

# AS IF - SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM AS IF - SPAC  
COVER SHEET PG 1

The AS IF-SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:																
<b>3 FILER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: small;">MS / MRS / MR</td> <td style="width:35%; text-align: center;">FIRST</td> <td style="width:15%; text-align: center;">MI</td> <td style="width:35%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">MR</td> <td style="text-align: center;">CARVIS</td> <td style="text-align: center;">R</td> </tr> <tr> <td style="font-size: x-small;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="text-align: center;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">JUNIOUS</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI			MR	CARVIS	R	NICKNAME	LAST	SUFFIX			JUNIOUS			<b>OFFICE USE ONLY</b>	
MS / MRS / MR	FIRST	MI																	
	MR	CARVIS	R																
NICKNAME	LAST	SUFFIX																	
	JUNIOUS																		
<b>4 FILER ADDRESS</b>		Date Received  <div style="font-size: 24px; text-align: center;">RECEIVED NOV - 8 2023</div>																	
<input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE  207    REINERMAN    HOUSTON    TX    77007	Date Hand-delivered or Date Postmarked  Receipt #                      Amount \$  Date Processed  Date Imaged																	
<b>5 REPORT TYPE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Runoff</td> </tr> </table>	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff												
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<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election																		
	<input type="checkbox"/> Runoff																		
<b>6 PERIOD COVERED</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: x-small;">Month</td> <td style="width:15%; font-size: x-small;">Day</td> <td style="width:15%; font-size: x-small;">Year</td> <td style="width:15%;"></td> <td style="width:15%; font-size: x-small;">Month</td> <td style="width:15%; font-size: x-small;">Day</td> <td style="width:15%; font-size: x-small;">Year</td> </tr> <tr> <td style="text-align: center;">08</td> <td style="text-align: center;">/ 30</td> <td style="text-align: center;">/ 2023</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">11</td> <td style="text-align: center;">/ 07</td> <td style="text-align: center;">/ 2023</td> </tr> </table>			Month	Day	Year		Month	Day	Year	08	/ 30	/ 2023	THROUGH	11	/ 07	/ 2023		
Month	Day	Year		Month	Day	Year													
08	/ 30	/ 2023	THROUGH	11	/ 07	/ 2023													
<b>7 ELECTION</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: x-small;">Month</td> <td style="width:15%; font-size: x-small;">Day</td> <td style="width:15%; font-size: x-small;">Year</td> </tr> <tr> <td style="text-align: center;">11</td> <td style="text-align: center;">/ 07</td> <td style="text-align: center;">/ 2023</td> </tr> </table>	Month	Day	Year	11	/ 07	/ 2023	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: x-small;">ELECTION TYPE</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other</td> </tr> <tr> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td>Description _____</td> </tr> </table>			ELECTION TYPE			<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	Description _____
Month	Day	Year																	
11	/ 07	/ 2023																	
ELECTION TYPE																			
<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other																	
<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	Description _____																	

**GO TO PAGE 2**

# AS IF - SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

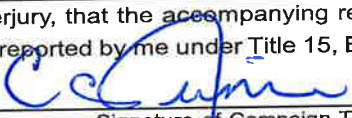
FORM AS IF - SPAC  
COVER SHEET PG 2

**8 FILER NAME** MR. CARVIS R. JUNIOUS **9 Filer ID (Ethics Commission Filers)**

<b>10 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)  <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input checked="" type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE  <input type="checkbox"/> OFFICEHOLDER	<b>CANDIDATE / OFFICEHOLDER NAME</b> WILLIAM RANDOLPH BATES, JR.  <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b> SCHOOL BOARD TRUSTEE
	<input type="checkbox"/> MEASURE	<b>BALLOT IDENTIFICATION / #</b>  <b>ELECTION DATE</b> Month / Day / Year
	<b>DESCRIPTION</b>	

<b>11 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold	\$ 7,600.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,600.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 7,600.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,600.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**12 SIGNATURE** 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.

