

# 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:
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR                      FIRST                      MI Mr.                      Michael                      T. <hr/> NICKNAME                      LAST                      SUFFIX Gleason	<div style="border: 2px solid blue; padding: 5px; text-align: center;"> <b>OFFICE USE ONLY</b>  <div style="border: 1px solid blue; padding: 2px; display: inline-block;">                     RECEIVED                      LM IP                      OCT -7 2024                      2:24 pm                      By _____                 </div> </div>	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX;                      APT / SUITE #;                      CITY;                      STATE;                      ZIP 604 Palo Alto Lane, Cedar Park, TX 78613 <input type="checkbox"/> Change of Address		
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION (512 ) 946-1402		
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR                      FIRST                      MI Mr. Michael T. Gleason <hr/> NICKNAME                      LAST                      SUFFIX		
<b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 604 Palo Alto Lane, Cedar Park, TX 78613		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION (512 ) 946-1402		
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> xxxxx30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10 PERIOD COVERED</b>	Month                      Day                      Year                      Month                      Day                      Year 7 / 01 / 2024 THROUGH                      9 / 30 / 2024		
<b>11 ELECTION</b>	ELECTION DATE Month                      Day                      Year 11 / 05 / 2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12 OFFICE</b>	OFFICE HELD (if any)                      Sheriff	<b>13 OFFICE SOUGHT</b> (if known)                      Sheriff	
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	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.		
<input checked="" type="checkbox"/> Additional Pages	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME                      \$1,282.33 Sun City Democrats                      9/20/2024 <hr/> COMMITTEE ADDRESS                      1530 Sun City Blvd Suite 120 PMB 432 Georgetown, TX 78633 <hr/> COMMITTEE CAMPAIGN TREASURER NAME Cammie E. Wait <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS                      1530 Sun City Blvd Suite 120 PMB 432 Georgetown, TX 78633	

**GO TO PAGE 2**

**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.

<input type="checkbox"/> Additional Pages	COMMITTEE TYPE  <input checked="" type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <b>Sun City Democrats 9/16/2024</b> <div style="text-align: right;"><b>\$3,800</b></div> COMMITTEE ADDRESS <b>1530 Sun City Blvd Suite 120 PMB 432 Georgetown, TX 78633</b>  COMMITTEE CAMPAIGN TREASURER NAME <b>Cammie E. Wait</b>  COMMITTEE CAMPAIGN TREASURER ADDRESS <b>1530 Sun City Blvd Suite 120 PMB 432 Georgetown, TX 78633</b>
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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

**15 C/OH NAME** Michael T. Gleason

**16 Filer ID** (Ethics Commission Filers)

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$0
	2. TOTAL POLITICAL CONTRIBUTIONS (1/12024 to 9/30/2024) (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$65,145.02
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$24,050.13
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$41,094.89
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0

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

\_\_\_\_\_  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP/SEAL

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

Signature of officer administering oath                      Printed name of officer administering oath                      Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is Michael Gleason \_\_\_\_\_, and my date of birth is 3/23/1965

My address is 609 Palo Alto Lane \_\_\_\_\_, Cedar Park \_\_\_\_\_, TX \_\_\_\_\_, 78613 \_\_\_\_\_

Executed in Williamson (street) County, State of Texas (city) (state) (zip code) (country), on the 7 day of October, 2024 (month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH**

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

<b>19 FILER NAME</b> Michael T Gleason		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b>	Amounts from 7/1/2024 to 9/30/2024	<b>SUBTOTAL AMOUNT</b>
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$49,751.02
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$0
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0
4. <input type="checkbox"/>	SCHEDULE E: LOANS	\$0
5. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$17,131.63
6. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0

