

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>9</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	MR	JERYL	A
	NICKNAME	LAST	SUFFIX
		HOOVER	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	105 CRESTWOOD DRIVE FREDERICKSBURG, TX 78624		
Change of Address			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	( 830 )	456-9550	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	MRS	SUSAN	S
	NICKNAME	LAST	SUFFIX
		MAHONEY	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
(Residence or Business)	312 W COLLEGE STREET FREDERICKSBURG, TX 78624		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	( 713 )	542-2790	
9 REPORT TYPE	<input 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 checked="" 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)		
10 PERIOD COVERED	Month	Day	Year
	1	13	23
	THROUGH		6 / 30 / 23
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	5	7	22
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)
	MAYOR		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

**OFFICE USE ONLY**

Date Received  
**7-12-23 SA**

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Date Hand-delivered or Date Postmarked

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Receipt #      Amount \$

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Date Processed

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Date Imaged  
**7-17-23**

**GO TO PAGE 2**



**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME JERYL A HOOVER	3 Filer ID (Ethics Commission Filers)
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4 Date 02/14/2023	5 Payee name JERYL A HOOVER
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6 Amount (\$) 104.80	7 Payee address; 105 CRESTWOOD DR	City; FREDERICKSBURG	State; TX	Zip Code 78624
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8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONSULTATION EXPENSE	(b) Description REIMBURSE MILEAGE FOR TRAVEL TO AUSTIN TO CONSULT WITH CEO OF AUSTIN COMMUNITY FOUNDATION RE POTENTIAL OF FORMING ONE IN FREDERICKSBURG
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/29/2023	Payee name JERYL A HOOVER
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Amount (\$) 116.80	Payee address; 105 CRESTWOOD DR	City; FREDERICKSBURG	State; TX	Zip Code 78624
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) TRAVEL OUT OF DISTRICT	Description REIMBURSE MILEAGE & PARKING FOR TRAVEL TO AUSTIN TO TESTIFY AT THE CAPITOL RE TWO BILLS AFFECTING FREDERICKSBURG'S ZONING PROVISIONS
	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 04/12/2023	Payee name JERYL A HOOVER
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Amount (\$) 156.54	Payee address; 105 CRESTWOOD DR	City; FREDERICKSBURG	State; TX	Zip Code 78624
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER: TRAINING EVENT	Description REIMBURSE MILEAGE FOR TRAVEL TO ATTEND 2 1/2 DAY LEADERSHIP TRAINING IN GEORGETOWN SPONSORED BY TML
	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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**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 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: 3	<b>2</b> FILER NAME JERYL A HOOVER	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 05/17/2023	<b>5</b> Payee name JERYL A HOOVER
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<b>6</b> Amount (\$) <b>156.54</b>	<b>7</b> Payee address; 105 CRESTWOOD DR FREDERICKBURG TX 78624
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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) <b>OTHER: TRAINING EVENT</b>	<b>(b)</b> Description REIMBURSE MILEAGE FOR TRAVEL TO ATTEND 2 1/2 DAY LEADERSHIP TRAINING IN GEORGETOWN SPONSORED BY TML
	<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 <b>05/31/2023</b>	Payee name JERYL A HOOVER
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Amount (\$) <b>104.80</b>	Payee address; 105 CRESTWOOD DR FREDERICKBURG TX 78624
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>CONSULTING EXPENSE</b>	Description REIMBURSE MILEAGE FOR TRAVEL TO AUSTIN TO CONSULT WITH PRINCIPALS IN THE AUSTIN HOUSING AUTHORITY RE POTENTIAL MODEL FOR FREDERICKSBURG
	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>06/19/2023</b>	Payee name JERYL A HOOVER
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Amount (\$) <b>60.00</b>	Payee address; 105 CRESTWOOD DR FREDERICKBURG TX 78624
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description REIMBURSE SUBSCRIPTION TO THE LOCAL NEWSPAPER TO STAY INFORMED OF CONSTITUENT ACTIVITY
	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: 3	<b>2</b> FILER NAME JERYL A HOOVER	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 06/21/2023	<b>5</b> Payee name JERYL A HOOVER
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<b>6</b> Amount (\$) <b>74.67</b>	<b>7</b> Payee address; 105 CRESTWOOD DR FREDERICKSBURG TX 78624
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) <b>CONSULTATION EXPENSE</b>	<b>(b) Description</b> REIMBURSE MILEAGE FOR TRAVEL TO MARBLE FALLS TO CONSULT WITH CEO OF TEXAS HOUSING FOUNDATION RE POTENTIAL SOLUTIONS TO THE AFFORDABLE HOUSING CHALLENGE IN FREDERICKSBURG
