

# 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: **77**

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mr.

Jason

S

NICKNAME

LAST

SUFFIX

Herrick

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

PO Box 185 Amarillo, Texas 79105

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 806 )

463-2483

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mr.

Dustin

M

NICKNAME

LAST

SUFFIX

Dusty

Barrick

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

3401 S. Fillmore Amarillo, Texas 79110

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 806 )

379-9622

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

1

/

1

/

25

THROUGH

Month

Day

Year

3

/

24

/

25

11 ELECTION

ELECTION DATE

Month

Day

Year

5

/

3

/

25

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other  
Description

☒

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Mayor

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

ASS  
12:36

#5295530

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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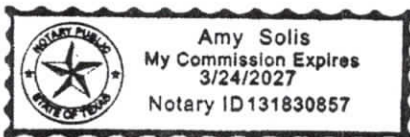
13 C / OH NAME Herrick, Jason	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 317,683.98
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 97,174.22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 200,237.41
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

## 17 AFFIDAVIT

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]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JASON HERRICK, this the 3rd day of April, 2025, to certify which, witness my hand and seal of office.

*[Signature]* Amy Solis Admin. Assistant  
Signature of officer administering Printed name of officer administering Title of officer administering oath

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

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<b>18 FILER NAME</b> Herrick, Jason		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 274,205.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 43,478.98
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 10,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 89,475.34
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 3,801.44
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 3,897.44
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/39 Rpt: 4/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Quinn 6 Contributor address; City; State; Zip Code 151 Laurel Leaf Lane Canyon, TX 79015	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Bank Executive		9 Employer (See Instructions) Wellington State Bank
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Jack Contributor address; City; State; Zip Code 7501 New England Pkwy Amarillo, TX 79119	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Allen & Willis, LLC
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amarillo Association of Realtors Contributor address; City; State; Zip Code 5601 Enterprise Cir Amarillo, TX 79106	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appel, Kevin Contributor address; City; State; Zip Code 4606 Jesse Jenkins Pkwy Amarillo, TX 79124	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Kevin Appel OD PA
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Aaron Contributor address; City; State; Zip Code 5204 Spartanburg Amarillo, TX 79119	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Surgeon		Employer (See Instructions) Loan Star Oral Surgery

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/39 Rpt: 5/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attebury Elevators 6 Contributor address; City; State; Zip Code P O Box 7768 Amarillo, TX 79104	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Meredith Contributor address; City; State; Zip Code 8000 Georgetown Amarillo, TX 79101	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Blaine Contributor address; City; State; Zip Code 1505 S Bryan Amarillo, TX 79102	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Group Health Insurance		Employer (See Instructions) Crown House Insurance
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Kirk (Mr.) Contributor address; City; State; Zip Code 2805 Bowie Amarillo, TX 79109	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Regional Sales Manager		Employer (See Instructions) Care and Maine
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrick, Brady Contributor address; City; State; Zip Code 6 Reserve Court Amarillo, TX 79124	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Diversified Interiors

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 3/39 Rpt: 6/77

**2** FILER NAME

Herrick, Jason

**3** Filer ID

**4** Date  
03/20/2025

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Barrick, Dustin

**7** Amount of Contribution (\$) \$1,000.00

**6** Contributor address; City; State; Zip Code  
4503 Ashville Place  
  
Amarillo, TX 79119

**8** Principal occupation / Job title (See Instructions)  
VP

**9** Employer (See Instructions)  
Diversified Interiors

Date  
03/20/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Barrick, Gary

Amount of Contribution (\$) \$1,000.00

Contributor address; City; State; Zip Code  
20 Cloister Pkwy  
  
Amarillo, TX 79121

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Diversified Interiors

Date  
03/05/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Baskett, Jeremy

Amount of Contribution (\$) \$500.00

Contributor address; City; State; Zip Code  
8001 Valcour Dr.  
  
Amarillo, TX 79119

Principal occupation / Job title (See Instructions)  
Real Estate Appraiser

Employer (See Instructions)  
JRBaskett, Inc.

Date  
03/05/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Beckum, Todd

Amount of Contribution (\$) \$1,000.00

Contributor address; City; State; Zip Code  
2112 S Travis St  
  
Amarillo, TX 79109

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
UU Marketing

Date  
03/08/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Bentley, Liz

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code  
4002 Pinehurst Dr  
  
Amarillo, TX 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 4/39 Rpt: 7/77

2 FILER NAME

Herrick, Jason

3 Filer ID

4 Date  
02/25/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Bentley, Robert

7 Amount of Contribution (\$)  
\$3,000.00

6 Contributor address; City; State; Zip Code  
7403 Park Ridge Dr.

Amarillo, TX 79119

8 Principal occupation / Job title (See Instructions)  
Sales

9 Employer (See Instructions)  
Upshaw Insurance Agency

Date  
03/05/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Bentley, Scott

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code  
8007 Patriot Dr

Amarillo, TX 79119

Principal occupation / Job title (See Instructions)  
Banking

Employer (See Instructions)  
First United Bank

Date  
02/26/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Bivins, Mark

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code  
PO Box 708

Amarillo, TX 79105

Principal occupation / Job title (See Instructions)  
Rancher

Employer (See Instructions)  
Self

Date  
03/24/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Black, Braden

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code  
3 Shinnecock Dr

Amarillo, TX 79124

Principal occupation / Job title (See Instructions)  
Executive

Employer (See Instructions)  
KT Black

Date  
03/24/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Black Jr., Braden

Amount of Contribution (\$)  
\$50.00

Contributor address; City; State; Zip Code  
7815 Cervin

Amarillo, TX 79121

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/39 Rpt: 8/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Jon 6 Contributor address; City; State; Zip Code 6109 Ridgewood Dr Amarillo, TX 79109	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Chiropractor		9 Employer (See Instructions) Precision Chiropractic
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowles, Tim (Dr.) Contributor address; City; State; Zip Code 6025 Estacado Ln. Amarillo, TX 79109	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Academic Medical Practice Administrator		Employer (See Instructions) TTUHSC
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, William Contributor address; City; State; Zip Code 2806 S Bowie St Amarillo, TX 79109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyett, JoDeane Contributor address; City; State; Zip Code 4000 Lynette Dr Amarillo, TX 79109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Daniel Contributor address; City; State; Zip Code 901 S. Filmore Amarillo, TX 79101	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Auto Sales and Service		Employer (See Instructions) Auto Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/39 Rpt: 9/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Edward and Janie 6 Contributor address; City; State; Zip Code 3002 S Lipscomb Amarillo, TX 79109	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) Auto Inc
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Edward and Janie Contributor address; City; State; Zip Code 3002 S Lipscomb Amarillo, TX 79109	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Auto Inc
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradshaw, Lewis Contributor address; City; State; Zip Code 4720 Ashville Place Amarillo, TX 79119	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Jaiston Contributor address; City; State; Zip Code 7815 Cervin Amarillo, TX 79121	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lloyd Contributor address; City; State; Zip Code 3203 Bowie St Amarillo, TX 79109	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Refined Completions LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 7/39 Rpt: 10/77

