

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: <span style="font-size: 2em; font-family: cursive;">63</span>		
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>MR</b>	FIRST <b>CHRISTOPHER</b>	MI <b>M</b>	<div style="border: 2px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> <p style="margin: 0;"><b>RECEIVED</b></p> <p style="margin: 0; font-size: 1.2em;">JAN 11 2024</p> <p style="margin: 0; font-size: 1.5em; font-family: cursive;">63 pg</p> </div> <p style="font-size: 0.8em; margin-top: 5px;">MONTGOMERY COUNTY ELECTIONS ADMINISTRATOR</p>	
	NICKNAME	LAST <b>JONES</b>	SUFFIX		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>PO BOX 52, MAGNOLIA, TX 77353</b>				
	AREA CODE <b>(281 )</b>	PHONE NUMBER <b>259-6493</b>	EXTENSION		
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR <b>MRS.</b>	FIRST <b>MELISSA</b>	MI <b>R</b>	Date Received	
	NICKNAME	LAST <b>JONES</b>	SUFFIX	Date Hand-delivered or Date Postmarked	
<b>6</b> CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>22619 BANE BERRY RD, MAGNOLIA, TX 77355</b>			Receipt #	
	AREA CODE <b>(281 )</b>	PHONE NUMBER <b>989-5699</b>	EXTENSION	Amount \$	
<b>7</b> CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>22619 BANE BERRY RD, MAGNOLIA, TX 77355</b>			Date Processed	
	AREA CODE <b>(281 )</b>	PHONE NUMBER <b>989-5699</b>	EXTENSION	Date Imaged	
<b>8</b> CAMPAIGN TREASURER PHONE	<b>9</b> REPORT TYPE				
	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th 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</b> PERIOD COVERED	Month    Day    Year <b>7 / 1 / 23</b>			THROUGH    Month    Day    Year <b>12 / 31 / 23</b>	
	<b>11</b> ELECTION		<b>13</b> OFFICE SOUGHT (if known)		
ELECTION DATE		OFFICE HELD (if any)			
Month    Day    Year	Primary    Runoff    Other Description		MONTGOMERY COUNTY PCT 5 CONSTABLE		
/    /    /	General    Special				
<b>12</b> OFFICE		<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)			
OFFICE HELD (if any)		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.			
MONTGOMERY COUNTY PCT 5 CONSTABLE		COMMITTEE TYPE			
		COMMITTEE NAME			
		COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			

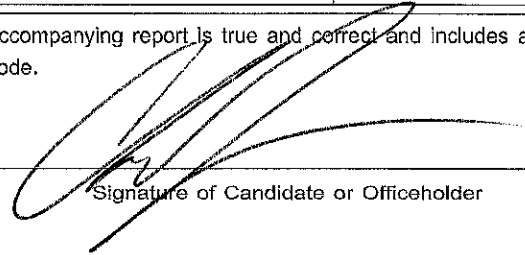
**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

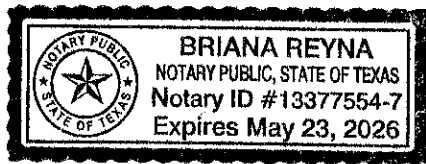
15 C/OH NAME CONSTABLE CHRIS JONES		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 325.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 59,461.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 77,790.05
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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 Briana Reyna this the 11<sup>th</sup> day of January, 20 24, 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 \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

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

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

<b>19 FILER NAME</b> CONSTABLE CHRIS JONES		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1. ■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 325.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. SCHEDULE E: LOANS		\$ 0.00
5. ■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 59,461.91
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0.00

# 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: **1**

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

**CONSTABLE CHRIS JONES**

4 Date

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

**07/27/2023**

**CHUCK ADCOX**

6 Contributor address;

City;

State;

Zip Code

**28111 INDIGO LAKE CT, MAGNOLIA, TX 77355**

**250.00**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**08/29/2023**

**KELLY ALBERTSON**

Contributor address;

City;

State;