  
Signature of Campaign Treasurer (Declarant)

Please complete either option below:

**(1) Affidavit**

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath \_\_\_\_\_ Printed name of officer administering oath \_\_\_\_\_ Title of officer administering oath \_\_\_\_\_  
OR

**(2) Unsworn Declaration**

My name is MR. CARVIS R. JUNIOUS, and my date of birth is 10/21/1975.  
 My address is 207 REINERMAN, HOUSTON, TX, 77007, USA  
 (street) (city) (state) (zip code)(country)  
 Executed in HARRIS County, State of TEXAS, on the 07 day of NOVEMBER, 2023.  
 (month) (year)

  
Signature of Campaign Treasurer (Declarant)

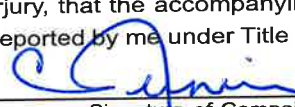
# AS IF - SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

**FORM AS IF - SPAC  
COVER SHEET PG 2**

<b>8 FILER NAME</b> MR. CARVIS R. JUNIOUS		<b>9 Filer ID</b> (Ethics Commission Filers)
<b>10 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)  <input type="checkbox"/> SUPPORT (Candidate or Measure)  <input type="checkbox"/> OPPOSE (Candidate or Measure)  <input checked="" type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE  <input type="checkbox"/> OFFICEHOLDER  <input type="checkbox"/> MEASURE	<b>CANDIDATE / OFFICEHOLDER NAME</b> DR. KIMBERLEY BOOKER  <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b> SCHOOL BOARD TRUSTEE  <b>BALLOT IDENTIFICATION / #</b> _____ <b>ELECTION DATE</b> _____ _____ Month _____ Day _____ Year  <b>DESCRIPTION</b> _____

<b>11 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold	\$ 7,600.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,600.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 7,600.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,600.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**12 SIGNATURE** 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.

  
\_\_\_\_\_  
Signature of Campaign Treasurer (Declarant)

**Please complete either option below:**

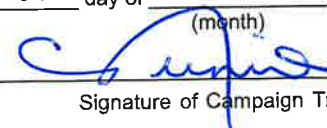
**(1) Affidavit**  
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, to certify which, witness my hand and seal of office.

---

Signature of officer administering oath \_\_\_\_\_ Printed name of officer administering oath \_\_\_\_\_ Title of officer administering oath \_\_\_\_\_  
OR

**(2) Unsworn Declaration**  
My name is MR. CARVIS R. JUNIOUS, and my date of birth is 10/21/1975.  
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Executed in HARRIS County, State of TEXAS, on the 07 day of NOVEMBER, 2023.  
(month) (year)

  
\_\_\_\_\_  
Signature of Campaign Treasurer (Declarant)

# AS IF - SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

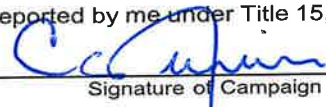
FORM AS IF - SPAC  
COVER SHEET PG 2

**8** FILER NAME MR. CARVIS R. JUNIOUS **9** Filer ID (Ethics Commission Filers)

<b>10 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)  <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input checked="" type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE	CANDIDATE/OFFICEHOLDER NAME <u>PAUL SHANKLIN</u>
	<input type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) <u>SCHOOL BOARD TRUSTEE</u>
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # _____ ELECTION DATE _____ Month Day Year _____ / _____ / _____ DESCRIPTION _____

<b>11 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold	\$ 7,600.00
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	4. TOTAL POLITICAL EXPENDITURES	\$ 7,600.00
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Signature of Campaign Treasurer (Declarant)

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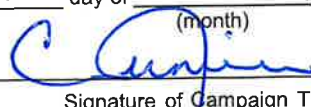
Signature of officer administering oath \_\_\_\_\_ Printed name of officer administering oath \_\_\_\_\_ Title of officer administering oath \_\_\_\_\_  
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My name is MR. CARVIS R. JUNIOUS, and my date of birth is 10/21/1975.