2 FILER NAME  
Herrick, Jason

3 Filer ID

4 Date  
02/25/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Brown, Richard

7 Amount of Contribution (\$)  
\$10,000.00

6 Contributor address; City; State; Zip Code  
3004 S Hayden St  
Amarillo, TX 79109

8 Principal occupation / Job title (See Instructions)  
President

9 Employer (See Instructions)  
Brown and Fortunato P.C.

Date  
02/12/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Buffington, Gary

Amount of Contribution (\$)  
\$250.00

Contributor address; City; State; Zip Code  
141 Glendale Drive  
Coppell, TX 75019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/20/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Bulla, Charles

Amount of Contribution (\$)  
\$250.00

Contributor address; City; State; Zip Code  
1400 Reagan Court  
Amarillo, TX 79124

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/09/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Burns, Nelson

Amount of Contribution (\$)  
\$250.00

Contributor address; City; State; Zip Code  
6675 Lakewood Dr  
Dallas, TX 75214

Principal occupation / Job title (See Instructions)  
Managing Partner

Employer (See Instructions)  
Destination IT

Date  
03/05/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Burr, Jason

Amount of Contribution (\$)  
\$200.00

Contributor address; City; State; Zip Code  
7802 Continental Pkwy  
Amarillo, TX 79119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/39 Rpt: 11/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bynum, Gregg	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 8607 Dallington Dr  Amarillo, TX 79119	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Sandy	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2302 Julian Blvd  Amarillo, TX 79102	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) NCW Insurance
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Bruce	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 6800 White Bluff Trl  Amarillo, TX 79118	
Principal occupation / Job title (See Instructions) Oil and Gas		Employer (See Instructions) Self
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caviness, Regan	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code 3006 South Hughes St  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Caviness Beef Packers
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caviness, Terry	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 3004 Lipscomb St  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Caviness Beef Packers

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/39 Rpt: 12/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caviness, Trevor <hr/> <b>6</b> Contributor address; City; State; Zip Code 3001 S. Ong  Amarillo, TX 79109	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) VP		<b>9</b> Employer (See Instructions) Caviness Beef Packers
<b>Date</b> 03/03/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Paul <hr/> <b>Contributor address; City; State; Zip Code</b> 3201 Milam  Amarillo, TX 79109	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Oil and Gas Production		<b>Employer (See Instructions)</b> PAC Production Company
<b>Date</b> 02/12/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Chris <hr/> <b>Contributor address; City; State; Zip Code</b> 1015 Gaston Ave  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Executive		<b>Employer (See Instructions)</b> Prosper Ops
<b>Date</b> 02/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Collen, Clifford <hr/> <b>Contributor address; City; State; Zip Code</b> 1607 S Rusk  Amarillo, TX 79102	<b>Amount of Contribution (\$)</b>  \$5,000.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Self
<b>Date</b> 02/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Constancio, Richard <hr/> <b>Contributor address; City; State; Zip Code</b> 16 Hogan Dr.  Amarillo, TX 79121	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Architect		<b>Employer (See Instructions)</b> Shiver Megert & Associates

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/39 Rpt: 13/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 02/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code 7702 New England Pkwy  Amarillo, TX 79119	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 02/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Crabtree, Brittany <hr/> <b>Contributor address; City; State; Zip Code</b> 11 Faith Step Ln  Canyon, TX 79015	<b>Amount of Contribution (\$)</b>  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 03/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Richard <hr/> <b>Contributor address; City; State; Zip Code</b> 2801 Teckla Blvd  Amarillo, TX 79106	<b>Amount of Contribution (\$)</b>  \$1,000.00
Principal occupation / Job title (See Instructions) Commercial Insurance		Employer (See Instructions) NCW Insurance
<b>Date</b> 03/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Eric <hr/> <b>Contributor address; City; State; Zip Code</b> 4800 Olsen Blvd  Amarillo, TX 79109	<b>Amount of Contribution (\$)</b>  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 03/12/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Michael <hr/> <b>Contributor address; City; State; Zip Code</b> 8202 Valcour Dr  Amarillo, TX 79119	<b>Amount of Contribution (\$)</b>  \$500.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) BSA Health System

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/39 Rpt: 14/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Al	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 17 Sandhill Ln  Amarillo, TX 79124	
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) DFB Insurance Group
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Phillip	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 8401 Addison Dr.  Amarillo, TX 79119	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Jon	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3510 Goodfellow Ln  Amarillo, TX 79121	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denison, Early (Dr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 3617 Haynie Ave  Dallas, TX 75205	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denton, John	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3000 South Lipscomb  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/39 Rpt: 15/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowdy, Daniel	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code 2501 S Van Buren St  Amarillo, TX 79109	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Ralph	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code 113 SW 8th Ave  Amarillo, TX 79101	
Principal occupation / Job title (See Instructions) Oil Producer		Employer (See Instructions) Bevo Production
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Andrew	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 14 Sandhills Ln  Amarillo, TX 79124	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaming, Colby	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 7803 Continental Pkwy  Amarillo, TX 79119	
Principal occupation / Job title (See Instructions) Co-Owner		Employer (See Instructions) Western Equipment
Date 02/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortunato, Michele	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1710 S Harrison St  Amarillo, TX 79102	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
Sch: 13/39 Rpt: 16/77

**2** FILER NAME

Herrick, Jason

**3** Filer ID

**4** Date

02/26/2025

**5** Full name of contributor

Frederick, Jonathan

☐ out-of-state PAC (ID#: \_\_\_\_\_)

**7** Amount of Contribution (\$)

\$1,000.00

**6** Contributor address; City; State; Zip Code

2806 S Hayden

Amarillo, TX 79109

**8** Principal occupation / Job title (See Instructions)

Engineer

**9** Employer (See Instructions)

Hadaway Engineering

Date

02/13/2025

Full name of contributor

Freeman, Tony

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

3916 Linda Drive

Amarillo, TX 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2025

Full name of contributor

Furrh, Brooke

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

4212 Roxton

Amarillo, TX 79109

Principal occupation / Job title (See Instructions)

Landscape Architect

Employer (See Instructions)

Custom Gardens

Date

03/22/2025

Full name of contributor

Furrh, Brooke

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

4212 Roxton

Amarillo, TX 79109

Principal occupation / Job title (See Instructions)