7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$0

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 :22
2 FILER NAME Michael T. Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 7/8/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frank Limmer ..... 6 Contributor address; City; State; Zip Code 12506 FM1660 Taylor, TX 76574	7 Amount of contribution (\$) \$500.00
7 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
Date 7/1/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blaine Conklin for County Judge..... ..... Contributor address; City; State; Zip Code 905 E. Liberty Avenue Round Rock, TX 78664	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Campaign Fund		Employer (See Instructions) Campaign Fund
Date 7/8/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dee Dee Patterson ..... Contributor address; City; State; Zip Code 200 CR 180 Leander, TX 78641	Amount of contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Wholesale Bar
Date 7/8/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deborah Mack ..... Contributor address; City; State; Zip Code 11108 Casitas Drive Austin, TX 78717	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Waterstone Dev

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SEE ATTACHED 21 pages

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael T. Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/1/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah Mack	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 11108 Casitas Drive Austin, TX 78717		7
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Waterstone Dev
Date 8/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald Delord	Amount of contribution (\$) \$600.00
Contributor address; City; State; Zip Code 30320 LaQuinta Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Labor Relations Consultant		Employer (See Instructions) Self employed
Date 9/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheryl Coon-Riley	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 108 Tradinghouse Creek St Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson County Democrats	Amount of contribution (\$) \$800.00
Contributor address; City; State; Zip Code 1915 S Austin Ave #102 Georgetown, TX 78626		
Principal occupation / Job title (See Instructions) Democratic Party		Employer (See Instructions) Democratic Party



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:22
2 FILER NAME Michael T. Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/4/2024	8 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Western Wilco Democrats ..... 9 Contributor address; City; State; Zip Code 10908 Tall Oak Trail Austin, TX 78750	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Western Wilco Dems		9 Employer (See Instructions) Western Wilco Dems
Date 9/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jana Langston ..... Contributor address; City; State; Zip Code 102 Cypress Springs Way Georgetown, TX 78633	Amount of contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inna Aguilar ..... Contributor address; City; State; Zip Code 221 Springhouse Georgetown, TX 78628	Amount of contribution (\$) \$217.10
Principal occupation / Job title (See Instructions) Private Investigator		Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tammy Alexander ..... Contributor address; City; State; Zip Code 3813 Blue Mountain Path Round Rock, TX 78681	Amount of contribution (\$) 108.55
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) Williamson County

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:22
2 FILER NAME Michael T. Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	10 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenda Alicea ..... 11 Contributor address; City; State; Zip Code Old Blue Mountain Lane Georgetown, TX 78633	7 Amount of contribution (\$) \$215.26
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald Allman ..... Contributor address; City; State; Zip Code 4449 Wiilams Drive #122 Georgetown, TX 78633	Amount of contribution (\$) \$430.52
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifford Anderson ..... Contributor address; City; State; Zip Code 1504 Azalea Drive Cedar Park, TX 78613	Amount of contribution (\$) \$217.10
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Boydston..... .....Contributor address; City; State; Zip Code Sun City Georgetown, TX 78633	Amount of contribution (\$) \$108.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:22
2 FILER NAME <b>Michael T. Gleason</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/20/2024</b>	12 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dawana Carmona</b> <hr/> 13 Contributor address; City; State; Zip Code <b>208 Will Smith Drive Hutto, TX 78634</b> 14	7 Amount of contribution (\$) <b>\$430.52</b>
8 Principal occupation / Job title (See Instructions) <b>Retired</b>		9 Employer (See Instructions) <b>Retired</b>
Date <b>9/20/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sun City Democrats Treasurer Cammie E. Wait</b> <hr/> Contributor address; City; State; Zip Code <b>1530 Sun City Blvd Suite 120 PMB 432 Georgetown, TX 78633</b>	Amount of contribution (\$) <b>\$1,282.33</b>
Principal occupation / Job title (See Instructions) PAC		Employer (See Instructions) PAC
Date <b>9/20/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Terry Cook</b> <hr/> Contributor address; City; State; Zip Code <b>3117 GoldenOak Circle Round Rock, TX 78684</b>	Amount of contribution (\$) <b>\$430.52</b>
Principal occupation / Job title (See Instructions) <b>County Commissioner</b>		Employer (See Instructions) <b>Williamson County</b>
Date <b>9/20/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nani Covar</b> <hr/> Contributor address; City; State; Zip Code <b>15524 Whistling Straits Drive Austin, TX 789717</b>	Amount of contribution (\$) <b>108.55</b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions) <b>Retired</b>

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME Michael T. Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	15 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharon Cummings <hr/> 16 Contributor address; City; State; Zip Code 4110 N Summercrest Loop Round Rock, TX 78681	7 Amount of contribution (\$) \$217.10
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James David <hr/> Contributor address; City; State; Zip Code Sun City Georgetown, 78633	Amount of contribution (\$) \$215.26
Principal occupation / Job title (See Instructions) Chief Deputy		Employer (See Instructions) Williamson County
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) June Dunn <hr/> Contributor address; City; State; Zip Code 604 Palo Alto Ln Cedar Park, TX 78613	Amount of contribution (\$) \$430.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patrick Erickson <hr/> Contributor address; City; State; Zip Code 251 Applaloosa Way Liberty Hill, TX 78642	Amount of contribution (\$) \$430.52
Principal occupation / Job title (See Instructions) Chief Deputy		Employer (See Instructions) Williamson County

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME Michael T. Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	17 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lela Evans ..... 18 Contributor address; City; State; Zip Code Sun City Georgetown, 78633	7 Amount of contribution (\$) \$217.10
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Hobson ..... Contributor address; City; State; Zip Code 5012 Ranch Road 620 Round Rock, TX 78681	Amount of contribution (\$) \$1,709.16
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Rise Recovery
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Johnson ..... Contributor address; City; State; Zip Code Sun City Georgetown, 78633	Amount of contribution (\$) \$1,709.16
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avaire Kemuel ..... Contributor address; City; State; Zip Code 18319 Glenshee Drive Richmond, TX 77407	\$ 217.10
Principal occupation / Job title (See Instructions) Microsoft		Employer (See Instructions) Cybersecurity

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	19 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Lopacki ..... 20 Contributor address; City; State; Zip Code 6910 Lakewood Drive Georgetown, TX 78633	7 Amount of contribution (\$) \$1,282.33
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert McCabe ..... Contributor address; City; State; Zip Code 114 Dawana Lane Georgetown, TX 78628	Amount of contribution (\$) \$855.50
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louie Minor ..... Contributor address; City; State; Zip Code 503 W Ave I Killeen, TX 76541	Amount of contribution (\$) \$215.26
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Bell County
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Oswalt ..... Contributor address; City; State; Zip Code 818 Niki Road Salado, TX 76571	Amount of contribution (\$) \$217.10
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	21 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bud Patterson ..... 22 Contributor address; City; State; Zip Code 200 CR 180 Leander, TX 78641	7 Amount of contribution (\$) \$217.10
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jan Pelosi ..... Contributor address; City; State; Zip Code 10020 Valona Drive Austin, TX 78717	Amount of contribution (\$) \$325.65
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gale Radebaugh ..... Contributor address; City; State; Zip Code 115 Double Fire Trail Georgetown, TX 78633	Amount of contribution (\$) \$215.26
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Reedholm ..... Contributor address; City; State; Zip Code 114 Juniper Berry Trail Georgetown, TX 78628	Amount of contribution (\$) \$323.80
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Reedholm Instruments