	<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
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Date <b>06/22/2023</b>	Payee name JERYL A HOOVER
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Amount (\$) <b>32.75</b>	Payee address; 105 CRESTWOOD DR FREDERICKSBURG TX 78624
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OTHER: TRAINING EVENT</b>	Description REIMBURSE MILEAGE FOR TRAVEL TO KERRVILLE TO ATTEND AN ALAMO AREA COUNCIL OF GOVERNMENTS' PRESENTATION RE LOCAL ECONOMIC DEVELOPMENT
	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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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<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.	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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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(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)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 4	2 FILER NAME JERYL A HOOVER	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 02/15/2023	6 Payee name TEXAS MUNICIPAL LEAGUE
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7 Amount (\$) <b>795.00</b>	8 Payee address: 1821 RUTHERFORD LN	City: AUSTIN	State: TX	Zip Code 78754
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>OTHER: TRAINING EVENT</b>	(b) Description PROGRAM FEE FOR OFFICEHOLDER TO ATTEND TWO 2 1/2 DAY LEADERSHIP TRAINING IN GEORGETOWN SPONSORED BY TML
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 04/14/2023	Payee name SHERATON AUSTIN GEORGETOWN HOTEL & CONFERENCE CENTER
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Amount (\$) <b>542.79</b>	Payee address: 1101 WOODLAWN ST	City: GEORGETOWN	State: TX	Zip Code 78628
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>OTHER: TRAINING EVENT</b>	Description LODGING FOR OFFICEHOLDER TO ATTEND FIRST 2 1/2 DAY LEADERSHIP TRAINING IN GEORGETOWN SPONSORED BY TML
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: 4	<b>2</b> FILER NAME JERYL A HOOVER	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date 04/19/2023	<b>6</b> Payee name PASTA BELLA	
<b>7</b> Amount (\$) <b>32.45</b>	<b>8</b> Payee address; 103 S LLANO ST	City: FREDERICKSBURG State: TX Zip Code: 78754
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	<b>(b)</b> Description OFFICEHOLDER HAD LUNCH MEETING WITH GILLESPIE COUNTY AUDITOR RE METHODS FOR IMPROVING CITY/COUNTY CO-FUNDING COLLABORATIONS
	<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>11</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 05/08/2023	Payee name GUMROAD, INC	
Amount (\$) <b>75.00</b>	Payee address; 548 MARKET ST	City: SAN FRANCISCO State: CA Zip Code: 94104
<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OTHER: TRAINING EVENT	Description OFFICEHOLDER PARTICIPATED IN WEBINAR SPONSORED BY TML ON BUDGET & TAX RATE
	<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>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: 4	<b>2</b> FILER NAME JERYL A HOOVER	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 05/17/2023	<b>6</b> Payee name CAVA GEORGETOWN
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<b>7</b> Amount (\$) <b>19.90</b>	<b>8</b> Payee address: 1201 W UNIVERSITY DR	City: GEORGETOWN	State: TX	Zip Code 78628
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	(b) Description MEAL FOR OFFICEHOLDER WHILE ATTENDING SECOND 2 1/2 DAY LEADERSHIP TRAINING IN GEORGETOWN SPONSORED BY TML
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 05/18/2023	Payee name EL MONUMENTO
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Amount (\$) <b>19.00</b>	Payee address: 205 W 2ND ST	City: GEORGETOWN	State: TX	Zip Code 78628
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description MEAL FOR OFFICEHOLDER WHILE ATTENDING SECOND 2 1/2 DAY LEADERSHIP TRAINING IN GEORGETOWN SPONSORED BY TML
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

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### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: 4	<b>2</b> FILER NAME JERYL A HOOVER	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date 05/19/2023	<b>6</b> Payee name SHERATON AUSTIN GEORGETOWN HOTEL & CONFERENCE CENTER	
<b>7</b> Amount (\$) 542.79	<b>8</b> Payee address; 1101 WOODLAWN ST	City; State; Zip Code GEORGETOWN TX 78628
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) OTHER: TRAINING EVENT	<b>(b) Description</b> LODGING FOR OFFICEHOLDER TO ATTEND SECOND 2 1/2 DAY LEADERSHIP TRAINING IN GEORGETOWN SPONSORED BY TML
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/16/2023	Payee name WIX.COM	
Amount (\$) 26.90	Payee address; 500 TERRY A FRANCOIS BLVD	City; State; Zip Code SAN FRANCISCO CA 94158
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	Description WEBSITE SERVICE FEE AS OFFICEHOLDER SEEKS TO DEVELOP MAYOR'S WEBSITE
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		