Zip Code

**22618 BANE BERRY RD, MAGNOLIA, TX 77355**

**75.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/03/2023</b>	<b>5</b> Payee name <b>MAGNOLIA'S BEST STORAGE</b>	
<b>6</b> Amount (\$) <b>199.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>37805 FM 1774, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OVERHEAD/RENTAL EXPENSE</b>	<b>(b)</b> Description <b>STORAGE FOR CAMPAIGN MATERIALS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>08/03/2023</b>	Payee name <b>MAGNOLIA'S BEST STORAGE</b>	
Amount (\$) <b>199.00</b>	Payee address; City; State; Zip Code <b>37805 FM 1774, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD/RENTAL EXPENSE</b>	Description <b>STORAGE FOR CAMPAIGN MATERIALS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>09/02/2023</b>	Payee name <b>MAGNOLIA'S BEST STORAGE</b>	
Amount (\$) <b>199.00</b>	Payee address; City; State; Zip Code <b>37805 FM 1774, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD/RENTAL EXPENSE</b>	Description <b>STORAGE FOR CAMPAIGN MATERIALS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/04/2023</b>	<b>5</b> Payee name <b>MAGNOLIA'S BEST STORAGE</b>	
<b>6</b> Amount (\$) <b>244.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>37805 FM 1774, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OVERHEAD/RENTAL EXPENSE</b>	<b>(b)</b> Description <b>STORAGE FOR CAMPAIGN MATERIALS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>11/03/2023</b>	Payee name <b>MAGNOLIA'S BEST STORAGE</b>	
Amount (\$) <b>224.00</b>	Payee address; City; State; Zip Code <b>37805 FM 1774, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD/RENTAL EXPENSE</b>	Description <b>STORAGE FOR CAMPAIGN MATERIALS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/02/2023</b>	Payee name <b>MAGNOLIA'S BEST STORAGE</b>	
Amount (\$) <b>224.00</b>	Payee address; City; State; Zip Code <b>37805 FM 1774, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD/RENTAL EXPENSE</b>	Description <b>STORAGE FOR CAMPAIGN MATERIALS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/04/2023</b>	<b>5</b> Payee name <b>ANTIQUEROSE FLORIST</b>	
<b>6</b> Amount (\$) <b>135.31</b>	<b>7</b> Payee address; City; State; Zip Code <b>10540 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>GIFT/AWARD EXPENSE</b>	<b>(b)</b> Description <b>FLOWERS FOR DEPUTY FUNERAL</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>07/12/2023</b>	Payee name <b>HELLO FLOWERS</b>	
Amount (\$) <b>135.20</b>	Payee address; City; State; Zip Code <b>407 E FORT ST, DETROIT, MI 48226</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>GIFT/AWARD EXPENSE</b>	Description <b>FLOWERS FOR FUNERAL OF CONSTITUENT</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>07/13/2023</b>	Payee name <b>SAUCED UP</b>	
Amount (\$) <b>113.87</b>	Payee address; City; State; Zip Code <b>36825 FM 1774, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/18/2023</b>	<b>5</b> Payee name <b>CORN AND RYE CATERING</b>	
<b>6</b> Amount (\$) <b>27.50</b>	<b>7</b> Payee address; City; State; Zip Code <b>10963 CUTTEN RD, HOUSTON, TX 77066</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>FUNDRAISING EXPENSE</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>07/18/2023</b>	Payee name <b>KATE GILLEN</b>	
Amount (\$) <b>100.00</b>	Payee address; City; State; Zip Code <b>28222 TIMBER VILLAGE, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>GIFT/AWARD</b>	Description <b>GRADUATION GIFT TO CONSTIUENT</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>07/20/2023</b>	Payee name <b>DRILLBIT ROUGHNECKS BASEBALL</b>	
Amount (\$) <b>1,200.00</b>	Payee address; City; State; Zip Code <b>14100 ADAMS LN, PINEHURST, TX 77362</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>DONATION TO BASEBALL TEAM</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/06/2023</b>	<b>5</b> Payee name <b>CLEARWATER EXPRESS WASH</b>	
<b>6</b> Amount (\$) <b>14.99</b>	<b>7</b> Payee address; City; State; Zip Code <b>14206 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FEES</b>	<b>(b)</b> Description <b>CAR / COOK TRAILER WASH</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>08/06/2023</b>	Payee name <b>CLEARWATER EXPRESS WASH</b>	
Amount (\$) <b>14.99</b>	Payee address; City; State; Zip Code <b>14206 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEES</b>	Description <b>CAR / COOK TRAILER WASH</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>09/06/2023</b>	Payee name <b>CLEARWATER EXPRESS WASH</b>	
Amount (\$) <b>14.99</b>	Payee address; City; State; Zip Code <b>14206 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEES</b>	Description <b>CAR / COOK TRAILER WASH</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 10/06/2023	<b>5</b> Payee name CLEARWATER EXPRESS WASH
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<b>6</b> Amount (\$) 14.99	<b>7</b> Payee address; City; State; Zip Code 14206 FM 1488 RD, MAGNOLIA, TX 77354
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) FEES	<b>(b)</b> Description CAR / COOK TRAILER WASH
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/06/2023	Payee name CLEARWATER EXPRESS WASH
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Amount (\$) 14.99	Payee address; City; State; Zip Code 14206 FM 1488 RD, MAGNOLIA, TX 77354
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FEES	Description CAR / COOK TRAILER WASH
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name CLEARWATER EXPRESS WASH
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Amount (\$) 14.99	Payee address; City; State; Zip Code 14206 FM 1488 RD, MAGNOLIA, TX 77354
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FEES	Description CAR / COOK TRAILER WASH
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/13/2023</b>	<b>5</b> Payee name <b>NCMA</b>	
<b>6</b> Amount (\$) <b>127.16</b>	<b>7</b> Payee address; City; State; Zip Code <b>1818 LIBERY ST STE 500, RESTON, VA 20190</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FEES</b>	<b>(b)</b> Description <b>SYSTEM TRAINING</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>07/19/2023</b>	<b>Payee name</b> <b>MONTGOMERY COUNTY</b>	
<b>Amount (\$)</b> <b>100.00</b>	<b>Payee address; City; State; Zip Code</b> <b>19100 UNITY PARK DR, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	<b>Description</b> <b>TAGS FOR COOK TRAILER</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>07/22/2023</b>	<b>Payee name</b> <b>GREATER MAGNOLIA PARKWAY CHAMBER</b>	
<b>Amount (\$)</b> <b>135.00</b>	<b>Payee address; City; State; Zip Code</b> <b>18423 FM 1488 STE C, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>Description</b> <b>CHAMBER LUNCHEON WITH CONSTIUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/10/2023</b>	<b>5</b> Payee name <b>MAGNOLIA AUTO</b>	
<b>6</b> Amount (\$) <b>2,650.56</b>	<b>7</b> Payee address; City; State; Zip Code <b>17852 FM 1488, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>REPAIRS FOR CAR DONATION</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
<b>Date</b> <b>07/28/2023</b>	<b>Payee name</b> <b>AVIE GILLEN</b>	
<b>Amount (\$)</b> <b>100.00</b>	<b>Payee address; City; State; Zip Code</b> <b>28222 TIMBER VILLAGE, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>GIFT</b>	<b>Description</b> <b>GRADUATION GIFT TO CONSTIUENT</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