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	23 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Stephens ..... 24 Contributor address; City; State; Zip Code 835 CR 304 E Jarrell, TX 76537	7 Amount of contribution (\$) <b>217.10</b>
8 Principal occupation / Job title (See Instructions) Pastor		9 Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle Augustine ..... Contributor address; City; State; Zip Code 419 Sheldon Lake Drive Georgetown, TX 78633	Amount of contribution (\$) <b>\$50.00</b>
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lytza Bragg ..... Contributor address; City; State; Zip Code 1109 Pine Forest Cove Round Rock, TX 78665	Amount of contribution (\$) <b>\$100.00</b>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald Karash ..... Contributor address; City; State; Zip Code 315 Fairway Ridge Georgetown, TX 78633	Amount of contribution (\$) <b>\$100.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE **A1**

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2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	25 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah Mack ..... 26 Contributor address; City; State; Zip Code 11108 Casitas Drive Austin, TX 78717	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Waterstone Dev
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilda Montgomery ..... Contributor address; City; State; Zip Code 1201 Lacey Oak Loop Round Rock, TX 78681	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Mulhearn ..... Contributor address; City; State; Zip Code 106 San Saba Drive Georgetown, TX 78633	Amount of contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Willingham ..... Contributor address; City; State; Zip Code 25 Waters Edge Cir. #310 Georgetown, TX 78626	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/16/2024	27 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sun City Democrats <hr/> 28 Contributor address; City; State; Zip Code 1530 Sun City Blvd Suite 120 PMB 432 Georgetown, TX 78633 29	7 Amount of contribution (\$) \$3,800.00
8 Principal occupation / Job title (See Instructions) PAC		9 Employer (See Instructions) PAC
Date 9/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Covey <hr/> Contributor address; City; State; Zip Code 255 Whispering Wind Georgetown, TX 78628	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Covey <hr/> Contributor address; City; State; Zip Code 255 Whispering Wind Georgetown, TX 78628	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry Higgins <hr/> Contributor address; City; State; Zip Code 408 Kodiak Trail Cedar Park, TX 78613	Amount of contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 7/13/2024	30 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifford Anderson ..... 31 Contributor address; City; State; Zip Code 1504 Azalea Drive Cedar Park, TX 78613 32	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 7/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corrine Richardson ..... Contributor address; City; State; Zip Code 11300 W Parmer Ln 814 Cedar Park, TX 78613	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) TDP
Date 8/7/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luis Echegaray ..... Contributor address; City; State; Zip Code 2250 Double Creek Dr. #8008 Round Rock, TX 78664	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director of Sales		Employer (See Instructions) UAG
Date 8/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walstein Smith ..... Contributor address; City; State; Zip Code 6 Sarazen Loop North Georgetown, TX 78628	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Patent Agent		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 8/11/2024	33 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caitlin Baker ..... 34 Contributor address; City; State; Zip Code 2807 Bellamy Circle Cedar Park, TX 78613	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) analyst		9 Employer (See Instructions) Apple
Date 8/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas Polk ..... Contributor address; City; State; Zip Code 15511 W Hwy 71 Suite 110 Unit 442 O Austin, TX 78738	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 8/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ali Baw ..... Contributor address; City; State; Zip Code PO Box 1943 Cedar Park, TX 78630	Amount of contribution (\$) \$51.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 8/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurie Beu ..... Contributor address; City; State; Zip Code 13102 Humphrey Drive Austin, TX 78729	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 8/21/2024	35 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Burke ..... 36 Contributor address; City; State; Zip Code 12525 Split Rail Pkwy Austin Austin, TX 78750	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 8/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frinstein Frinstein ..... Contributor address; City; State; Zip Code 2401 Westinghouse Rd Georgetown, TX 78626	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 8/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Allen ..... Contributor address; City; State; Zip Code 2008 Rose Circle Harker Heights, TX 76548	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/1/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Crain ..... Contributor address; City; State; Zip Code 606 Del Prado Lane Georgetown, TX 78628	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael T. Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/3/2024	37 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. Sam Manning ..... 38 Contributor address; City; State; Zip Code 1701 Logan Drive Round Rock, TX 78664	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 9/5/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) william eastes ..... Contributor address; City; State; Zip Code 3751 CR 245 Florence, TX 76527	Amount of contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/6/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geraldine Dalton ..... Contributor address; City; State; Zip Code 500 MILLER HILL RD 0 Georgetown, TX 78626	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/7/2024	39 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkeley Lashley ..... 40 Contributor address; City; State; Zip Code 4003 Luna Trail Georgetown, TX 78628	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Software Developer In Test		9 Employer (See Instructions) General Motors
Date 9/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. Sam Manning ..... Contributor address; City; State; Zip Code 1701 Logan Drive Round Rock, TX 78664	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jignesh Patel ..... Contributor address; City; State; Zip Code 3929 Venezia View Leander, TX 78641	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 9/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doris Sanchez ..... Contributor address; City; State; Zip Code 8106 ELKHORN MOUNTAIN TRL AUSTIN, TX 78729	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Communications/office Coordinator		Employer (See Instructions) Williamson county

