Blvd	State;	Zip Coo	de			
	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	ee Categories listed at the	e top of this sche	edule)	(b)	므	ı, TX	ide of Texas. Complete Schedule T. r., officeholder living expense S
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offi	iceholder name	Of	ffice soug	ght			Office held
	Date 12/12/2023		Payee name WinRed		,					
	Amount (\$) \$32.81		Payee addre 1776 Wilso Suite 530 Arlington, V	n Blvd	State;	Zip Coo	de —			
	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	ee Categories listed at the	e top of this sche	edule)	(b)	ابيا	ı, TX	side of Texas. Complete Schedule T. 5, officeholder living expense S
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	O	ffice soug	ght			Office held



**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

Forms provided by Texas Ethics Commission

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Cor	nmittee	Gift/Awards/Memorials Expens Legal Services  The Instruction Guide ex	Salaries/\	Vages	/Contract Labor		el Out of District ER (enter a category not listed	d above)
1	Total pages Cabadula 51:	2						3 Filer	· ID	
1	Total pages Schedule F1: Sch: 6/6 Rpt: 13/18			Clarence Thomas				3 FIEL		
4	Date 12/16/2023	5	Payee name WinRed							
6	Amount (\$)	7	Payee addres		State; Zip Co	ode				
	\$1.03		1776 Wilson Suite 530	i Biva						
			Arlington, V.	A 22209		I <sub>(L)</sub>				
8	PURPOSE OF	(a)	•	ee Categories listed at the top	of this schedule)	(b)	Description	outside of T	Texas. Complete Schedule T	
	EXPENDITURE		Fees						holder living expense	'
							Fees for fundi			
		1. 555 151 1511515151								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	Office sou	.ght			Office held	
F	Date	Г	Payee name							
	12/17/2023		WinRed							
Г	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode				
	\$4.10		1776 Wilson	n Blvd						
ı			Suite 530							
			Arlington, V	A 22209						
H	PURPOSE	(a)			of all in the dotal	(P)	Description	_		
	OF	("	Fees	ee Categories listed at the top	or this schedule)	-/		outside of T	Texas. Complete Schedule T.	
	EXPENDITURE		1 003				Check if Austin,	, TX, office	holder living expense	
							Fees for fund	Iraising		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	Office so	ught			Office held	
Г										
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### **UNPAID INCURRED OBLIGATIONS**



		EXPENDITORE CA	TEGORIES FOR	BOX 10(a)	
Advertising Expense		Event Expense		ment/Reimbursement ead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Accounting/Banking Consulting Expense		Fees Food/Beverage Expense	Polling Expe	nse	Travel in District
Contributions/ Donations Made & Candidate/Officeholder/Politic		Gift/Awards/Memorials Expens Legal Services	e Printing Exp Salaries/Wa	ense ges/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
Sandigator Sind Charles	a commune	The Instruction Guide ex			
1 Total pages Schedule F2:	2 FILER NAM		tpiano non to com		3 Filer ID
Sch: 1/1 Rpt: 14/18	1	Clarence Thomas			
	wanen iii,	Clarence momas			
<sup>4</sup> TOTAL OF UNITEM	IZED UNPAID	INCURRED OBLIG	SATIONS		\$
5 Date	6 Payee name	2			
12/27/2023	The Barn o	n Willow Creek			
7 Amount (\$)	8 Payee addre	ess; City;	State; Zip Code	9	
		low Creek Dr			
\$200.00	4601 E WII	IOW Creek DI			
	Amarillo, T	X 79108			
9 TYPE OF	X	Political	Non-Politic	al	
EXPENDITURE					
10 PURPOSE	(a) Category (s	See Categories listed at the top o	of this schedule)	b) Description	
OF	Event Expe	ense		Check if travel	outside of Texas. Complete Schedule T.
EXPENDITURE				Check if Austin,	TX, officeholder living expense
				Venue rental	for meet-and-greet event
11 Complete ONLY if direct	Candidate/Of	ficeholder name	Office sough	nt	Office held
expenditure to benefit C/C		ncerolaci name	Office Sough		Omoc riciu

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

RECEIVED AND. SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		mmittee						Travel Out of District OTHER (enter a category not listed above)		
_		-				priorito i			T <sub>c</sub>	Pil- IP
1	1. 3	2	FILER NAME						3	Filer ID
	Sch: 1/3 Rpt: 15/18	_	Warren III,		e Thomas					
4	Date	5	Payee name							
	12/13/2023		A.G.E. Gra	phics						
6	Amount (\$)	7	Payee addre	ess; (	City;	State;	Zip C	ode		
	\$1,369.00		678 Collins	Road						
	Reimbursement from									
	x political contributions intended		Little Hocki	ng, OH	45742					
8	PURPOSE	(a)	Category (s	ee Categor	ies listed at the top	of this sche	edule)	(b) Description	Ch	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising	Expens	se				Ch	neck if Austin, TX, officeholder living expense
	EXI ENDITORE							Yard Signs		
9		Cai	ndidate/Office	holder n	ame			Office sought		Office held
	expenditure to benefit C/OH									
		_								
	Date		Payee name							
	10/16/2023	L	Neel & Par	tners						
	Amount (\$)		Payee addre	ess;	City;	State;	Zip C	code		
	\$768.00		8601 Ice H	ouse Dr	•					
	Reimbursement from political contributions		Unit 7108							
ļ.	intended		North Richl	and Hill	s, TX 76180					
	PURPOSE		Category (s	See Categor	ries listed at the top	of this sche	edule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Consulting	Expens	se				Ch	neck if Austin, TX, officeholder living expense
	EXI ENDITORE							Consulting Fees	and	d Printing Fees
		Ca	ndidate/Office	holder n	ame			Office sought		Office held
	expenditure to benefit C/OH									
=	Data								_	
	Date		Payee name							
_	11/06/2023	_	Neel & Par							
	Amount (\$)		Payee addre		City;	State;	Zip C	ode		
	\$250.00		8601 Ice H	ouse Di	T					
	Reimbursement from political contributions		Unit 7108							
	intended		North Richl	land Hill	ls, TX 76180					
	PURPOSE		Category (s	See Categor	ries listed at the top	of this sch	edule)	Description	_	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Consulting	Expens	se			[	Cr	heck if Austin, TX, officeholder living expense
								Consulting Fee		
	Complete <u>ONLY</u> if direct expenditure to benefit	Ca	ndidate/Office	holder n	ame			Office sought		Office held
	C/OH									
H										

## POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule G:		3 Filer ID						
-	Sch: 2/3 Rpt: 16/18	Warren III, Clarence Thomas	o ringi ib						
4	Date	5 Payee name							
	12/07/2023	Neel & Partners							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$250.00	8601 ice House Dr							
	Reimbursement from	Unit 7108							
	X political contributions intended	North Richland Hills, TX 76180							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.						
	OF EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense						
		Consulting Fee							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/13/2023	Neel & Partners							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	8601 Ice House Dr							
	Reimbursement from political contributions	Unit 7108							
	X political contributions intended	North Richland Hills, TX 76180							
	PURPOSE	Category (See Categories listed at the top of this schedule)  Description	Check if travel outside of Texas. Complete Schedule T.						
	OF EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense						
		Consulting fees							
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/12/2023	Plaza Restaurant & Bar							
	Amount (\$) Payee address; City; State; Zip Code								
	\$50.00								
	Reimbursement from								
	political contributions intended	Amarillo, TX 79124							
	PURPOSE OF	Category (See Categories listed at the top of this schedule)  Description	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
	EXPENDITURE	Event Expense L							
			for Conservative Patriots 4 Texas ate meet and greet and party						
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held						
_			Version V0 F 4 0000047						

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

RECEIVED JAN SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	r - Il Co	mmittee	Gift/Awards/Memorials Expense Legal Services  The Instruction Guide exp		Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2	FILER NAME				3 Filer ID		
	Sch: 3/3 Rpt: 17/18			Clarence Thomas					
4	Date	5	Payee name						
	09/22/2023		Squarespa						
6	Amount (\$)	7	7 Payee address; City; State; Zip Code						
	\$24.00		225 Varick Street						
	Reimbursement from political contributions intended		New York (	City, NY 10014					
8	PURPOSE	(a)	Category (s	ee Categories listed at the top of t	his schedule)	(b) Description	Check if travel outside of Texas. Complete Schedu	ile T	
	OF EXPENDITURE		Website Fe	es			Check if Austin, TX, officeholder living expense		
						Domain registra	tion costs for web domains		
9	Complete ONLY if direct	Cal	ndidate/Office	holder name		Office sought	Office held		
	expenditure to benefit C/OH	-	midate/Onice	noidel flame					
Г	Date	Г	Payee name						
	12/10/2023		Squarespa						
Г	Amount (\$)	Г	Payee addre	ss; City;	State; Zip Co	ode			
	\$36.00		225 Varick	Street					
	Reimbursement from								
	PURPOSE		Category (s	ee Categories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete Schedu	ıle T.	
OF EXPENDITURE			Advertising	g Expense		] [	Check if Austin, TX, officeholder living expense		
With the state of						b domains			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Ca	ndidate/Office	holder name		Office sought	Office held		
ı									
							Variat V2 F 1 0002		

### RECEIVED JAN 16 INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 18/18 3 Filer ID 2 FILER NAME Warren III, Clarence Thomas 5 Name of person from whom amount is received 8 Amount (\$) \$12.27 Texas Plains Federal Credit Union 09/30/2023 6 Address of person from whom amount is received; City; State; Zip Code 804 S Madison St Amarillo, TX 79101 Purpose for which amount is received Check if political contribution returned to filer Interest paid back on deposit Amount (\$) Date Name of person from whom amount is received \$12.67 10/31/2023 Texas Plains Federal Credit Union Address of person from whom amount is received; City; State; Zip Code 804 S Madison St Amarillo, TX 79101 Purpose for which amount is received Check if political contribution returned to filer Interest paid back on deposit Amount (\$) Name of person from whom amount is received Date \$12.29 11/30/2023 Texas Plains Federal Credit Union Address of person from whom amount is received; City; State; Zip Code 804 S Madison St Amarillo, TX 79101 Check if political contribution returned to filer Purpose for which amount is received Interest paid back on deposit Amount (\$) Name of person from whom amount is received Date \$10.69 Texas Plains Federal Credit Union 12/31/2023 Address of person from whom amount is received; City; State; Zip Code 804 S Madison St Amarillo, TX 79101 Purpose for which amount is received Check if political contribution returned to filer Interest paid back on deposit