<b>Date</b> <b>08/01/2023</b>	<b>Payee name</b> <b>WESLEY OLDHAM</b>	
<b>Amount (\$)</b> <b>1,000.00</b>	<b>Payee address; City; State; Zip Code</b> <b>25703 PIPESTEM DR, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>CONTRIBUTION MADE BY OH</b>	<b>Description</b> <b>DONATION TO CONSTIUENT</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>59</b>	2 FILER NAME <b>CONSTABLE CHRIS JONES</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>08/04/2023</b>	5 Payee name <b>GMPCC</b>
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6 Amount (\$) <b>1,700.00</b>	7 Payee address; City; State; Zip Code <b>18423 FM 1488 STE C, MAGNOLIA, TX 77354</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>FEES</b>	(b) Description <b>ANNUAL CHAMBER DUES AND PARADE SPONSORSHIP</b>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/01/2023</b>	Payee name <b>KAIJU YAKI CATERING</b>
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Amount (\$) <b>938.47</b>	Payee address; City; State; Zip Code <b>22419 MEADOWSWEET DR, MAGNOLIA, TX 77355</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/01/2023</b>	Payee name <b>TUFF</b>
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Amount (\$) <b>1,000.00</b>	Payee address; City; State; Zip Code <b>6606 FM 1488 STE 148-686, MAGNOLIA, TX 77354</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>TABLE FOR BANQUET</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/25/2023</b>	<b>5</b> Payee name <b>AMAZON</b>	
<b>6</b> Amount (\$) <b>85.79</b>	<b>7</b> Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	<b>(b)</b> Description <b>OFFICE SUPPLIES</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>07/26/2023</b>	Payee name <b>5 DE MAYO</b>	
Amount (\$) <b>41.11</b>	Payee address; City; State; Zip Code <b>18423 FM 1488, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>07/26/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>263.76</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>NATIONAL NIGHT OUT HANDOUTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 07/27/2023	<b>5</b> Payee name AMAZON
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<b>6</b> Amount (\$) 80.18	<b>7</b> Payee address; 410 TERRY AVE N, SEATTLE, WA 98109	City;	State;	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	<b>(b)</b> Description OFFICE SUPPLIES
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 07/29/2023	Payee name FREYBURG HALL
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Amount (\$) 344.99	Payee address; 5701 FREYBURG HALL RD, SCHULENBURG, TX 78956	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description MEETING WITH CONSTITUENTS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 07/26/2023	Payee name AMAZON
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Amount (\$) 64.34	Payee address; 410 TERRY AVE N, SEATTLE, WA 98109	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	Description PRINTER INK
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 08/02/2023	<b>5</b> Payee name RANCHO GRANDE
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<b>6</b> Amount (\$) 46.76	<b>7</b> Payee address; City; State; Zip Code 18914 FM 1488 RD, MAGNOLIA, TX 77355
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	<b>(b)</b> Description MEETING WITH CONSTITUENTS
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/03/2023	Payee name AMAZON
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Amount (\$) 7.52	Payee address; City; State; Zip Code 410 TERRY AVE N, SEATTLE, WA 98109
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description NATIONAL NIGHT OUT SUPPLIES
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/04/2023	Payee name AMAZON
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Amount (\$) 25.60	Payee address; City; State; Zip Code 410 TERRY AVE N, SEATTLE, WA 98109
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description NATIONAL NIGHT OUT SUPPLIES
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/03/2023</b>	<b>5</b> Payee name <b>SAUCED UP</b>	
<b>6</b> Amount (\$) <b>34.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>36825 FM 1774 RD, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>MEETING WITH CONSTITUENTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>08/04/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>84.96</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>NATIONAL NIGHT OUT SUPPLIES</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>08/08/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>4.32</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>NATIONAL NIGHT OUT SUPPLIES</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/08/2023</b>	<b>5</b> Payee name <b>O'REILLY AUTO PARTS</b>	
<b>6</b> Amount (\$) <b>32.46</b>	<b>7</b> Payee address; City; State; Zip Code <b>40930 FM 1774 RD, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	<b>(b)</b> Description <b>PARTS FOR COOK TRAILER</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>08/08/2023</b>	Payee name <b>HALF BAKED GOODNESS</b>	
Amount (\$) <b>64.82</b>	Payee address; City; State; Zip Code <b>13650 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>COOKIES FOR SCHOOL PIZZA PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>08/08/2023</b>	Payee name <b>DOMINO'S PIZZA</b>	
Amount (\$) <b>140.63</b>	Payee address; City; State; Zip Code <b>18602 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>SCHOOL PIZZA PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/08/2023</b>	<b>5</b> Payee name <b>HARBOR FREIGHT</b>	
<b>6</b> Amount (\$) <b>159.88</b>	<b>7</b> Payee address; City; State; Zip Code <b>1405 I 45 N, CONROE, TX 77304</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	<b>(b)</b> Description <b>TOOLS FOR COOK TRAILER</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>08/10/2023</b>	Payee name <b>GRINGO'S</b>	
Amount (\$) <b>189.98</b>	Payee address; City; State; Zip Code <b>4300 HWY 6 FRONTAGE RD, COLLEGE STATION, TX 77845</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>08/11/2023</b>	Payee name <b>JOES PIZZA AND PASTA</b>	
Amount (\$) <b>24.00</b>	Payee address; City; State; Zip Code <b>1604 N FRAZIER ST, CONROE, TX 77301</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 08/11/2023	<b>5</b> Payee name VISTAPRINT
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<b>6</b> Amount (\$) 128.68	<b>7</b> Payee address; City; State; Zip Code 275 WYMAN ST, WALTHAM, MA 02451
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<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 BINGO TICKETS
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/13/2023	Payee name MAGNOLIA HARDWARE
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Amount (\$) 30.60	Payee address; City; State; Zip Code 19025 FM 1488, MAGNOLIA, TX 77355
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OVERHEAD EXPENSE	Description PARTS FOR COOK TRAILER
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/13/2023	Payee name RANCHO GRANDE
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Amount (\$) 129.78	Payee address; City; State; Zip Code 18914 FM 1488, MAGNOLIA, TX 77355