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/14/2024	41 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Willingham ..... 42 Contributor address; City; State; Zip Code 1602 NE Glisan St Portland, OR 97232	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions) Self-employed
Date 9/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vicki MILLER ..... Contributor address; City; State; Zip Code 201 Klondike Dr Georgetown, TX 78633	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vicki MILLER ..... Contributor address; City; State; Zip Code 201 Klondike Dr Georgetown, TX 78633	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ali Baw ..... Contributor address; City; State; Zip Code PO Box 1943 Cedar Park, TX 78630	Amount of contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Engr		Employer (See Instructions) AB

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

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



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/18/2024	43 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward Siska ..... 44 Contributor address; City; State; Zip Code 305 Cathedral Mountain Pass Georgetown, TX 78633	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 9/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Johnson ..... Contributor address; City; State; Zip Code 103 Daisy Path Georgetown, TX 78633	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Georganne Duron ..... Contributor address; City; State; Zip Code 3713 Tall Cedars Rd. Cedar Park, TX 78613	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Part-time self-employed pet sitter		Employer (See Instructions) Part-time self-employed pet sitter
Date 9/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Gilby ..... Contributor address; City; State; Zip Code 720 Nelson Ranch Rd Cedar Park, TX 78613	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) County Chair		Employer (See Instructions) Wilco Dems

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/20/2024	45 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rick pfeil ..... 46 Contributor address; City; State; Zip Code 811 W. Lake Dr Taylor, TX 76574	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 9/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Newman ..... Contributor address; City; State; Zip Code 1515 W Lake Dr Taylor, TX 76574	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 9/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna Hooper ..... Contributor address; City; State; Zip Code 109 Trinity Lane Georgetown, TX 78633	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 9/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becky Mcleod ..... Contributor address; City; State; Zip Code 1712 Halter lane Cedar park, TX 78613	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/23/2024	47 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marie Smith ..... 48 Contributor address; City; State; Zip Code 104 John Thomas Drive Georgetown, TX 78628	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 9/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brad McGrew ..... Contributor address; City; State; Zip Code 402 Gann St Georgetown, TX 78626	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Berthold ..... Contributor address; City; State; Zip Code 13915 Searspoint Ave Bakersfield, CA 93314	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 9/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet Rice ..... Contributor address; City; State; Zip Code 1608 woodgreen Round Rock, TX 78681	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) RRISD

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

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22
2 FILER NAME Michael Gleason		3 Filer ID (Ethics Commission Filers)
4 Date 9/29/2024	49 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Pondrom ..... 50 Contributor address; City; State; Zip Code 306 River Ridge Dr Georgetown, TX 78628	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 9/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick Lane ..... Contributor address; City; State; Zip Code 401 Highland Spring Ln Georgetown, TX 78633	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) MCA

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Michael Gleason		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 7/15/2024		<b>5</b> Payee name Williamson County Democrats			
<b>6</b> Amount (\$) \$5,000.00		<b>7</b> Payee address; 1915 S. Austin Blvd. Georgetown TX		City;	State;
				Zip Code 78626	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation		<b>(b)</b> Description Coordinated Campaign		
	<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					
Date 7/29/2024		Payee name Fiore Catering			
Amount (\$) \$3,770.00		Payee address; 602 E. McNeill Rd #106 Round Rock TX		City;	State;
				Zip Code 78681	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense		Description Campaign fundraiser Sept 20		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 8/14/2024		Payee name Office Depot			
Amount (\$) \$115.83		Payee address; 1019 W. University Georgetown TX		City;	State;
				Zip Code 78628	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Event Expense		Description Flyers for Sept event		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Michael Gleason		Office sought Sheriff	Office held Sheriff

**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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

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

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

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F1: **2** FILER NAME Michael Gleason **3** Filer ID (Ethics Commission Filers)

**4** Date 8/14/2024 **5** Payee name Celebrino Event Center

**6** Amount (\$) \$1,200.00 **7** Payee address; City; State; Zip Code  
51 Co Rd. 107 Georgetown TX 78626

**8** **PURPOSE OF EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Room fee for 9/20 event  
(c)  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense

**9** Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Michael Gleason Office sought Sheriff Office held Sheriff

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE** Category (See Categories listed at the top of this schedule) Description  
 Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Michael Gleason Office sought Sheriff Office held Sheriff

Date 8/12/2024 Payee name Dirt Cheap Signs

Amount (\$) \$3,296.21 Payee address; City; State; Zip Code  
6706 Lohman Ford Rd. Lago Vista TX 786455

**PURPOSE OF EXPENDITURE** Category (See Categories listed at the top of this schedule) Advertising Expense Description Signs  
 Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Michael Gleason Office sought Sheriff Office held Sheriff

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Michael Gleason		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 8/21/2024		<b>5</b> Payee name Office Depot			
<b>6</b> Amount (\$) \$24.35		<b>7</b> Payee address; 1019 W. University Georgetown TX		City;	State; Zip Code 78628
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising		<b>(b)</b> Description Flyers for Sept 20 event		
	<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 Michael Gleason		Office sought Sheriff Office held Sheriff	
Date 8/21/2024		Payee name Dirt Cheap Signs			
Amount (\$) \$56.83		Payee address; 6706 Lohman Ford Rd. Lago Vista TX		City;	State; Zip Code 786455
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description Signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Michael Gleason		Office sought Sheriff Office held Sheriff	
Date 8/21/2024		Payee name Dirt Cheap Signs			
Amount (\$) \$366.22		Payee address; 6706 Lohman Ford Rd. Lago Vista TX		City;	State; Zip Code 786455
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description Signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Michael Gleason		Office sought Sheriff Office held Sheriff	

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Michael Gleason		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 9/12/2024		<b>5</b> Payee name Fiore Catering			
<b>6</b> Amount (\$) \$1,500.00		<b>7</b> Payee address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description Campaign fundraiser fee for catering for 9/20/2024 event		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Michael Gleason		Office sought Sheriff Office held Sheriff	
Date 9/28/2024		Payee name Home Depot			
Amount (\$) \$202.06		Payee address; City; State; Zip Code 2700 Whitestone Blvd Cedar Park TX 78613			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description Cables for signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Michael Gleason		Office sought Sheriff Office held Sheriff	
Date 9/25/2024		Payee name Fast Signs			
Amount (\$) \$908.41		Payee address; City; State; Zip Code 505 W University Avenue Suite G Georgetown TX 78626			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description Door hangers for block walking		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Michael Gleason		Office sought Sheriff Office held Sheriff	



Date 9/25/2024	Payee name Dirt Cheap Signs		
Amount (\$) \$691.72	Payee address; 6706 Lohman Ford Rd.	City; Lago Vista	State; Zip Code TX 786455
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Signs	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Michael Gleason		Office sought Sheriff Office held Sheriff