Landscape Architect

Employer (See Instructions)

Custom Gardens

Date

02/26/2025

Full name of contributor

Gadberry, Gavin

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

7806 Georgetown

Amarillo, TX 79119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/39 Rpt: 17/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallardo, Jennifer	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code 1608 S Fannin St  Amarillo, TX 79107	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Matthew	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code 2811 S Hayden St  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Vvntus
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaut, James	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2802 S Ong St  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gearn, Mica	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1505 S. Bryan  Amarillo, TX 79102	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliland, Sandra and Bill	Amount of Contribution (\$) \$15,000.00
	Contributor address; City; State; Zip Code 2806 Hughes  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 15/39 Rpt: 18/77

2 FILER NAME

Herrick, Jason

3 Filer ID

4 Date  
03/02/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Gleason, Christopher

7 Amount of Contribution (\$)  
\$500.00

6 Contributor address; City; State; Zip Code  
7713 Bent Tree Dr.  
  
Amarillo, TX 79121

8 Principal occupation / Job title (See Instructions)  
Executive

9 Employer (See Instructions)  
Public Steel

Date  
02/10/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Gleason, Eva (Ms.)

Amount of Contribution (\$)  
\$50.00

Contributor address; City; State; Zip Code  
2722 Phillips Gate Dr.  
  
Charlotte, NC 28210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/28/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Grace, Quinn

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code  
5905 Nancy Ellen St  
  
Amarillo, TX 79119

Principal occupation / Job title (See Instructions)  
Engineer

Employer (See Instructions)  
GSM Consulting

Date  
03/05/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Graham, Greg

Amount of Contribution (\$)  
\$1,200.00

Contributor address; City; State; Zip Code  
2802 S Hayden  
  
Amarillo, TX 79109

Principal occupation / Job title (See Instructions)  
VP of Commercial Lending

Employer (See Instructions)  
First Bank Southwest

Date  
03/02/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Graham, Perry

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code  
2803 Parker St  
  
Amarillo, TX 79109

Principal occupation / Job title (See Instructions)  
Jeweler

Employer (See Instructions)  
Graham Brother's

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/39 Rpt: 19/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Lori <hr/> <b>6</b> Contributor address; City; State; Zip Code 1201 SW 6th  Amarillo, TX 79101	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 02/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Brett <hr/> <b>Contributor address; City; State; Zip Code</b> 3217 S Travis St  Amarillo, TX 79109	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Managing Partner		<b>Employer (See Instructions)</b> Gilco Energy, LP
<b>Date</b> 03/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harney, David <hr/> <b>Contributor address; City; State; Zip Code</b> 8702 Patriot Dr  Amarillo, TX 79119	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 02/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harpole, Paul <hr/> <b>Contributor address; City; State; Zip Code</b> 7703 Pebblebrook Dr  Amarillo, TX 79119	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 02/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Beverly <hr/> <b>Contributor address; City; State; Zip Code</b> 7802 Stuyvesant Ave  Amarillo, TX 79121	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/39 Rpt: 20/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 02/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Headrick, John <hr/> <b>6</b> Contributor address; City; State; Zip Code 2811 Crockett St  Amarillo, TX 79109	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Mullin, Hoard, and Brown LLP
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Gloria <hr/> Contributor address; City; State; Zip Code 5701 Crabtree Ct  Amarillo, TX 79119	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Scott (Mr.) <hr/> Contributor address; City; State; Zip Code 5701 Crabtree  Amarillo, TX 79119	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Trent <hr/> Contributor address; City; State; Zip Code 1511 Crockett  Amarillo, TX 79102	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoard, Steven <hr/> Contributor address; City; State; Zip Code 10 Stoneridge Dr  Amarillo, TX 79124	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mullin Hard & Brown LLP

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/39 Rpt: 21/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Thomas	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 3508 Van Winkle Dr.  Amarillo, TX 79121	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Thomas Hood PC
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Michael	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 2806 Parker St  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) FMC Services
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunicutt-Hayes, Lori	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3923 Barclay Dr  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingalls, Timothy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1932 S. Harrison St  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irwin, Amy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1000 SW 28th Ave  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/39 Rpt: 22/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isern, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code 2800 S. Travis  Amarillo, TX 79109	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarnagin, Roy <hr/> Contributor address; City; State; Zip Code 3227 Travis  Amarillo, TX 79109	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenks, Darren <hr/> Contributor address; City; State; Zip Code 7706 Baughman Dr.  Amarillo, TX 79121	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Amarillo National Bank
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, George <hr/> Contributor address; City; State; Zip Code 4503 Greenwich Pl  Amarillo, TX 79119	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Mortenson Dental Health
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juba, Amy <hr/> Contributor address; City; State; Zip Code 550 S Avondale St  Amarillo, TX 79106	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Amy Juba, CFRE Nonprofit Consulting

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 20/39 Rpt: 23/77

**2** FILER NAME  
Herrick, Jason

**3** Filer ID

**4** Date  
02/26/2025

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kaddatz, Lulu

**7** Amount of Contribution (\$)  
\$1,000.00

**6** Contributor address; City; State; Zip Code  
2403 Crockett St  
Amarillo, TX 79109

**8** Principal occupation / Job title (See Instructions)  
Household Management

**9** Employer (See Instructions)  
Self

Date  
03/03/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kalka, Melissa

Amount of Contribution (\$)  
\$200.00

Contributor address; City; State; Zip Code  
2622 Curtis Dr  
Amarillo, TX 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/28/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kelley, Taylor

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code  
3200 S Travis St  
Amarillo, TX 79109

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Sprouse, Shrader, Smith, PLLC

Date  
03/01/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kitsman, Charles

Amount of Contribution (\$)  
\$100.00

Contributor address; City; State; Zip Code  
7409 Lynnlee Pl  
Amarillo, TX 79121

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/12/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kritser, John

Amount of Contribution (\$)  
\$10,000.00

Contributor address; City; State; Zip Code  
2609 S Lipscomb  
Amarillo, TX 79109

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
John Deere Yellow House

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/39 Rpt: 24/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 02/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krusa, Brad <hr/> <b>6</b> Contributor address; City; State; Zip Code 5703 Crabtree  Amarillo, TX 79119	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krusa, Corey <hr/> Contributor address; City; State; Zip Code 5702 Wesley Rd.  Amarillo, TX 79119	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Amarillo National Bank
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ladd-Stribling, Christian <hr/> Contributor address; City; State; Zip Code 3003 S Hughes St.  Amarillo, TX 79109	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Interior Decorator		Employer (See Instructions) Self
Date 03/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landess, Claudette <hr/> Contributor address; City; State; Zip Code 9 Teal Court  Amarillo, TX 79106	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lasley, Kris <hr/> Contributor address; City; State; Zip Code 7908 Georgetown Dr.  Amarillo, TX 79119	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/39 Rpt: 25/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 02/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leggett, Brennan (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 7409 Fargo  Amarillo, TX 79119	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 03/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovelady, Patrick <hr/> <b>Contributor address; City; State; Zip Code</b> 3220 Crockett St  Amarillo, TX 79109	<b>Amount of Contribution (\$)</b>  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 02/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovelady, Samuel <hr/> <b>Contributor address; City; State; Zip Code</b> 2817 Crockett St  Amarillo, TX 79109	<b>Amount of Contribution (\$)</b>  \$300.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Lovelady CPA PLLC
<b>Date</b> 03/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Jason <hr/> <b>Contributor address; City; State; Zip Code</b> 7504 New England Pkwy  Amarillo, TX 79119	<b>Amount of Contribution (\$)</b>  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Manning Land LLC
<b>Date</b> 02/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Mansfield, Rob <hr/> <b>Contributor address; City; State; Zip Code</b> 2415 S Hayden St  Amarillo, TX 79109	<b>Amount of Contribution (\$)</b>  \$250.00
Principal occupation / Job title (See Instructions) Sr. Vice President Commercial Lending		Employer (See Instructions) Amarillo National Bank

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/39 Rpt: 26/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 02/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Tiffany <hr/> <b>6</b> Contributor address; City; State; Zip Code 1021 SW 33rd  Amarillo, TX 79109	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Self		<b>9</b> Employer (See Instructions) Self
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matos, Jorge (Mr.) <hr/> Contributor address; City; State; Zip Code 1113 Waggoner Ranch Rd.  Amarillo, TX 79124	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Regional Sales Manager		Employer (See Instructions) Papiilon Agricultural Company
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Tod <hr/> Contributor address; City; State; Zip Code 4314 Charles St  Amarillo, TX 79106	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClain, Mindi <hr/> Contributor address; City; State; Zip Code 2111 S Ong St  Amarillo, TX 79109	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClung, Rachael <hr/> Contributor address; City; State; Zip Code 1310 Parr St  Amarillo, TX 79106	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/39 Rpt: 27/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCown, Scott <hr/> <b>6</b> Contributor address; City; State; Zip Code 7906 Valcour Dr  Amarillo, TX 79119	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) BSA Hospital
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLemore, Erin <hr/> Contributor address; City; State; Zip Code 3718 Farwell Dr.  Amarillo, TX 79109	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miner, Barbara <hr/> Contributor address; City; State; Zip Code 2422 S Hughes St  Amarillo, TX 79109	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Kathleen <hr/> Contributor address; City; State; Zip Code 6308 Calumet  Amarillo, TX 79106	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Shawn <hr/> Contributor address; City; State; Zip Code 2607 Bowie St  Amarillo, TX 79109	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Budweiser Distribution

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 25/39 Rpt: 28/77

2 FILER NAME  
Herrick, Jason

3 Filer ID

4 Date  
03/12/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Morrison, Sherry

7 Amount of Contribution (\$)  
\$500.00

6 Contributor address; City; State; Zip Code  
2609 S Hughes  
Amarillo, TX 79109

8 Principal occupation / Job title (See Instructions)  
President

9 Employer (See Instructions)  
Budweiser Distribution

Date  
03/19/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Nichols, Ed

Amount of Contribution (\$)  
\$200.00

Contributor address; City; State; Zip Code  
8 Stoneridge Ct  
Amarillo, TX 79119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/19/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Nugent, Sylvia

Amount of Contribution (\$)  
\$2,500.00

Contributor address; City; State; Zip Code  
11508 Royalshire Dr  
Dallas, TX 79230

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Self

Date  
03/11/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Oeschger, Sharon

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
22 Edgewater Dr  
Amarillo, TX 79106

Principal occupation / Job title (See Instructions)  
Executive

Employer (See Instructions)  
Cryogenic Research & Development

Date  
02/11/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Pearson, Bob

Amount of Contribution (\$)  
\$250.00

Contributor address; City; State; Zip Code  
P O Box 598  
Spearman, TX 79018

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/39 Rpt: 29/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Bob <hr/> <b>6</b> Contributor address; City; State; Zip Code PO Box 598  Spearman, TX 79081	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Self
<b>Date</b> 03/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Patricia <hr/> <b>Contributor address; City; State; Zip Code</b> 5 Edgewater Drive  Amarillo, TX 79106	<b>Amount of Contribution (\$)</b>  \$200.00
<b>Principal occupation / Job title (See Instructions)</b> Banker		<b>Employer (See Instructions)</b> Amarillo National Bank
<b>Date</b> 02/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Wade (Mr.) <hr/> <b>Contributor address; City; State; Zip Code</b> 12 Willow Bridge Dr  Amarillo, TX 79109	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Banker		<b>Employer (See Instructions)</b> Amarillo National Bank
<b>Date</b> 02/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Donald (Mr.) <hr/> <b>Contributor address; City; State; Zip Code</b> PO Box 468  Amarillo, TX 79105	<b>Amount of Contribution (\$)</b>  \$5,000.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Self
<b>Date</b> 03/03/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Monte <hr/> <b>Contributor address; City; State; Zip Code</b> 8205 Patriot Dr.  Amarillo, TX 79119	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> President		<b>Employer (See Instructions)</b> Amarillo Natural Gas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/39 Rpt: 30/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proffer, Liana <hr/> <b>6</b> Contributor address; City; State; Zip Code 12 Cloister Pkwy  Amarillo, TX 79121	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purser, Gary <hr/> Contributor address; City; State; Zip Code 7709 New England Pkwy  Amarillo, TX 79119	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Southwest General
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purser, Wes <hr/> Contributor address; City; State; Zip Code 4 Cloister Pkwy  Amarillo, TX 79121	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Southwest General Contractors
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Corey <hr/> Contributor address; City; State; Zip Code 7906 Continental Pkwy  Amarillo, TX 79119	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Loan Officer		Employer (See Instructions) Amarillo National Bank
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Carol Anne <hr/> Contributor address; City; State; Zip Code 3920 Linda Drive  Amarillo, TX 79109	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/39 Rpt: 31/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riney, Thomas <hr/> <b>6</b> Contributor address; City; State; Zip Code 6900 Calumet Rd  Amarillo, TX 79106	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Riney and Mayfield LLP
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rittenberry, Jayme <hr/> Contributor address; City; State; Zip Code 2610 S Hughes St  Amarillo, TX 79109	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Poole Chemical Company
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jane <hr/> Contributor address; City; State; Zip Code 11 Snead Lane  Amarillo, TX 79124	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockrose Development <hr/> Contributor address; City; State; Zip Code P O Box 7768  Amarillo, TX 79104	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Tom <hr/> Contributor address; City; State; Zip Code 4808 Aberdeen Pkwy  Amarillo, TX 79119	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Rose Group

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/39 Rpt: 32/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> Date 03/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rufenacht, Cindy <hr/> <b>6</b> Contributor address; City; State; Zip Code 7305 Lynnlee Cir  Amarillo, TX 79121	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
<b>Date</b> 03/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sadler, Lenny <hr/> <b>Contributor address; City; State; Zip Code</b> 1403 Herring Ranch Rd  Amarillo, TX 79124	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> CEO		<b>Employer (See Instructions)</b> Ditch Witch Undercon
<b>Date</b> 02/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Richard <hr/> <b>Contributor address; City; State; Zip Code</b> PO Box 2239  Allen, TX 75013	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Businessman		<b>Employer (See Instructions)</b> Self
<b>Date</b> 03/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauer, Eddy <hr/> <b>Contributor address; City; State; Zip Code</b> 1601 S Milam  Amarillo, TX 79102	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Dentist		<b>Employer (See Instructions)</b> Shemen Dental Group
<b>Date</b> 02/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaefer, David <hr/> <b>Contributor address; City; State; Zip Code</b> 1600 W Bedford St  Dimmitt, TX 79027	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> CPA		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/39 Rpt: 33/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaeffer, Stanley	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code 8417 English Bay Pkwy  Amarillo, TX 79119	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shawgo, Mary Kaye	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3239 S Milam St  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Joe Bill	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1605 Bowie  Amarillo, TX 79102	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sidwell, Trey	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 3003 S Ong  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) Landman		Employer (See Instructions) Basin Royalty Company
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Gary	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 5107 Olsen Cir  Amarillo, TX 79106	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/39 Rpt: 34/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slaughter, Timothy 6 Contributor address; City; State; Zip Code 1230 Chippewa Drive Richardson, TX 75080	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sluder, Josh Contributor address; City; State; Zip Code 7600 New England Pkwy Amarillo, TX 79119	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Allen C. Contributor address; City; State; Zip Code 3602 Washington Amarillo, TX 79110	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Oil and Gas, Cattle and Real Estate		Employer (See Instructions) Self
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Aubrey Contributor address; City; State; Zip Code 8005 Valcour Dr Amarillo, TX 79119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Orthopedic Surgeon		Employer (See Instructions) Self
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Caroline Contributor address; City; State; Zip Code 3009 S Ong St Amarillo, TX 79109	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/39 Rpt: 35/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Earl	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code 3202 S Ong St  Amarillo, TX 79109	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Steve	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 7303 Springwood Dr  Amarillo, TX 79119	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Family Medicine Centers
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snead, Will	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 2323 Juniper  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparkman, John	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 7511 New England Pkwy  Amarillo, TX 79119	
Principal occupation / Job title (See Instructions) Orthodontist		Employer (See Instructions) Self
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparkman, Kyle	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 7901 Continental Pkwy  Amarillo, TX 79119	
Principal occupation / Job title (See Instructions) Orthodontist		Employer (See Instructions) Sparkman Orthodontics

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/39 Rpt: 36/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavenhagan, Debi 6 Contributor address; City; State; Zip Code 6603 Bent Oak Amarillo, TX 79124	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Street, Ryan Contributor address; City; State; Zip Code 5010 Williamsburg Place Amarillo, TX 79119	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stroud, Kristin Contributor address; City; State; Zip Code 3002 S Ong St` Amarillo, TX 79109	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) RCI Sports Management Solutions
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, David Contributor address; City; State; Zip Code 3 Pebble Beach Ct. Amarillo, TX 79124	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) M&A Advisory Services		Employer (See Instructions) TITL Capital Partners LLC
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Matthew Contributor address; City; State; Zip Code 16821 Roseline Dr. Austin, TX 78738	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/39 Rpt: 37/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trafton, Steve	7 Amount of Contribution (\$) \$6,500.00
6 Contributor address; City; State; Zip Code 3205 Parker St  Amarillo, TX 79109		
8 Principal occupation / Job title (See Instructions) Consulting		9 Employer (See Instructions) Self
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treadway, Robbyn	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 20 Merion Pl  Amarillo, TX 79124		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Elizabeth Marsh Davidson	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 4402 Jesse Jenkins Pkwy  Amarillo, TX 79124		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanBeckum, Lauren Quill	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 8904 Witmer Ct  Amarillo, TX 79119		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veggeberg, Lisa	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 7219 Versailles  Amarillo, TX 79121		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/39 Rpt: 38/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, David	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 1515 Lamar St  Amarillo, TX 79102	
8 Principal occupation / Job title (See Instructions) Geophysicist		9 Employer (See Instructions) P. David Walker, Inc.
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Patsy	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 5 Teal Court  Amarillo, TX 79106	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Whitt	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 7706 Garden Oaks  Amarillo, TX 79119	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Benjamin	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 4 Greenwood Ln  Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) Ranching/Banking		Employer (See Instructions) Self
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weir, David	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 14 Edgewater Dr.  Amarillo, TX 79106	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/39 Rpt: 39/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weir, Patrick 6 Contributor address; City; State; Zip Code 905 S Fillmore St Amarillo, TX 79101	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Patrick S. Weir P.C.
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheat, Travis Contributor address; City; State; Zip Code 2815 S Lipscomb St Amarillo, TX 79109	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Oil and Gas Operator		Employer (See Instructions) Trigo Oil and Gas, LLC
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehead, Todd (Dr.) Contributor address; City; State; Zip Code 3103 Sweetgum Ln Amarillo, TX 79124	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Self
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkie, Eric Contributor address; City; State; Zip Code 6020 Belpree Rd Amarillo, TX 79106	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Pendergrass and Wilkie Dentistry
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkie, Jerry Contributor address; City; State; Zip Code 7910 London Ct Amarillo, TX 79119	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 37/39 Rpt: 40/77

2 FILER NAME

Herrick, Jason

3 Filer ID

4 Date  
03/05/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wilkinson Mortgage Capital

7 Amount of Contribution (\$) \$200.00

6 Contributor address; City; State; Zip Code  
PO Box 9222  
  
Amarillo, TX 79105

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
03/06/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wilkinson, Trey

Amount of Contribution (\$) \$250.00

Contributor address; City; State; Zip Code  
8004 Monticello Ct  
  
Amarillo, TX 79121

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/13/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Williams, Robert

Amount of Contribution (\$) \$1,000.00

Contributor address; City; State; Zip Code  
4604 Ashville Place  
  
Amarillo, TX 79119

Principal occupation / Job title (See Instructions)  
Health Care Admin

Employer (See Instructions)  
FMC Services

Date  
03/11/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Willis, Suzanne

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code  
1602 S Fordham St  
  
Perryton, TX 79070

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/06/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Woodburn, Doug

Amount of Contribution (\$) \$1,000.00

Contributor address; City; State; Zip Code  
500 S Taylor LB 264  
  
Amarillo, TX 79101

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/39 Rpt: 41/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Steve	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code 3201 Travis Amarillo, TX 79109	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) ASCO
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Weston	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 320 S Taylor Amarillo, TX 79101	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wright Law TX PLLC
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Weston	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 320 S Taylor Amarillo, TX 79101	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wright Law TX PLLC
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zambrano, Alfonso	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 14 Valhalla Lane Amarillo, TX 79124	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Brown & Fortunato P.C.
Date 02/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zenor, Becky	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2210 S Bonham Amarillo, TX 79109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/39 Rpt: 42/77
2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 02/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Eric	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 1815 SW 28th Ave  Amarillo, TX 79109		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 43/77	
2 FILER NAME Herrick, Jason		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/12/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Growing Amarillo Jobs PAC 7 Contributor address; City; State; Zip Code 959 W. Glade Rd. Hurst, TX 76054	8 Amount of contribution (\$) \$14,437.00	9 In-kind contribution description Direct Mail Advertisement in Support of Jason Herrick for Mayor Campaign <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Growing Amarillo Jobs PAC Contributor address; City; State; Zip Code 959 W. Glade Rd. Hurst, TX 76054	Amount of contribution (\$) \$14,437.00	In-kind contribution description Direct Mail Advertisement in Support of Jason Herrick for Mayor Campaign <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Growing Amarillo Jobs PAC Contributor address; City; State; Zip Code 959 W. Glade Rd. Hurst, TX 76054	Amount of contribution (\$) \$14,604.98	In-kind contribution description Billboard Advertisement in Support of Jason Herrick for Mayor Campaign <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**LOANS****SCHEDULE E**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 44/77
<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 02/07/2025	<b>7</b> Name of lender Herrick, Jason <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$) \$10,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 7901 Valcour  Amarillo, TX 79119	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) President		<b>13</b> Employer (See Instructions) Pantera Energy Company
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/29 Rpt: 45/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 03/11/2025	<b>5</b> Payee name ABC Blueprints	
<b>6</b> Amount (\$) \$37.89	<b>7</b> Payee address; City; State; Zip Code 906 S Tyler St  Amarillo, TX 79101	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of City Map w/ Precinct Information for use in Campaign Office
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Amarillo National Bank	Office sought Office held
Amount (\$) \$8.00	Payee address; City; State; Zip Code PO Box 1  Amarillo, TX 79105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Banking Service Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2025	Candidate/Officeholder name Amarillo Screen Graphics	Office sought Office held
Amount (\$) \$175.15	Payee address; City; State; Zip Code 2715 Civic Circle  Amarillo, TX 79109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Campaign T-Shirts to use at Events
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/29 Rpt: 46/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 02/28/2025		5 Payee name Amazon			
6 Amount (\$) \$20.23		7 Payee address; City; State; Zip Code 440 Terry Ave. N  Seattle, WA 98109			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tablecloths for use at Campaign Events	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/08/2025		Payee name Anedot			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee for Online Contributions	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/07/2025		Payee name Anedot			
Amount (\$) \$43.20		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/29 Rpt: 47/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 02/08/2025	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$470.10	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/09/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$10.30	Payee name Anedot Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$22.60	Payee name Anedot Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/29 Rpt: 48/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 02/11/2025		<b>5</b> Payee name Anedot			
<b>6</b> Amount (\$) \$70.90		<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
<b>8</b> PURPOSE OF EXPENDITURE 1		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/12/2025		Payee name Anedot			
Amount (\$) \$59.20		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/13/2025		Payee name Anedot			
Amount (\$) \$30.90		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/29 Rpt: 49/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 02/14/2025	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$40.30	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/15/2025	Candidate/Officeholder name	Office sought      Office held
Amount (\$) \$8.30	Payee name Anedot	
	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/17/2025	Candidate/Officeholder name	Office sought      Office held
Amount (\$) \$10.30	Payee name Anedot	
	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name      Office sought      Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/29 Rpt: 50/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 02/20/2025		<b>5</b> Payee name Anedot			
<b>6</b> Amount (\$) \$40.30		<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/21/2025		Payee name Anedot			
Amount (\$) \$10.30		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/22/2025		Payee name Anedot			
Amount (\$) \$14.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/29 Rpt: 51/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 02/23/2025		5 Payee name Anedot			
6 Amount (\$) \$12.30		7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/25/2025		Payee name Anedot			
Amount (\$) \$160.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/26/2025		Payee name Anedot			
Amount (\$) \$246.70		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/29 Rpt: 52/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 02/27/2025		<b>5</b> Payee name Anedot			
<b>6</b> Amount (\$) \$73.20		<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/28/2025		Payee name Anedot			
Amount (\$) \$80.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/01/2025		Payee name Anedot			
Amount (\$) \$84.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/29 Rpt: 53/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 03/02/2025		<b>5</b> Payee name Anedot			
<b>6</b> Amount (\$) \$191.50		<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/03/2025		Payee name Anedot			
Amount (\$) \$301.20		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/04/2025		Payee name Anedot			
Amount (\$) \$242.10		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/29 Rpt: 54/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 03/05/2025	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$98.10	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/06/2025	Candidate/Officeholder name Payee name Anedot	Office sought Office held
Amount (\$) \$239.50	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/07/2025	Candidate/Officeholder name Payee name Anedot	Office sought Office held
Amount (\$) \$20.30	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/29 Rpt: 55/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 03/08/2025		5 Payee name Anedot			
6 Amount (\$) \$4.30		7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/09/2025		Payee name Anedot			
Amount (\$) \$60.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/10/2025		Payee name Anedot			
Amount (\$) \$150.40		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/29 Rpt: 56/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 03/11/2025		<b>5</b> Payee name Anedot			
<b>6</b> Amount (\$) \$69.50		<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/12/2025		Payee name Anedot			
Amount (\$) \$71.20		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/13/2025		Payee name Anedot			
Amount (\$) \$34.90		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/29 Rpt: 57/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 03/14/2025		<b>5</b> Payee name Anedot			
<b>6</b> Amount (\$) \$4.30		<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/15/2025		Payee name Anedot			
Amount (\$) \$10.30		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/17/2025		Payee name Anedot			
Amount (\$) \$4.30		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/29 Rpt: 58/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 03/18/2025		<b>5</b> Payee name Anedot			
<b>6</b> Amount (\$) \$5.80		<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH.		Candidate/Officeholder name		Office sought	
Date 03/19/2025		Payee name Anedot			
Amount (\$) \$40.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH.		Candidate/Officeholder name		Office sought	
Date 03/20/2025		Payee name Anedot			
Amount (\$) \$10.30		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH.		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/29 Rpt: 59/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 03/21/2025		5 Payee name Anedot			
6 Amount (\$) \$1.30		7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/22/2025		Payee name Anedot			
Amount (\$) \$20.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/23/2025		Payee name Anedot			
Amount (\$) \$41.60		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/29 Rpt: 60/77		2 FILER NAME Herrick, Jason		3 Filer ID
4 Date 03/24/2025	5 Payee name Anedot			
6 Amount (\$) \$66.50	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Transaction Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 03/12/2025	Payee name Avant Garden			
Amount (\$) \$184.02	Payee address; City; State; Zip Code 2475 I-40 W Amarillo, TX 79109			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Hostess Gift for FR Event on 3.4.25	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 03/12/2025	Payee name Avant Garden			
Amount (\$) \$162.38	Payee address; City; State; Zip Code 2475 I-40 W Amarillo, TX 79109			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Hostess Gift for FR Event on 3.5.25	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/29 Rpt: 61/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 03/18/2025		5 Payee name Bar C Promotions			
6 Amount (\$) \$303.51		7 Payee address; City; State; Zip Code PO Box 20117  Amarillo, TX 79118			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Cups and Koozies for use at FR Events	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/04/2025		Payee name Black Fig Food			
Amount (\$) \$1,441.21		Payee address; City; State; Zip Code 2043 S. Lipscomb  Amarillo, TX 79109			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Catering Expense for FR Event on 3.4.25	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/19/2025		Payee name Black Fig Food			
Amount (\$) \$994.14		Payee address; City; State; Zip Code 2043 S. Lipscomb  Amarillo, TX 79109			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Catering Expense for FR Event on 3.18.25	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/29 Rpt: 62/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 02/25/2025		5 Payee name C&B Marketing			
6 Amount (\$) \$1,304.41		7 Payee address; City; State; Zip Code 2400 W 6th St  Amarillo, TX 79106			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Yard Signs for use in Campaign	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/03/2025		Payee name C&B Marketing			
Amount (\$) \$97.43		Payee address; City; State; Zip Code 2400 W 6th St  Amarillo, TX 79106			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design of Digital Letterhead Template for use in Campaign Office	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/06/2025		Payee name C&B Marketing			
Amount (\$) \$1,743.91		Payee address; City; State; Zip Code 2400 W 6th St  Amarillo, TX 79106			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Banners for Campaign and Disclaimer Stickers for Yard Signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/29 Rpt: 63/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 02/07/2025	<b>5</b> Payee name City of Amarillo	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 601 S. Buchanan St.  Amarillo, TX 79101	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee for Application for a Place on the Ballot for General Election
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/18/2025	Payee name Golden Media Relations	
Amount (\$) \$7,000.00	Payee address; City; State; Zip Code 3203 S. Ong  Amarillo, TX 79109	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Commercial/Advertisement Creation for use in Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/24/2025	Payee name Herrick, Jason	
Amount (\$) \$3,682.44	Payee address; City; State; Zip Code 7901 Valcour  Amarillo, TX 79119	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Political Expenditure Made from Personal Funds on 3.5.25
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/29 Rpt: 64/77		<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID	
<b>4</b> Date 03/24/2025		<b>5</b> Payee name Herrick, Jason			
<b>6</b> Amount (\$) \$19.00		<b>7</b> Payee address; City; State; Zip Code 7901 Valcour  Amarillo, TX 79119			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Political Expenditure Made from Personal Funds on 3.5.25	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/24/2025		Payee name Herrick, Jason			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 7901 Valcour  Amarillo, TX 79119			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Political Expenditure Made from Personal Funds on 3.5.25	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/24/2025		Payee name Herrick, Jason			
Amount (\$) \$96.00		Payee address; City; State; Zip Code 7901 Valcour  Amarillo, TX 79119			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Political Expenditure Made from Personal Funds on 1.21.25	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/29 Rpt: 65/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 02/11/2025	<b>5</b> Payee name Imprint	
<b>6</b> Amount (\$) \$117.27	<b>7</b> Payee address; City; State; Zip Code 14550 Beechnut St.  Houston, TX 77083	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Custom Buttons for use in Campaign
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/04/2025	Payee name Imprint	
Amount (\$) \$90.90	Payee address; City; State; Zip Code 14550 Beechnut St.  Houston, TX 77083	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Additional Printing of Custom Buttons for use in Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 02/11/2025	Payee name KC Strategies LLC	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 3571 Far West Blvd  Austin, TX 78731	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Campaign Consulting Fee - February
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/29 Rpt: 66/77	2 FILER NAME Herrick, Jason	3 Filer ID
4 Date 03/01/2025	5 Payee name KC Strategies LLC	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd  Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Campaign Consulting Fee - March
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2025	Payee name KC Strategies LLC	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code ,3571 Far West Blvd  Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of TV Ad Placement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2025	Payee name KC Strategies LLC	
Amount (\$) \$15,001.00	Payee address; City; State; Zip Code 3571 Far West Blvd  Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of TV Ad Placement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/29 Rpt: 67/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 03/12/2025	<b>5</b> Payee name KC Strategies LLC	
<b>6</b> Amount (\$) \$15,240.00	<b>7</b> Payee address; City; State; Zip Code 3571 Far West Blvd  Austin, TX 78731	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of TV Ad Placement
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2025	Candidate/Officeholder name Payee name McClung, Rachael	
Amount (\$) \$2,500.00	Office sought Payee address; City; State; Zip Code 1310 Parr St  Amarillo, TX 79106	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting - February
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/04/2025	Candidate/Officeholder name Payee name McClung, Rachael	
