

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: 10

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Kristofer

B

Linney

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

5413 Hwy 59 W Beeville, Tx 78102

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(361) 319-9943

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Kristofer

B

Linney

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

5413 Hwy 59 W Beeville, Tx 78102

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(361) 319-9943

9 REPORT TYPE

☒ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☐ July 15

☐ 8th day before election

☐ Exceeded Modified
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

07 / 01 / 2025

THROUGH

12 / 31 / 2025

11 ELECTION

ELECTION DATE

Month

Day

Year

03 / 03 / 2026

ELECTION TYPE

☒ Primary

☐ Runoff

☐ Other
Description

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Bee County Judge

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 500²⁸

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 9750²⁸

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 10,017⁴⁰

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 3733⁷⁶

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 2000²⁸

18 SIGNATURE

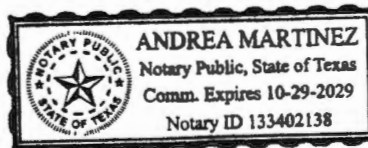
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Kristofer Linney

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Kristofer Linney this the 13th day of January, 2024, to certify which, witness my hand and seal of office.

Andrea Martinez
Signature of officer administering oath

Andrea Martinez
Printed name of officer administering oath

Notary Public
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Kristofer Linney

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1. ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 10,250⁰⁰

2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. ☐ SCHEDULE E: LOANS

\$

5. ☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 10,017⁴⁰

6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. ☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <div style="text-align: right; font-size: 1.5em;">3</div>
2 FILER NAME <div style="font-size: 1.2em;">Kristofer Linney</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em;">11-20-25</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="font-size: 1.2em;">Beck Bros.</div> 6 Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">Beeville, Tx 78104</div>	7 Amount of contribution (\$) <div style="font-size: 1.5em;">250⁰⁰</div>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <div style="font-size: 1.2em;">9-29-25</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="font-size: 1.2em;">Kenneth Bethune</div> Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">Beeville, Tx 78102</div>	Amount of contribution (\$) <div style="font-size: 1.5em;">500⁰⁰</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <div style="font-size: 1.2em;">9-19-25</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="font-size: 1.2em;">Ray Desinso</div> Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">Wyoming</div>	Amount of contribution (\$) <div style="font-size: 1.5em;">1000⁰⁰</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <div style="font-size: 1.2em;">9-11-25</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="font-size: 1.2em;">Elect. Adam Hinojosa</div> Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">Corpus Christi, Tx 78480</div>	Amount of contribution (\$) <div style="font-size: 1.5em;">2500⁰⁰</div>
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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Kristofer Winney</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9-6-25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>John... Humston</i> 6 Contributor address; City; State; Zip Code <i>[REDACTED] [REDACTED] Beeville, Tx 78104</i>	7 Amount of contribution (\$) <i>1000⁰⁰</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>9-4-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Linebarger... Goggin... Blair... and... Sampson</i> Contributor address; City; State; Zip Code <i>[REDACTED] [REDACTED] Austin, Tx 78760</i>	Amount of contribution (\$) <i>1000⁰⁰</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>8-19-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Bridget... O'Neil</i> Contributor address; City; State; Zip Code <i>[REDACTED] [REDACTED] [REDACTED] Beeville, Tx 78102</i>	Amount of contribution (\$) <i>2000⁰⁰</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>8-13-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>John M. Zwappier Sr.</i> Contributor address; City; State; Zip Code <i>[REDACTED] [REDACTED] [REDACTED] [REDACTED] Rockport, Tx 78382</i>	Amount of contribution (\$) <i>1000⁰⁰</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Kristofer Linney</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>7-8-25</i>	5 Full name of contributor <i>Lineberger...Gaggen...Blair and Sampson</i> 6 Contributor address; City; State; Zip Code <i>[Redacted] Austin, Tx 78760</i>	7 Amount of contribution (\$) <i>500⁰⁰</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.		

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
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)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4		2 FILER NAME Kristofer Linney		3 Filer ID (Ethics Commission Filers)	
4 Date 9.23.25		5 Payee name Vista Print			
6 Amount (\$) 81.53		7 Payee address; 275 Wymen		City;	State;
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expenses		(b) Description Business Cards		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Kristofer Linney		Office sought Bee County Judge	Office held
Date 9.23.25		Payee name Signs 2 Go			
Amount (\$) 6184.30		Payee address; 304 E Pecan St McAllen, Tx 78501		City;	State;
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expenses		Description Signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Kristofer Linney		Office sought Bee County Judge	Office held
Date 9.17.25		Payee name Amazon			
Amount (\$) 476.93		Payee address;		City;	State;
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expenses		Description Jersey's for Parade		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Kristofer Linney		Office sought Bee County Judge	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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Kristofer Linney</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>12-31-25</i>		5 Payee name <i>Signs 2 Go</i>			
6 Amount (\$) <i>162 38</i>		7 Payee address; City; State; Zip Code <i>304 E Pecan st McAllen, Tx 78501</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expenses</i>		(b) Description <i>signs</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	Office held
Date <i>12-12-25</i>		Payee name <i>South Texas News</i>			
Amount (\$) <i>950 00</i>		Payee address; City; State; Zip Code <i>111 N Washington Beeville Tx 78107</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>		Description <i>Newspaper Ads</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	Office held
Date <i>12-4-25</i>		Payee name <i>Vista Print</i>			
Amount (\$) <i>331 98</i>		Payee address; City; State; Zip Code <i>275 Wyman</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expenses</i>		Description <i>Flyers</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	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
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)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Kristofer Linney</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>9.17.25</i>		5 Payee name <i>Amazon</i>			
6 Amount (\$) <i>239</i>		7 Payee address;		City;	State; Zip Code
				<i>Seattle</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expenses</i>		(b) Description <i>Jersey's for Parade</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	Office held
Date <i>9.16.25</i>		Payee name <i>Michele Preston</i>			
Amount (\$) <i>600⁰⁰</i>		Payee address;		City;	State; Zip Code
		<i>403 W Adams Beeville, Tx 78102</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>		Description <i>Decorating Parade Float</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	Office held
Date <i>9-16-25</i>		Payee name <i>Lanyard Custom</i>			
Amount (\$) <i>146¹¹</i>		Payee address;		City;	State; Zip Code
		<i>16167 Kensington Dr. Sugarland Tx</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expenses</i>		Description <i>Bracelets for Parade</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	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
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)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Kristofer Linney</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>9.15.25</i>		5 Payee name <i>Amazon</i>			
6 Amount (\$) <i>207⁹⁰</i>		7 Payee address; City; State; Zip Code <i>Seattle</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expenses</i>		(b) Description <i>Candy Customized for Parade</i>		
	(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 <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	Office held
Date <i>9.15.25</i>		Payee name <i>Amazon</i>			
Amount (\$) <i>362⁹²</i>		Payee address; City; State; Zip Code <i>Seattle</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expenses</i>		Description <i>Custom Pens for Parade</i>		
	<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 <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	Office held
Date <i>9.15.25</i>		Payee name <i>Discount Mugs</i>			
Amount (\$) <i>274³⁵</i>		Payee address; City; State; Zip Code <i>12610 NW 115th Miami, Florida 33178</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expenses</i>		Description <i>Customized Stress Balls for Parade</i>		
	<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 <i>Kristofer Linney</i>		Office sought <i>Bee County Judge</i>	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED