SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT**

The SPAC Instruction G	uide explains how to complete	e this form.	1 Filer ID (Ethics Co	ommission Filers)	2 Total pages filed:
3 COMMITTEE NAME					
Smart Growth Init	iative SPAC				OFFICE USE ONLY
					Date Received
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / S	SUITE #; CI	TY; STATE;	ZIP CODE	April 4, 2024
Change of Address	21208 Timber Bluff	fLn. P	orter TX	77365	• • • • • • • • • • • • • • • • • • • •
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI	Date Hand-delivered or Date Postmarked
NAME	Mrs	Cheryl		G	Receipt # Amount \$
	NICKNAME	LAST	*********	SUFFIX	Date Processed
		Willingham			Date Imaged
6 CAMPAIGN	STREET ADDRESS (NO PO BOX I	Willingham	TE # DITY		
TREASURER	}		TE#; CITY;	STATE;	ZIP CODE
STREETADDRESS (Residence or Business)	21208 Timber Bluff	f Ln.	Porter	· TX	77365
7 CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUIT	E#; CITY;	STATE;	
TREASURER MAILING ADDRESS	21208 Timber Bluff L		Porter	•	77365
Change of Address					.,,
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE (713) 858-4053	NUMBER	EXTENSIO	N	
9 REPORTTYPE	January 15	X 30	th day before election		
	July 16	8u	n day before election		Exceeded Modified Reporting Limit Dissolution Report (Atlached PAC-FR) 10th day after campaign treasurer termination
10 PERIOD COVERED	Month Day	Year			Month Day Year
	01 / 01 /	2024	THROUGH		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	0.70.7	2027			03 / 25 / 2024
11 ELECTION	ELECTION DATE		ELI	ECTION TYPE	
	Month Day Year	Primary	- Runoff	X Oth	ier
	05 / 04 / 2024	General	Special	De	scription May Uniform
		GO TO PA	NGE 2		
orme provided by Toyon Eth					

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

					OILLIFUZ
12 COMMITTEE NAM Smart Growth		ive SPAC		13 Filer	ID (Ethics Commission Filers)
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if		X CANDIDATE	CANDIDATE/OFFICEHOLDER NAME Brenda Webb		
necessary.)		X OFFICEHOLDER	OFFICE SOUGHT (candidate)/OFFICE HELD (office East Montgomery County Impr Director, Position #1	holder) (OVEME)	nt District
(Candidate or Measu OPPOSE (Candidate or Measu ASSIST (Officeholder)		MEASURE	BALLOT IDENTIFICATION / # Mont	ELECTION In Day	DATE Year
15 CONTRIBUTION TOTALS	1.	PLEDGES, LOANS, OF	POLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR DE ELECTRONICALLY)	\$	0.00
	2,	TOTAL POLITICAL O (OTHER THAN PLEDG	CONTRIBUTIONS ES, LOANS, OR GUARANTEES OF LOANS)	\$	13,064.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED P	POLITICAL EXPENDITURES	\$	0.00
•••••	4.	TOTAL POLITICAL E		\$	7,983.17
CONTRIBUTION BALANCE	5. 6.	OF THE REPORTING P		\$	10,084.83
OUTSTANDING LOAN TOTALS	0.	LAST DAY OF THE REI	OUNT OF ALL OUTSTANDING LOANS AS OF T PORTING PERIOD	HE \$	0.00
i	nclude	s all information requir	alty of perjury, that the accompanying red to be reported by me under Title 15,	Election (Code.
(1) Affidavit AFFIX NOTARY STAMP /:	SEALAB	OVE			
Sworn to and subscrib			Cheryl G. Willingham	, th	is the
(2) Unsworn Declaration My name is		goath Printed na	one of officer administering oath OR and my date of birth is	Title of a	officer administering oath
My address is 3130	8 nery	Timber Silv (street) County, State of Te	City), City), (city), (city), (city), (month). Signature of Campa	(state) , 20 , 20 aign Treasc	(Zip code)(country) 34 (year) Unglown Juer (Declarant)

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

40.0014141====1				JOILE FG 2
12 COMMITTEE NAM		tion ODAO		13 Filer ID (Ethics Commission Filers)
Smart Growtl	1 Britti	ATIVE SPAC		
PURPOSE (Attach lists on plain pap	er to	X CANDIDATE	CANDIDATE/OFFICEHOLDER NAME Fred Wetz	
complete this report if necessary.)		X OFFICEHOLDER	officesought (candidate)/OfficeHeld (of East Montgomery County Improved Director, Position #2	fliceholder) rovement District
SUPPORT (Candidate or Measu	re)		BALLOT IDENTIFICATION/#	ELECTION DATE
OPPOSE (Candidate or Measu				Onth Day Year
ASSIST (Officeholder)	,	MEASURE	DESCRIPTION	/ /
15 CONTRIBUTION TOTALS	1.	PLEUGES, LOANS, O	POLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR DE ELECTRONICALLY)	\$
	2.	TOTAL POLITICAL (OTHER THAN PLEDG	CONTRIBUTIONS SES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3.	· · · · · · · · · · · · · · · · · · ·	POLITICAL EXPENDITURES	\$
	4.	TOTAL POLITICAL E	EXPENDITURES	3
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CO OF THE REPORTING I	NTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY \$
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AM LAST DAY OF THE RE	OUNT OF ALL OUTSTANDING LOANS AS O PORTING PERIOD	THE \$
16 SIGNATURE i	swear nclude	r, or affirm, under pen s all information requi	nalty of perjury, that the accompanying red to be reported by me under Title 1	g report is true and correct and 5, Election Code.
			Signature of Campaig	n Treasurer (Declarant)
		Please co	omplete either option below:	
(1) Affidavit				
AFFIX NOTARY STAMP	SEALAB	OVE		
Sworn to and subscrib	ed befo	ore me, by the said		, this the
day of	_, 20_	, to certify whi	ch, witness my hand and seal of office	
Signature of officer admi	nistering	oath Printed n	ame of officer administering oath	Title of officer administering oath
(2) Unsworn Declaration	on /		OR	
My name is			and my data of high to	
My address is			, and my date of birth is	
Executed in		(street) _ County, State of	(city) (city) (city)	(state) (zip code)(country)
			(mon	oth) (year)
			Signature of Car	npaign Treasurer (Declarant)
<i>F</i>				

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS COMMITTEE NAME Smort Copyrith Initiating SPACE

12 COMMITTEE NAME Smart Growth Ini	-	SPAC		13 Filer ID (Ethics Commission Filers)	
14 COMMITTEE PURPOSE (Attach lists on plain pape	er to	X CANDIDATE	CANDIDATE/OFFICEHOLDER NAME Ronald Willingham		
complete this report if necessary.) X SUPPORT (Candidate or Measure)		X OFFICEHOLDER	OFFICE SOUGHT (candidate)/OFFICE HELD (officeholder) East Montgomery County Improvement District Director, Position #3		
			BALLOT (DENTIFICATION/#	ELECTION DATE	
OPPOSE (Candidate or Measu	re)	- AFACUSE	i Wio	nth Day Year	
ASSIST (Officeholder)		MEASURE	DESCRIPTION		
15 CONTRIBUTION TOTALS	1.	PLEDGES, LOANS, OI	POLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR DE ELECTRONICALLY)	\$	
	2.	TOTAL POLITICAL (OTHER THAN PLEDG	CONTRIBUTIONS ES, LOANS, OR GUARANTEES OF LOANS)	\$	
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED F	POLITICAL EXPENDITURES	\$	
4.		TOTAL POLITICAL EXPENDITURES		\$	
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL COI OF THE REPORTING F	DAY \$		
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AM LAST DAY OF THE RE	OUNT OF ALL OUTSTANDING LOANS AS OF PORTING PERIOD	THE \$	
16 SIGNATURE i	swea nclude	r, or affirm, under pen es all information requi	nalty of perjury, that the accompanying red to be reported by me under Title 15	report is true and correct and , Election Code.	
			Signature of Campaign	Treasurer (Declarant)	
		Please co	omplete either option below:	:	
(1) Affidavit				:	
AFFIX NOTARY STAMP /	SEALAB	OVE			
Sworn to and subscrib	ed bet	ore me, by the said		, this the	
day of	_, 20 _	, to contify whi	ch, witness my hand and seal of office.		
Signature of officer admi	nisterin	g oath Printed n	ame of officer administering oath	Title of officer administering oath	
(2) Unsworn Declarati	on 🦯				
My name is			, and my date of birth is _		
My address is		(street)	(city)	(state) (zip code)(country)	
Executed in	 	•	, on the day of(mont	.20	
			Signature of Carr	paign Treasurer (Declarant)	
/					

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

12 COMMITTEE NAMI Smart Growth In		CDAC		13 Filer ID (Ethics Commission Filers)
	llialive	STAC		
14 COMMITTEE PURPOSE (Attach lists on plain pap	er to	X CANDIDATE	Katherine Persson	
complete this report if necessary.)		X OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (office HELD (office HELD (office) HELD (office) / OFFICE HELD (office) /	iceholder) ovement District
(Candidate or Measu	re)	**** *********************************	BALLOT IDENTIFICATION/#	ELECTION DATE
OPPOSE (Candidate or Measure)		MEASURE	ļ	Month Day Year
ASSIST (Officeholder)			DESCRIPTION	
15 CONTRIBUTION TOTALS	1.	PLEDGES, LOANS, O	POLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR DE ELECTRONICALLY)	\$
	2.	TOTAL POLITICAL (OTHER THAN PLEDG	CONTRIBUTIONS ES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED F	POLITICAL EXPENDITURES	\$
4.		TOTAL POLITICAL EXPENDITURES		\$
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CO OF THE REPORTING I	NTRIBUTIONS MAINTAINED AS OF THE LAS PERIOD	ST DAY \$
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AM LAST DAY OF THE RE	OUNT OF ALL OUTSTANDING LOANS AS O PORTING PERIOD	THE \$
16 SIGNATURE	l swea	ir, or affirm, under per es all information requi	nalty of perjury, that the accompanyin ired to be reported by me under Title 1	5, Election Code.
			Signature of Campaig	gn Treasurer (Declarant)
		Please c	omplete ejther option below:	
(1) Affidavít				
AFFIX NOTARY STAMP	SEALA	BOVE		
Sworn to and subscril	bed be	fore me, by the said		, this the
day of	, 20	, to contify whi	ich, witness my hand and seal of office	э.
Signature of officer adm	inisterir	ng oath Printed n	name of officer administering oath	Title of officer administering oath
			OR.	The of officer administering dath
(2) Unsworn Declarat	ion 🖌			
My name is			, and my date of birth is	
My address is				
Executed in		(street)County, State of	(city), on theday of	(state) (zip code)(country)
			(mo	nth) (year)
			Signature of Ca	ampaign Treasurer (Declarant)

SUBTOTALS-SPAC

17	COMMITTEE NAME	18 Filer ID (Ethics Con	nmiss	ion Filers)
	Smart Growth Initiative SPAC			
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	13,064.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	N/A
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	N/A
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LA	ABOR ORGANIZATION	\$	N/A
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORF	PORATION OR LABOR	\$	N/A
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	R ORGANIZATION	\$	N/A
7.	SCHEDULE E: LOANS		\$	N/A
8.	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CON	NTRIBUTIONS	\$	7,983.17
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	N/A
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL (CONTRIBUTIONS	\$	N/A
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	N/A
12.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	N/A
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	N/A
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	NS RETURNED	\$	N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1:
owth Initiative SPAC		3 Fiter ID (Ethics Commission Filers)
John Gross		7 Amount of contribution (\$) \$1,500.00
3235 Hickory Brook Ln. Kingwood	TX 77345	
pation / Job title (See Instructions)	Employer (See Instruction	ons)
Full name of contributor	D#:)	Amount of contribution (\$) \$5,000.00
	State; Zip Code ey TX 77357	
pation / Job title (See Instructions)	Employer (See Instruction	nns)
Full name of contributor	D#:)	Amount of contribution (\$) \$345.00
Contributor address; City; 2319 Forest Garden Dr. Kingwood	State; Zip Code TX 77345	
pation / Job title (See Instructions)	Employer (See Instruction	ons)
Full name of contributor	D#:)	Amount of contribution (\$)
Contributor address; City; 2319 Forest Garden Dr. Kingwood	State; Zip Code TX 77345	4 -1-1-1-1
pation / Job title (See Instructions)	Employer (See Instruction	ons)
	owth Initiative SPAC 5 Full name of contributor	S Full name of contributor

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The	Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1:
2 FILER NAME Smart Gro	wth Initiative SPAC		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	#:	7 Amount of contribution (\$)
2/06/2024	Texas Pro Business Coalition		\$5,000.00
		State; Zip Code	
	1400 Woodlands Pkwy The Woodlands	TX 77380	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instruct	cions)
Date	Full name of contributor	#:)	Amount of contribution (\$)
310410004	Michael Kevlin		\$874.00
3/01/2024	Contributor address; City;	State; Zip Code	
	4709 Breezy Point Dr. Kingwood	TX 77345	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	#]	Amount of contribution (\$)
	Contributor address; City; §	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (IDI	<i>i</i> :	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES OF 1 If contributor is out-of-state PAC, please see Instruction	THIS SCHEDULE AS No	EEDED eporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Oficeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed gloves)

Credit Card Payment	The Instruction Guide explains how to c	complete this form,	Other (enter a cate	gory not listed above)	
1 Total pages Schedule F1:	² FILER NAME Smart Growth Initiative SPAC		3 Filer ID (Ethi	ics Commission Filers)	
4 Date 1/04/2024	5 Payee name Discover Web Solutions, LLC		·		
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
\$1,850.00	3415 Valley Gardens Dr.	Kingwood	d TX	77345	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF Advertising Expense Web DE EXPENDITURE		Web Design/	Design/Graphics		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austir	in, TX, officeholder livi	ng expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name I Brenda Webb Ronald Willingham Fred Wetz Katherine Persson	Office sought Director		Office held Director	
Date	Payee name				
1/04/2024	Roycelyn Bastian				
Amount (\$)	Payee address;	City;	State;	Zip Code	
\$525.00	17622 Greystanes Rd.	Humble	TX	77346	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Communica	ation Service	es	
	Check if travei outside of Texas. Complete Schedule T.	Check if Austir	in, TX, officeholder livi	ing expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Brenda Webb Ronald Willingham Fred Wetz Katherine Persson	Office sought Director		Office held Director	
Date	Payee name				
2/05/2024	EMC Buyers' Group				
Amount (\$)	Payee address;	City;	State;	Zip Code	
\$1,000.00	21675 McClesky Rd.	New Cane	y TX	77357	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Table/Banner/ Crawfish Boil	/Candidate /	Announcements	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder livii	ng expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Brenda Webb Ronald Willingham Fred Wetz Katherine Persson	Office sought Director		Office held Director	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	.	3 Filer ID (Ethic	s Commission Filers)	
3	Smart Growth Initiative SPAC			·	
4 Date	5 Payee name				
2/05/2024	Amazon				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
\$9.73	410 Terry Ave N	Seattle	WA	98109	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF	Advertising Expense	Supplies/Se	enior Citizen	Luncheon	
EXPENDITURE					
(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held	
expenditure to benefit C/OI	H Brenda Webb Ronald Willingham Fred Wetz Katherine Persson	Director		Director	
Date	Payee name				
2/06/2024	Amazon				
Amount (\$)	Payee address;	City;	State;	Zip Code	
\$386.88	410 Terry Ave N	Seattle	WA	98109	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE	Advertising Expense	Supplies/Senior Citizen Luncheon			
OF EXPENDITURE					
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder livin	g expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held		
expenditure to benefit C/OH	l Brenda Webb Ronald Willingham Fred Wetz Katherine Persson	Director		Director	
Date	Рауее лате				
2/07//2024	UZ Marketing				
Amount (\$)	Payee address;	City;	State;	Zip Code	
\$89.85	5900 Bingle Rd.	Houston	TX	77092	
Ψ00.00	oboo Diligio Ita.	Houston	17	77092	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Printing Expense	Business C	ards		
	Check if Iravel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder livin] expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	<u> </u>	Office held	
expenditure to benefit C/OH	Brenda Webb Ronald Willingham Fred Wetz Katherine Persson	Director		Director	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Confract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to c	complete this form.		o.g. 11211101011 020009		
1 Total pages Schedule F1: 3	² FILER NAME Smart Growth Initiative SPAC		3 Filer ID (Ethic	s Commission Filers)		
4 Date 9 3/12/2024	5 Payee name USPS	•				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code		
\$30.45	23550 Partners Way	Porter	TX	77365		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
PURPOSE OF EXPENDITURE	Fees	Postage				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder livin	g expense		
Complete ONLY if direct expenditure to benefit C/OH	Office sought Director		Office held Director			
Date	Payee name					
3/12/2024	Texas GOP Store					
Amount (\$)	Payee address;	City;	State;	Zip Code		
\$4,017.16	404 IH-45 South	Huntsvill	e TX	77488		
	Category (See Categories listed at the top of this schedule)	Description				
PURPOSE OF EXPENDITURE	Printing Expense	Campaign S	Signs			
-	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	istin, TX, officeholder living expense			
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held		
expenditure to benefit C/OH	Brenda Webb Ronald Willingham Fred Wetz Katherine Persson	Director	Director			
Date	Payee name		· · · · · · · · · · · · · · · · · · ·			
3/13/2024	Amazon					
Amount (\$)	Payee address;	City;	State;	Zip Code		
\$74.10	410 Terry Ave N	Seattle	VVA	98109		
	Category (See Calegories listed at the top of this schedule)	Description				
PURPOSE OF EXPENDITURE	Advertising Expense	Campaign Si	ign Supplies	- Cable Ties		
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin	Check if Austin, TX, officeholder living expense			
				0.00		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Brenda Webb Ronald Willingham	Office sought		Office held		