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description MEETING WITH CONSTITUENTS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/20/2023</b>	<b>5</b> Payee name <b>GRINGO'S</b>	
<b>6</b> Amount (\$) <b>224.75</b>	<b>7</b> Payee address; City; State; Zip Code <b>4300 HWY 6 FRONTAGE RD, COLLEGE STATION, TX 77845</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>MEETING WITH CONSTITUENTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date <b>08/23/2023</b>	Payee name <b>THE MEATING PLACE</b>	
Amount (\$) <b>157.77</b>	Payee address; City; State; Zip Code <b>41902 FM 1774, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date <b>08/24/2023</b>	Payee name <b>BOOT BARN</b>	
Amount (\$) <b>121.47</b>	Payee address; City; State; Zip Code <b>28593 TX 249, TOMBALL, TX 77375</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR BANQUET</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>59</b>	2 FILER NAME <b>CONSTABLE CHRIS JONES</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>08/24/2023</b>	5 Payee name <b>PHONE.COM</b>
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6 Amount (\$) <b>173.36</b>	7 Payee address; City; State; Zip Code <b>184 SO LIVINGSTON AVE STE 9-222, LIVINGSTON, NJ 07039</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	(b) Description <b>PHONE</b>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/24/2023</b>	Payee name <b>ACADEMY</b>
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Amount (\$) <b>252.11</b>	Payee address; City; State; Zip Code <b>14221 FM 2920, TOMBALL, TX 77377</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>NATIONAL NIGHT OUT SUPPLIES</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/26/2023</b>	Payee name <b>SCHULENBURG LIQUOR</b>
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Amount (\$) <b>1,164.77</b>	Payee address; City; State; Zip Code <b>317 SUMMIT ST, SCHULENBURG, TX 78956</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>GIFTS / AWARDS EXPENSE</b>	Description <b>GIFTS FOR CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/27/2023</b>	<b>5</b> Payee name <b>BARTENDING 2 U</b>	
<b>6</b> Amount (\$) <b>101.20</b>	<b>7</b> Payee address; City; State; Zip Code <b>4560 W 34TH ST STE A, HOUSTON, TX 77092</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>TUFF BANQUET</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>08/27/2023</b>	Payee name <b>TUFF</b>	
Amount (\$) <b>207.25</b>	Payee address; City; State; Zip Code <b>6606 FM 1488 STE 148-686, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>TUFF BANQUET</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>08/28/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>39.06</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	Description <b>OFFICE SUPPLIES</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/31/2023	<b>5</b> Payee name APRICITY FOUNDATION	
<b>6</b> Amount (\$) 263.73	<b>7</b> Payee address; City; State; Zip Code 2257 N LOOP 336 STE 140, CONROE, TX 77304	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) DONATION MADE BY OH	<b>(b)</b> Description BANQUET DONATION
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date 08/28/2023	Payee name TUFF	
Amount (\$) 1,139.90	Payee address; City; State; Zip Code 6606 FM 1488 STE 148-686, MAGNOLIA, TX 77354	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) DONATION MADE BY OH	Description TUFF BANQUET
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date 08/31/2023	Payee name MCELROY'S HARBOR HOUSE	
Amount (\$) 50.99	Payee address; City; State; Zip Code 695 BEACH BLVD, BILOXI, MS 39530	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description CAMPAIGN MEETING
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>09/01/2023</b>	<b>5</b> Payee name <b>ADVENTURES PUB</b>	
<b>6</b> Amount (\$) <b>44.19</b>	<b>7</b> Payee address; City; State; Zip Code <b>132 LAMEUSE ST, BILOXI, MS 39530</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>MEETING WITH CONSTITUENTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>09/06/2023</b>	Payee name <b>SHELBY WALLING</b>	
Amount (\$) <b>500.00</b>	Payee address; City; State; Zip Code <b>24502 PIPESTEM, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>GIFT EXPENSE</b>	Description <b>GRADUATION GIFT FOR CONSTITUENT</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>09/01/2023</b>	Payee name <b>MYFA</b>	
Amount (\$) <b>750.00</b>	Payee address; City; State; Zip Code <b>31660 SUGAR BEND DR, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION BY OH</b>	Description <b>DONATION TO FOOTBALL</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>09/01/2023</b>	<b>5</b> Payee name <b>CHAD JORDAN</b>	
<b>6</b> Amount (\$) <b>2,251.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>24614 NOTTINGHAM CIRCLE, HOCKLEY, TX 77447</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION BY OH</b>	<b>(b)</b> Description <b>DONATION FOR BASEBALL</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>09/02/2023</b>	Payee name <b>BEAU RIVAGE</b>	
Amount (\$) <b>43.71</b>	Payee address; City; State; Zip Code <b>875 BEACH BLVD, BILOXI, MS 39530</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>CAMPAIGN MEETING</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>09/02/2023</b>	Payee name <b>GOLDEN NUGGET</b>	
Amount (\$) <b>163.00</b>	Payee address; City; State; Zip Code <b>151 BEACH BLVD, BILOXI, MS 39530</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>CAMPAIGN MEETING</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>59</i>	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/03/2023	<b>5</b> Payee name DMITRY TARANUHA	
<b>6</b> Amount (\$) 450.00	<b>7</b> Payee address; City; State; Zip Code 23162 BANE BERRY RD, MAGNOLIA, TX 77355	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) DONATION MADE BY OH	<b>(b)</b> Description DONATION MADE TO CONSTITUENT
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date	Payee name <i>Blank</i>	
Amount (\$)	Payee address; City; State; Zip Code <i>Blank</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date	Payee name <i>Blank</i>	
Amount (\$)	Payee address; City; State; Zip Code <i>Blank</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 09/07/2023	<b>5</b> Payee name AMAZON
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<b>6</b> Amount (\$) 160.40	<b>7</b> Payee address; City; State; Zip Code 410 TERRY AVE N, SEATTLE, WA 98109
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) EVENT EXPENSE	<b>(b)</b> Description TRUNK OR TREAT MATERIALS
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/07/2023	Payee name AMAZON
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Amount (\$) 386.07	Payee address; City; State; Zip Code 410 TERRY AVE N, SEATTLE, WA 98109
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description TRUNK OR TREAT MATERIALS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/07/2023	Payee name SOCIETY OF SAMARITANS
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Amount (\$) 850.00	Payee address; City; State; Zip Code 31355 FRIENDSHIP DR, MAGNOLIA, TX 77355
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) DONATION BY OH	Description DONATION FOR AWARDS BANQUET
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 09/09/2023	<b>5</b> Payee name STRONG TOWER TROPHY
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<b>6</b> Amount (\$) 120.50	<b>7</b> Payee address; 18434 BUDDY RILEY BLVD #4, MAGNOLIA, TX 77354	City;	State;	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description SHIRT EMBROIDERY
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/09/2023	Payee name JWS SCHOLARSHIP
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Amount (\$) 250.00	Payee address; 11625 PRINCE ANDREW, MONTGOMERY, TX 77316	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) DONATION MADE BY OH	Description DONATION TO JWS SCHOLARSHIP CLAY SHOOT TOURNAMENT
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/14/2023	Payee name THE MEATING PLACE
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Amount (\$) 60.89	Payee address; 41902 FM 1774, MAGNOLIA, TX 77354	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description MEETING WITH CONSTITUENTS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>09/16/2023</b>	<b>5</b> Payee name <b>GRILL PARTS SEARCH</b>	
<b>6</b> Amount (\$) <b>84.05</b>	<b>7</b> Payee address; City; State; Zip Code <b>221 MCDONOUGH PKWY, MCDONOUGH, GA 30253</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	<b>(b)</b> Description <b>PARTS FOR COOK TRAILER</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>09/16/2023</b>	Payee name <b>RANCHO GRANDE</b>	
Amount (\$) <b>178.51</b>	Payee address; City; State; Zip Code <b>18914 FM 1488 RD, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTIUEENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>09/16/2023</b>	Payee name <b>THE BBQ DEPOT</b>	
Amount (\$) <b>321.11</b>	Payee address; City; State; Zip Code <b>5881 PEMBROKE RD, HOLLYWOOD, FL 33023</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	Description <b>PARTS FOR COOK TRAILER</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>09/19/2023</b>	<b>5</b> Payee name <b>MISD FOOTBALL</b>	
<b>6</b> Amount (\$) <b>2,000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>31141 NICHOLS SAWMILL RD, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>DONATION TO MISD FOOTBALL PROGRAM</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>09/20/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>32.76</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSES</b>	Description <b>OFFICE SUPPLIES</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>09/21/2023</b>	Payee name <b>VISTAPRINT</b>	
Amount (\$) <b>115.83</b>	Payee address; City; State; Zip Code <b>275 WYMAN ST, WALTHAM, MA 02451</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description <b>BINGO TICKETS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>09/22/2023</b>	<b>5</b> Payee name <b>MWHS BASKETBALL</b>	
<b>6</b> Amount (\$) <b>250.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>42202 FM 1774, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>DONATION TO MWHS BASKETBALL</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>09/27/2023</b>	Payee name <b>THE ANGRY ELEPHANT</b>	
Amount (\$) <b>60.78</b>	Payee address; City; State; Zip Code <b>7030 FM 1488 STE 100, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>09/29/2023</b>	Payee name <b>TAMMY MCRAE</b>	
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>400 N SAN JACINTO, CONROE, TX 77301</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>DONATION FOR CAMPAIGN FUNDRAISER</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/03/2023</b>	<b>5</b> Payee name <b>CONROE LAKE HOUSE</b>	
<b>6</b> Amount (\$) <b>40.46</b>	<b>7</b> Payee address; City; State; Zip Code <b>14954 HWY 105 W, MONTGOMERY, TX 77356</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>MEETING WITH CONSTITUENTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date <b>10/03/2023</b>	Payee name <b>TRACTOR SUPPLY</b>	
Amount (\$) <b>64.94</b>	Payee address; City; State; Zip Code <b>18567 BUDDY RILEY BLVD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	Description <b>SUPPLIES FOR COOK TRAILER</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date <b>10/03/2023</b>	Payee name <b>CAPITOL COMMISSION OF TEXAS</b>	
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>12302 MARSHAL DR, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>DONATION FOR GOLF TOURNAMENT FUNDRAISER</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/04/2023</b>	<b>5</b> Payee name <b>JUDGE VINCE SANTINI</b>	
<b>6</b> Amount (\$) <b>250.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO BOX 558, PINEHURST, TX 77362</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>CAMPAIGN DONATION</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10/05/2023</b>	Payee name <b>MAGNOLIA FLOWER PATCH</b>	
Amount (\$) <b>144.95</b>	Payee address; City; State; Zip Code <b>19010 FM 1488, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>GIFT EXPENSE</b>	Description <b>FLOWERS FOR CONSTIUENT FUNERAL</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10/06/2024</b>	Payee name <b>BROOKSHIRE BROTHERS</b>	
Amount (\$) <b>20.18</b>	Payee address; City; State; Zip Code <b>18535 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR COOK EVENT</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/07/2023</b>	<b>5</b> Payee name <b>VISTAPRINT</b>	
<b>6</b> Amount (\$) <b>108.31</b>	<b>7</b> Payee address; City; State; Zip Code <b>275 WYMAN ST, WALTHAM, MA 02451</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	<b>(b)</b> Description <b>BINGO TICKETS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>10/07/2023</b>	Payee name <b>THE MEATING PLACE</b>	
Amount (\$) <b>116.91</b>	Payee address; City; State; Zip Code <b>41902 FM 1774, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>10/08/2023</b>	Payee name <b>CHICK FIL A</b>	
Amount (\$) <b>119.93</b>	Payee address; City; State; Zip Code <b>14314 FM 2920, TOMBALL, TX 77377</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By 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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/10/2023</b>	<b>5</b> Payee name <b>PIZZAIOLOS</b>	
<b>6</b> Amount (\$) <b>105.38</b>	<b>7</b> Payee address; City; State; Zip Code <b>18304 FM 1488, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>MEETING WITH CONSTITUENTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>Date</b> <b>10/11/2023</b>	<b>Payee name</b> <b>JRI FOUNDATION</b>	
<b>Amount (\$)</b> <b>3,113.00</b>	<b>Payee address; City; State; Zip Code</b> <b>PO BOX 698, MAGNOLIA, TX 77353</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>Description</b> <b>DONATION TO SCHOLARSHIP FUNDRAISER</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>Date</b> <b>10/15/2023</b>	<b>Payee name</b> <b>BUZZ LIQUOR</b>	
<b>Amount (\$)</b> <b>102.94</b>	<b>Payee address; City; State; Zip Code</b> <b>3645 CYPRESS CREEK PKWY #312, HOUSTON, TX 77068</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>GIFT EXPENSE</b>	<b>Description</b> <b>CHRISTMAS GIFTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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: 59		<b>2</b> FILER NAME CONSTABLE CHRIS JONES		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 10/15/2023		<b>5</b> Payee name CHANDLER'S EVENTS			
<b>6</b> Amount (\$) 380.00		<b>7</b> Payee address; City; State; Zip Code 304 CAROLINE ST, MONTGOMERY, TX 77356			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		<b>(b)</b> Description MEETING WITH CONSTITUENTS		
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/16/2023		Payee name MWHS CROSS COUNTRY			
Amount (\$) 250.00		Payee address; City; State; Zip Code 42202 FM 1774, MAGNOLIA, TX 77354			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) DONATION MADE BY OH		Description DONATION TO MWHS CROSS COUNTRY TEAM		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/18/2023		Payee name JRI FOUNDATION			
Amount (\$) 4,046.90		Payee address; City; State; Zip Code PO BOX 698, MAGNOLIA, TX 77353			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) DONATION MADE BY OH		Description DONATION TO SCHOLARSHIP FUNDRAISER		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/20/2023</b>	<b>5</b> Payee name <b>MAGNOLIA ELITE</b>	
<b>6</b> Amount (\$) <b>250.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>31611 SUGAR BEND DR, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>DONATION TO MAG SOFTBALL</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>10/21/2023</b>	Payee name <b>RANCHO GRANDE</b>	
Amount (\$) <b>46.40</b>	Payee address; City; State; Zip Code <b>18914 FM 1488, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>10/21/2023</b>	Payee name <b>RANCHO GRANDE</b>	
Amount (\$) <b>111.68</b>	Payee address; City; State; Zip Code <b>18914 FM 1488, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | 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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/24/2023</b>	<b>5</b> Payee name <b>THE MEATING PLACE</b>	
<b>6</b> Amount (\$) <b>72.33</b>	<b>7</b> Payee address; City; State; Zip Code <b>41902 FM 1774, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>MEETING WITH CONSTITUENTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
<b>Date</b> <b>10/24/2023</b>	<b>Payee name</b> <b>COSTCO</b>	
<b>Amount (\$)</b> <b>333.24</b>	<b>Payee address; City; State; Zip Code</b> <b>26960 NORTHWEST FRWY, CYPRESS, TX 77433</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>CANDY FOR TRUNK OR TREAT</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
<b>Date</b> <b>10/25/2023</b>	<b>Payee name</b> <b>VISTAPRINT</b>	
<b>Amount (\$)</b> <b>108.31</b>	<b>Payee address; City; State; Zip Code</b> <b>275 WYMAN ST, WALTHAM, MA 02451</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description <b>BINGO TICKETS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/25/2023</b>	<b>5</b> Payee name <b>HALO BRANDED SOLUTIONS</b>	
<b>6</b> Amount (\$) <b>2,401.69</b>	<b>7</b> Payee address; City; State; Zip Code <b>1500 HALO WAY, STERLING, IL 61081</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	<b>(b)</b> Description <b>MARKETING MATERIALS FOR HAND OUTS</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>10/26/2024</b>	Payee name <b>COOTERS SPIRITS</b>	
Amount (\$) <b>265.18</b>	Payee address; City; State; Zip Code <b>300 S WALCOTT ST, JEFFERSON, TX 75657</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>GIFTS EXPENSE</b>	Description <b>CONSTITUENT GIFTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>11/02/2023</b>	Payee name <b>THE MARGARITA MAN</b>	
Amount (\$) <b>32.26</b>	Payee address; City; State; Zip Code <b>15 THORNBUSH PL, THE WOODLANDS, TX 77381</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/03/2023</b>	<b>5</b> Payee name <b>MAGNOLIA HARDWARE</b>	
<b>6</b> Amount (\$) <b>20.15</b>	<b>7</b> Payee address; City; State; Zip Code <b>19025 FM 1488, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OVERHEAD EXPENSE</b>	<b>(b)</b> Description <b>TOOLS FOR COOK TRAILER</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>11/03/2023</b>	Payee name <b>MARK KEOUGH</b>	
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>501 N THOMPSON, CONROE, TX 77301</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>CAMPAIGN DONATION</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>11/04/2023</b>	Payee name <b>LUPE TORTILLA</b>	
Amount (\$) <b>807.23</b>	Payee address; City; State; Zip Code <b>22465 TX 249, HOUSTON, TX 77070</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/07/2023</b>	<b>5</b> Payee name <b>H E B</b>	
<b>6</b> Amount (\$) <b>181.53</b>	<b>7</b> Payee address; City; State; Zip Code <b>7988 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	<b>(b)</b> Description <b>FOOD FOR VETERANS DAY CELEBRATION</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>11/07/2023</b>	Payee name <b>DONUT JUNKIE</b>	
Amount (\$) <b>738.81</b>	Payee address; City; State; Zip Code <b>920 CABLE ST, CONROE, TX 77301</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>11/08/2024</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>38.60</b>	Payee address; City; State; Zip Code <b>410 TE3RRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR VETERANS DAY CELEBRATION</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/12/2024</b>	<b>5</b> Payee name <b>BROOKSHIRE BROTHERS</b>	
<b>6</b> Amount (\$) <b>54.80</b>	<b>7</b> Payee address; City; State; Zip Code <b>18535 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	<b>(b)</b> Description <b>SUPPLIES FOR VETERANS DAY CELEBRATION</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>11/13/2024</b>	Payee name <b>RON'S BURGERS</b>	
Amount (\$) <b>98.03</b>	Payee address; City; State; Zip Code <b>18415 FM 1488 RD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>11/14/2023</b>	Payee name <b>MONTGOMERY COUNTY REPUBLICAN PARTY</b>	
Amount (\$) <b>1,000.00</b>	Payee address; City; State; Zip Code <b>921 W AUSTIN ST, CONROE, TX 77301</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEES</b>	Description <b>FILING FOR ELECTION FEES</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 11/15/2024	<b>5</b> Payee name BILLY MASDEN
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<b>6</b> Amount (\$) 500.00	<b>7</b> Payee address; 19100 UNITY PARK DR, MAGNOLIA, TX 77355	City;	State;	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) DONATION MADE BY OH	<b>(b)</b> Description SECURITY FOR SOS EVENT
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/16/2024	Payee name COME TO THE TABLE
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Amount (\$) 250.00	Payee address; 31355 FRIENDSHIP DR, MAGNOLIA, TX 77355	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) DONATION MADE BY OH	Description THANKSGIVING DINNER
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/16/2023	Payee name THE BEE'S KNEES
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Amount (\$) 466.51	Payee address; 30310 CHARLIE LN, MAGNOLIA, TX 77355	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description VENUE FOR OFFICE CHRISTMAS PARTY
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/18/2023	<b>5</b> Payee name RANCHO GRANDE	
<b>6</b> Amount (\$) 45.78	<b>7</b> Payee address; City; State; Zip Code 18914 FM 1488 RD, MAGNOLIA, TX 77355	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	<b>(b)</b> Description COMMAND STAFF MEETING
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

Date 11/18/2023	Payee name CYNTHIA WOODS MITCHELL PAVILION	
Amount (\$) 64.73	Payee address; City; State; Zip Code 2005 LAKE ROBBINS DR, THE WOODLANDS, TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description MEETING WITH CONSTITUENTS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

Date 11/18/2023	Payee name CYNTHIA WOODS MITCHELL PAVILION	
Amount (\$) 100.97	Payee address; City; State; Zip Code 2005 LAKE ROBBINS DR, THE WOODLANDS, TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description MEETING WITH CONSTITUENTS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 11/18/2023	<b>5</b> Payee name WOODFOREST BANK CLUB
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<b>6</b> Amount (\$) 195.26	<b>7</b> Payee address; City; State; Zip Code 2005 LAKE ROBBINS DR, THE WOODLANDS, TX 77380
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	<b>(b)</b> Description MEETING WITH CONSTITUENTS
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/22/2023	Payee name AMAZON
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Amount (\$) 143.67	Payee address; City; State; Zip Code 410 TERRY AVE N, SEATTLE, WA 98109
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OVERHEAD EXPENSE	Description OFFICE SUPPLIES
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/22/2023	Payee name STACY MCCARTY
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Amount (\$) 200.00	Payee address; City; State; Zip Code 318 SKYLARK ST, MAGNOLIA, TX 77355
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) DONATION MADE BY OH	Description DONATION TO SOFTBALL TEAM
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 11/27/2023	<b>5</b> Payee name BROOKSHIRE BROTHERS
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<b>6</b> Amount (\$) 147.93	<b>7</b> Payee address; City; State; Zip Code 18535 FM 1488 RD, MAGNOLIA, TX 77354
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<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 SUPPLIES FOR OFFICE PARTY
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/28/2023	Payee name MAGNOLIA HARDWARE
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Amount (\$) 347.76	Payee address; City; State; Zip Code 19025 FM 1488, MAGNOLIA, TX 77355
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description MATERIALS FOR PARADE FLOAT
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/29/2023	Payee name SCHULENBURG LIQUOR
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Amount (\$) 624.00	Payee address; City; State; Zip Code 317 SUMMIT ST, SCHULENBURG, TX 78956
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) GIFT EXPENSE	Description CHRISTMAS GIFTS FOR CONSTITUENTS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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: 59	<b>2</b> FILER NAME CONSTABLE CHRIS JONES	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 11/29/2023	<b>5</b> Payee name NATE HOLMES
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<b>6</b> Amount (\$) 250.00	<b>7</b> Payee address; City; State; Zip Code 164 MAGNOLIA RESERVE LOOP, MAGNOLIA, TX 77354
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRACT LABOR	<b>(b)</b> Description PARADE FLOAT
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name CITIZEN'S GRILL
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Amount (\$) 80.87	Payee address; City; State; Zip Code 315 ENCLAVE DR STE 300, CONROE, TX 77384
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description MEETING WITH SUPERVISORS
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name TRACTOR SUPPLY
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Amount (\$) 93.03	Payee address; City; State; Zip Code 18567 BUDDY RILEY BLVD, MAGNOLIA, TX 77354
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description PARADE FLOAT
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/01/2023</b>	<b>5</b> Payee name <b>MEZCAL CANTINA</b>	
<b>6</b> Amount (\$) <b>110.03</b>	<b>7</b> Payee address; City; State; Zip Code <b>535 WOODLAND SQUARE BLVD, CONROE, TX 77384</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>SUPERVISOR MEETING</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/01/2023</b>	Payee name <b>VISTAPRINT</b>	
Amount (\$) <b>134.07</b>	Payee address; City; State; Zip Code <b>275 WYMAN ST, WALTHAM, MA 02451</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description <b>BINGO TICKETS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/01/2023</b>	Payee name <b>SPEED PRO IMAGING</b>	
Amount (\$) <b>800.00</b>	Payee address; City; State; Zip Code <b>32503 TAMINA RD, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description <b>SIGNS</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/02/2023</b>	<b>5</b> Payee name <b>MAGNOLIA HARDWARE</b>	
<b>6</b> Amount (\$) <b>98.03</b>	<b>7</b> Payee address; City; State; Zip Code <b>19025 FM 1488, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	<b>(b)</b> Description <b>MATERIALS FOR PARADE FLOAT</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date <b>12/02/2023</b>	Payee name <b>ANTIQUE ROSE FLORIST</b>	
Amount (\$) <b>133.15</b>	Payee address; City; State; Zip Code <b>10540 FM 1488, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>GIFT EXPENSE</b>	Description <b>FLOWERS FOR CONSTITUENT FUNERAL</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date <b>12/04/2023</b>	Payee name <b>EL JIMADOR</b>	
Amount (\$) <b>357.80</b>	Payee address; City; State; Zip Code <b>23701 NICHOLS SAWMILL RD, HOCKLEY, TX 77447</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/04/2023</b>	<b>5</b> Payee name <b>MAGNOLIA WEST SOFTBALL</b>	
<b>6</b> Amount (\$) <b>250.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>42202 FM 1774, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>DONATION TO MWHS SOFTBALL TEAM</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/05/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>79.86</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/05/2023</b>	Payee name <b>YOUNG LIFE</b>	
Amount (\$) <b>500.00</b>	Payee address; City; State; Zip Code <b>33300 EGYPT LN BUILDING L 500, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>DONATION TO YOUNG LIFE CAMP</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/06/2023</b>	<b>5</b> Payee name <b>COSTCO</b>	
<b>6</b> Amount (\$) <b>190.20</b>	<b>7</b> Payee address; City; State; Zip Code <b>12405 N GESSNER RD, HOUSTON, TX 77064</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	<b>(b)</b> Description <b>SUPPLIES FOR OFFICE CHRISTMAS PARTY</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/06/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>11.79</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/06/2023</b>	Payee name <b>TOTAL WINE</b>	
Amount (\$) <b>568.11</b>	Payee address; City; State; Zip Code <b>7640 CYPRESS CREEK PKWY, HOUSTON, TX 77070</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/07/2023</b>	<b>5</b> Payee name <b>GREAT AMERICAN COOKIE COMPANY</b>	
<b>6</b> Amount (\$) <b>57.49</b>	<b>7</b> Payee address; City; State; Zip Code <b>14245 FM 2920 STE 150, TOMBALL, TX 77377</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	<b>(b)</b> Description <b>COOKIE FOR OFFICE CHRISTMAS PARTY</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/07/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>17.14</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/07/2023</b>	Payee name <b>NNT LIQUOR LOT</b>	
Amount (\$) <b>77.92</b>	Payee address; City; State; Zip Code <b>18535 FM 1488 STE 160, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By 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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/07/2023</b>	<b>5</b> Payee name <b>AMAZON</b>	
<b>6</b> Amount (\$) <b>138.64</b>	<b>7</b> Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	<b>(b)</b> Description <b>SUPPLIES FOR OFFICE CHRISTMAS PARTY</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/07/2023</b>	Payee name <b>RESTAURANT DEPOT</b>	
Amount (\$) <b>419.77</b>	Payee address; City; State; Zip Code <b>23815 TOMBALL PKWY, TOMBALL, TX 77375</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR BREAKFAST WITH SANTA FOR MEF</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/08/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>11.14</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SUPPLIES FOR BREAKFAST WITH SANTA FOR MEF</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/08/2023</b>	<b>5</b> Payee name <b>THE MARGARITA MAN</b>	
<b>6</b> Amount (\$) <b>129.03</b>	<b>7</b> Payee address; City; State; Zip Code <b>15 THORNBUSH PL, THE WOODLANDS, TX 77381</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>OFFICE CHRISTMAS PARTY</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>12/08/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>332.45</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>ADOPTED FAMILY FOR CHRISTMAS DONATION</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>12/08/2023</b>	Payee name <b>ACADEMY</b>	
Amount (\$) <b>676.48</b>	Payee address; City; State; Zip Code <b>14221 FM 2920, TOMBALL, TX 77377</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>BIKES FOR MEF BREAKFAST WITH SANTA</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services		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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/08/2023</b>	<b>5</b> Payee name <b>LUPE TORTILLA</b>	
<b>6</b> Amount (\$) <b>1,036.53</b>	<b>7</b> Payee address; City; State; Zip Code <b>22465 TX 249, HOUSTON, TX 77070</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	<b>(b)</b> Description <b>OFFICE CHRISTMAS PARTY</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/09/2023</b>	Payee name <b>ALPHAGRAPHICS</b>	
Amount (\$) <b>516.26</b>	Payee address; City; State; Zip Code <b>3031 N FRAZIER ST, CONROE, TX 77303</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OFFICE/OVERHEAD EXPENSE</b>	Description <b>ENVELOPES</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/09/2023</b>	Payee name <b>MORTON'S GRILL</b>	
Amount (\$) <b>1,000.00</b>	Payee address; City; State; Zip Code <b>25 WATERWAY AVE, THE WOODLANDS, TX 77380</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH COMMAND STAFF</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/10/2023</b>	<b>5</b> Payee name <b>AMAZON</b>	
<b>6</b> Amount (\$) <b>11.79</b>	<b>7</b> Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>ADOPTED FAMILY FOR CHRISTMAS DONATION</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>12/10/2023</b>	Payee name <b>CHICK FIL A</b>	
Amount (\$) <b>110.42</b>	Payee address; City; State; Zip Code <b>14314 FM 2920, TOMBALL, TX 77377</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>12/11/2023</b>	Payee name <b>LYNN MARKS</b>	
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>30310 CHARLIE LN, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>SANTA FOR OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/10/2023</b>	<b>5</b> Payee name <b>AMAZON</b>	
<b>6</b> Amount (\$) <b>18.86</b>	<b>7</b> Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>ADOPTED FAMILY FOR CHRISTMAS DONATION</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/13/2023</b>	Payee name <b>MORTON'S GRILLE</b>	
Amount (\$) <b>2,334.77</b>	Payee address; City; State; Zip Code <b>25 WATERWAY AVE, THE WOODLANDS, TX 77380</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FOOD/BEVERAGE EXPENSE</b>	Description <b>MEETING WITH COMMAND STAFF</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/12/2023</b>	Payee name <b>THE BEES KNEES</b>	
Amount (\$) <b>466.50</b>	Payee address; City; State; Zip Code <b>30310 CHARLIE LN, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>VENUE FOR OFFICE CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/15/2023</b>	<b>5</b> Payee name <b>AMAZON</b>	
<b>6</b> Amount (\$) <b>30.44</b>	<b>7</b> Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>ADOPTED FAMILY FOR CHRISTMAS DONATION</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date <b>12/16/2023</b>	Payee name <b>AMAZON</b>	
Amount (\$) <b>10.03</b>	Payee address; City; State; Zip Code <b>410 TERRY AVE N, SEATTLE, WA 98109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>ADOPTED FAMILY FOR CHRISTMAS DONATION</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date <b>12/16/2023</b>	Payee name <b>JD BARBER SHOP</b>	
Amount (\$) <b>83.20</b>	Payee address; City; State; Zip Code <b>17665 FM 1488, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>DONATION OF HAIR CUTS FOR CONSTITUENTS</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/19/2023</b>	<b>5</b> Payee name <b>ALYSSA STUCKEY</b>	
<b>6</b> Amount (\$) <b>75.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>30310 CHARLIE LN, MAGNOLIA, TX 77355</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	<b>(b)</b> Description <b>COOKIES FOR OFFICE CHRISTMAS PARTY</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>12/26/2023</b>	Payee name <b>TAFR</b>	
Amount (\$) <b>1,000.00</b>	Payee address; City; State; Zip Code <b>12620 FM 1960 W STE A4 - BOX 255, HOUSTON, TX 77065</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>FUNDRAISER DONATION</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>12/29/2023</b>	Payee name <b>MAGNOLIA AREA REPUBLICANS</b>	
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>30310 CHARLIE LN, MAGNOLIA, TX 77355</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	Description <b>DONATION FOR CHRISTMAS PARTY</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/03/2023</b>	<b>5</b> Payee name <b>SIMPLE TEXTING</b>	
<b>6</b> Amount (\$) <b>30.68</b>	<b>7</b> Payee address; City; State; Zip Code <b>1815 PURDY AVE, MIAMI BEACH, FL 33140</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FEES</b>	<b>(b)</b> Description <b>MASS TEXT SERVICE</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>08/03/2023</b>	Payee name <b>SIMPLE TEXTING</b>	
Amount (\$) <b>30.68</b>	Payee address; City; State; Zip Code <b>1815 PURDY AVE, MIAMI BEACH, FL 33140</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEES</b>	Description <b>MASS TEXT SERVICE</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>09/03/2023</b>	Payee name <b>SIMPLE TEXTING</b>	
Amount (\$) <b>30.68</b>	Payee address; City; State; Zip Code <b>1815 PURDY AVE, MIAMI BEACH, FL 33140</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEES</b>	Description <b>MASS TEXT SERVICE</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/03/2023</b>	<b>5</b> Payee name <b>SIMPLE TEXTING</b>	
<b>6</b> Amount (\$) <b>30.68</b>	<b>7</b> Payee address; City; State; Zip Code <b>1815 PURDY AVE, MIAMI BEACH, FL 33140</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>FEES</b>	<b>(b)</b> Description <b>MASS TEXT SERVICE</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>11/03/2023</b>	Payee name <b>SIMPLE TEXTING</b>	
Amount (\$) <b>30.68</b>	Payee address; City; State; Zip Code <b>1815 PURDY AVE, MIAMI BEACH, FL 33140</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEES</b>	Description <b>MASS TEXT SERVICE</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date <b>12/03/2023</b>	Payee name <b>SIMPLE TEXTING</b>	
Amount (\$) <b>30.68</b>	Payee address; City; State; Zip Code <b>1815 PURDY AVE, MIAMI BEACH, FL 33140</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEES</b>	Description <b>MASS TEXT SERVICE</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By 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>59</b>	<b>2</b> FILER NAME <b>CONSTABLE CHRIS JONES</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/14/2023</b>	<b>5</b> Payee name <b>JUDGE WAYNE MACK CAMPAIGN</b>	
<b>6</b> Amount (\$) <b>500.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>300 S DANVILLE ST, WILLIS, TX 77378</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>(b)</b> Description <b>DONATION FOR PRAYER BREAKFAST FUNDRAISER</b>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>08/25/2023</b>	<b>Payee name</b> <b>MWHS BASEBALL BOOSTER CLUB</b>	
<b>Amount (\$)</b> <b>510.65</b>	<b>Payee address; City; State; Zip Code</b> <b>42202 FM 1774, MAGNOLIA, TX 77354</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>Description</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>12/29/2023</b>	<b>Payee name</b> <b>BRYAN CHRIST CAMPAIGN</b>	
<b>Amount (\$)</b> <b>500.00</b>	<b>Payee address; City; State; Zip Code</b> <b>PO BOX 558, PINEHURST, TX 77362</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>DONATION MADE BY OH</b>	<b>Description</b> <b>DONATION TO CAMPAIGN</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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