My address is 207 REINERMAN, HOUSTON, TX 77007 USA.  
(street) (city) (state) (zip code)(country)

Executed in HARRIS County, State of TEXAS, on the 07 day of NOVEMBER, 2023.  
(month) (year)



Signature of Campaign Treasurer (Declarant)

# SUBTOTALS - AS IF - SPAC

# FORM AS IF - SPAC COVER SHEET PG 3

<b>13</b> FILER NAME MR. CARVIS R. JUNIOUS		<b>14</b> Filer ID (Ethics Commission Filers)
<b>15</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 7,600.00
2. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
3. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4	<b>2</b> FILER NAME MR. CARVIS R. JUNIOUS	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/19/2023	<b>5</b> Payee name CHRIST-LIKE GRAPHICS	
<b>6</b> Amount (\$) 910.00	<b>7</b> Payee address; City; State; Zip Code 9898 BISSONNET STREET HOUSTON TEXAS 77036	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) PRINTING EXPENSE	<b>(b)</b> Description YARD SIGNS
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/09/2023	Payee name KRE8TIVLYKRE	
Amount (\$) 433.00	Payee address; City; State; Zip Code WWW.KRE8TIVLYKRE.COM HOUSTON TEXAS	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description T-SHIRTS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/09/2023	Payee name CHRIST-LIKE GRAPHISS	
Amount (\$) 823.50	Payee address; City; State; Zip Code 9898 BISSONNET STREET HOUSTON TEXAS 77036	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) PRINTING EXPENSE	Description YARD SIGNS
	<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

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME <b>MR. CARVIS R. JUNIOUS</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/11/2023</b>	<b>5</b> Payee name <b>RPC PRINTING &amp; DESIGN, INC.</b>	
<b>6</b> Amount (\$) <b>375.00</b>	<b>7</b> Payee address; <b>4110 MAJESTIC STREET</b>	City; State; Zip Code <b>HOUSTON TEXAS 77026</b>
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>	<b>(b)</b> Description <b>PUSH CARDS</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10/12/2023</b>	Payee name <b>RPC PRINTING &amp; DESIGN, INC.</b>	
Amount (\$) <b>375.00</b>	Payee address; <b>4110 MAJESTIC STREET</b>	City; State; Zip Code <b>HOUSTON TEXAS 77026</b>
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>	Description <b>PUSH CARDS</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10/16/2023</b>	Payee name <b>BLANKS MEDIA</b>	
Amount (\$) <b>1100.00</b>	Payee address; <b>9898 BISSONNET STREET</b>	City; State; Zip Code <b>HOUSTON TEXAS 77036</b>
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>	Description <b>YARD SIGNS DOOR HANGERS</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4	<b>2</b> FILER NAME MR. CARVIS R. JUNIOUS	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/24/2023	<b>5</b> Payee name SOUTHERN BLUE STRATEGIES	
<b>6</b> Amount (\$) 1048.60	<b>7</b> Payee address; City; State; Zip Code 2420 BISSONNET STREET HOUSTON TEXAS 77005	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description TEXT MESSAGES
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/07/2023	Payee name L.P.C. CONSULTING	
Amount (\$) 1250.00	Payee address; City; State; Zip Code P.O. BOX 41277 HOUSTON TEXAS 77241	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ACCOUNTING CONSULTING EXPENSE	Description PAUL SHANKLIN
	<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 11/07/2023	Payee name L.P.C. CONSULTING	
Amount (\$) 1250.00	Payee address; City; State; Zip Code P.O. BOX 41277 HOUSTON TEXAS 77241	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ACCOUNTING CONSULTING EXPENSE	Description DR. KIMBERLEY BOOKER
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment   | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
- The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4	<b>2</b> FILER NAME MR. CARVIS R. JUNIOUS	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/07/2023	<b>5</b> Payee name AMEGY BANK OF TEXAS	
<b>6</b> Amount (\$) 34.90	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 26547 SALT LAKE CITY UTAH 84126	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) BANKING	<b>(b)</b> Description OPENING DEPOSIT
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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

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

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