Amount (\$) \$2,500.00	Office sought Payee address; City; State; Zip Code 1310 Parr St  Amarillo, TX 79106	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting - March
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/29 Rpt: 68/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 03/04/2025		5 Payee name Mitchell, Jessica			
6 Amount (\$) \$5,000.00		7 Payee address; City; State; Zip Code 34 Oldham Circle  Amarillo, TX 79109			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting for February and March	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/04/2025		Payee name PPS			
Amount (\$) \$142.62		Payee address; City; State; Zip Code 920 SW 9th Ave.  Amarillo, TX 79101			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Banner for Announcement Event 48x96 Full Color Vinyl	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/12/2025		Payee name Parties Plus			
Amount (\$) \$1,018.13		Payee address; City; State; Zip Code 708 S. Taylor  Amarillo, TX 79101			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bar Service for FR Events on 3.4.25 and 3.5.25	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/29 Rpt: 69/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 02/05/2025	<b>5</b> Payee name Parties and Events	
<b>6</b> Amount (\$) \$162.38	<b>7</b> Payee address; City; State; Zip Code 7018 S. Taylor  Amarillo, TX 79101	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Podium, Bluetooth Speaker & Mic for Announcement Event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/13/2025	Payee name Promotions of Amarillo	
Amount (\$) \$389.70	Payee address; City; State; Zip Code 1407 SW 10th Suite B  Amarillo, TX 79101	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Welcome Pardner Advertisement Insert
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/05/2025	Payee name Rumble Up	
Amount (\$) \$19.00	Payee address; City; State; Zip Code 2001 K St. NW  Washington, DC 20006	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Subscription for Text Messaging Service for use in Campaign Office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/29 Rpt: 70/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 02/25/2025		5 Payee name Sir Speedy Marketing			
6 Amount (\$) \$591.32		7 Payee address; City; State; Zip Code 416 SW 8th St.  Amarillo, TX 79101			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Campaign Yard Signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/12/2025		Payee name Supa Sign Pros			
Amount (\$) \$592.50		Payee address; City; State; Zip Code 2900 Tee Anchor Blvd  Amarillo, TX 79101			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Yard Signs with Stakes	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/26/2025		Payee name Swiftly Communigraphics			
Amount (\$) \$780.03		Payee address; City; State; Zip Code 6163 Cliffside Rd.  Amarillo, TX 79124			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing and Postage for Fundraiser held on 3/4	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/29 Rpt: 71/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 02/26/2025	<b>5</b> Payee name Swifty Communigraphics	
<b>6</b> Amount (\$) \$509.35	<b>7</b> Payee address; City; State; Zip Code 6163 Cliffside Rd.  Amarillo, TX 79124	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing and Postage for Fundraiser held on 3/5
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/10/2025	Payee name Swifty Communigraphics	
Amount (\$) \$326.58	Payee address; City; State; Zip Code 6163 Cliffside Rd.  Amarillo, TX 79124	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing and Postage for Fundraiser held on 3/18
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 02/20/2025	Payee name Tractor Supply	
Amount (\$) \$19.43	Payee address; City; State; Zip Code 6080 Plum Creek Dr  Amarillo, TX 79124	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Supplies for Large Campaign Signage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/29 Rpt: 72/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 03/23/2025	<b>5</b> Payee name Tractor Supply	
<b>6</b> Amount (\$) \$137.75	<b>7</b> Payee address; City; State; Zip Code 6080 Plum Creek Dr  Amarillo, TX 79124	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Supplies for Large Campaign Signage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/06/2025	Payee name Two Knives Catering	
Amount (\$) \$1,457.76	Payee address; City; State; Zip Code 5500 Bluebird Suite 400 Amarillo, TX 79109	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catering/Food Expense for FR Event on 3.5.25
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/04/2025	Payee name USPS - Downtown	
Amount (\$) \$58.40	Payee address; City; State; Zip Code 505 E 9th Ave  Amarillo, TX 79105	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for use in Campaign Office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/29 Rpt: 73/77	2 FILER NAME Herrick, Jason	3 Filer ID
4 Date 03/12/2025	5 Payee name USPS - Downtown	
6 Amount (\$) \$73.00	7 Payee address; City; State; Zip Code 505 E 9th Ave  Amarillo, TX 79105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for use in Campaign Office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2025	Payee name Welcome Pardner	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6700 Wentworth Dr.  Amarillo, TX 79109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Ad in Direct Mail and Digital Banner on Website for March and April
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 <sup>a</sup> Total pages Schedule F4: Sch: 1/2 Rpt: 74/77		2 FILER NAME Herrick, Jason		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution American Express		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 02/04/2025	(c) Date(s) Credit Card Issuer Paid 03/05/2025	
7 PAYEE	(a) Payee name Rumble Up		(b) Payee address; City, State, Zip Code 2001 K St. NW Washington, DC 20006	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Initial Balance Charge for Group Text Messaging System	
	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
PAYMENT	(a) Amount Charged \$19.00	(b) Date of Charge 02/04/2025	(c) Date(s) Credit Card Issuer Paid 03/05/2025	
PAYEE	(a) Payee name Rumble Up		(b) Payee address; City, State, Zip Code 2001 K St. NW Washington, DC 20006	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Initial Monthly Charge for Group Text Messaging System	
	(c) <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 Office sought Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code	
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(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.			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 2/2 Rpt: 75/77	<b>2</b> FILER NAME Herrick, Jason		<b>3</b> Filer ID
<b>4</b> CREDIT CARD ISSUER	Name of financial institution Bank of America Visa		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$3,682.44	(b) Date of Charge 02/07/2025	(c) Date(s) Credit Card Issuer Paid 03/05/2025
<b>7</b> PAYEE	(a) Payee name UZ Marketing		(b) Payee address; City, State, Zip Code 5900 Bingle Road Houston, TX 77092
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Printing of Large Yard Signs and Vehicle Magnets for use in Campaign
	(c) <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		

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## 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 G: Sch: 1/2 Rpt: 76/77		2 FILER NAME Herrick, Jason		3 Filer ID	
4 Date 03/05/2025		5 Payee name American Express			
6 Amount (\$) \$19.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO Box 6031  Carol Stream, IL 60197			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Credit Card Payment		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Pmnt for Rumble Up Expense on 2.4.25 for Initial Monthly Charge for Group Text Messaging System	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/05/2025		Payee name American Express			
Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 6031  Carol Stream, IL 60197			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Pmnt for Rumble Up Expense on 2.4.25 for Initial Monthly Charge for Group Text Messaging System	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/05/2025		Payee name Bank of America Visa			
Amount (\$) \$3,682.44 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 851001  Dallas, TX 75285			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Pmnt for UZ Marketing Expense on 2.7.25 for Large Yard Signs and Car Magnets	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## 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.

<b>1</b> Total pages Schedule G: Sch: 2/2 Rpt: 77/77	<b>2</b> FILER NAME Herrick, Jason	<b>3</b> Filer ID
<b>4</b> Date 01/21/2025	<b>5</b> Payee name USPS - Downtown	
<b>6</b> Amount (\$) \$96.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 505 E 9th Ave  Amarillo, TX 79105	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of PO Box for Campaign
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held