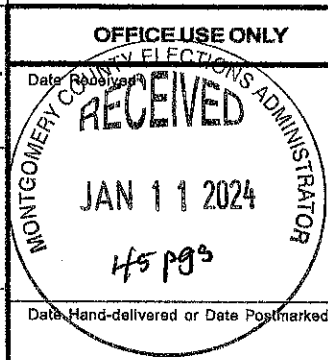


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**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: <div style="text-align: right; font-weight: bold;">45</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Ryan	MI M
	NICKNAME	LAST Gable	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 130966 Spring, TX 77393		
	AREA CODE PHONE NUMBER EXTENSION (713) 478-9485		
5 CANDIDATE / OFFICEHOLDER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 33026 Sawgrass Ct Magnolia, TX 77354 <small>(Residence or Business)</small>		
	AREA CODE PHONE NUMBER EXTENSION (832) 948-3197		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Ralph	MI
	NICKNAME	LAST Furches	SUFFIX
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 33026 Sawgrass Ct Magnolia, TX 77354		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 948-3197		
9 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)		
10 PERIOD COVERED	Month Day Year Month Day Year 07 / 15 / 2023 THROUGH 01 / 15 / 2024		
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Montgomery Co. Constable Pct 3	13 OFFICE SOUGHT (if known)	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	<small>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.</small>		
	<input type="checkbox"/> GENERAL	COMMITTEE NAME	
	<input type="checkbox"/> SPECIFIC	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**

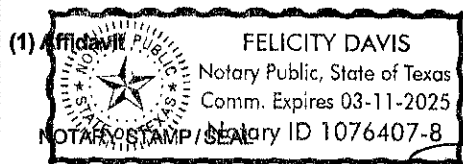
15 C/OH NAME Ryan M. Gable		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 89,135.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 14,142.33
	4. TOTAL POLITICAL EXPENDITURES	\$ 102,105.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 450,053.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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:



Sworn to and subscribed before me by RYAN GABLE this the 10 day of JANUARY, 2024 to certify which, witness my hand and seal of office.

Felicity Davis Signature of officer administering oath
 Felicity Davis Printed name of officer administering oath
 Notary Public 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

19 FILER NAME Ryan M. Gable		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 89,135.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 102,105.30
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

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: 14
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 08/21/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle & Tricia Brown 6 Contributor address; City; State; Zip Code 38 Thornblade Circle The Woodlands, TX 77389	7 Amount of contribution (\$) \$1700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/21/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy J. Milstead Contributor address; City; State; Zip Code 1415 Spring Hills Dr Spring, TX 77386	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael & Vicki Richmond Contributor address; City; State; Zip Code 59 North Royal Fern Dr The Woodlands, TX 77380	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don A. Buckalew Contributor address; City; State; Zip Code PO Box 500 Conroe, TX 77305	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 4
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 08/25/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronnie & Cathy Matthews 6 Contributor address; City; State; Zip Code 101 Saddle Brook Ln Tomball, TX 77375	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/28/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff & Robben Cunningham Contributor address; City; State; Zip Code 1935 Cattle Dr Magnolia, TX 77354	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby & Lindsey Kasprzak Contributor address; City; State; Zip Code 27 Grand Regency Circle Spring, TX 77382	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/31/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard & Hailun Buzz Contributor address; City; State; Zip Code 6115 E Balsam Fir Circle Spring, TX 77386	Amount of contribution (\$) 1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 09/05/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald R Miller 6 Contributor address; City; State; Zip Code 6711 River Lodge Dr Spring, TX 77379	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol & Henry Roth Contributor address; City; State; Zip Code 714 Hurlock St Spring, TX 77373	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brad & Audrey Stapp Contributor address; City; State; Zip Code 8527 Majestic Lake Ct Montgomery, TX 77316	Amount of contribution (\$) \$3400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmine & Gabriella Falcone Contributor address; City; State; Zip Code 38 Leeward Cove Dr The Woodlands, TX 77381	Amount of contribution (\$) 1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 09/25/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry & Cindy Donoho 6 Contributor address; City; State; Zip Code 175 Vue Point Place The Woodlands, TX 77380	7 Amount of contribution (\$) \$1700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/25/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Massoud Contributor address; City; State; Zip Code 6515 Kodes Clay Ct Spring, TX 77379	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/25/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul & Kristin Mason Contributor address; City; State; Zip Code 31 Mason Pond Pl The Woodlands, TX 77381	Amount of contribution (\$) \$1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Moritz Contributor address; City; State; Zip Code 710 N Post Oak Rd, Ste 450 Houston, TX 77024	Amount of contribution (\$) \$850.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 09/28/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth L Vernier 6 Contributor address; City; State; Zip Code 107 W Racing Cloud Ct The Woodlands, TX 77381	7 Amount of contribution (\$) \$2000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/28/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Acosta Contributor address; City; State; Zip Code 19214 Piney Way Dr Tomball, TX 77375	Amount of contribution (\$) \$850.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denise Baker Contributor address; City; State; Zip Code 15431 I-45 Conroe, TX 77385	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammy W. Roberts II Contributor address; City; State; Zip Code 1714 Johnson St Houston, TX 77007	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 10/02/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey & Letty Seay 6 Contributor address; City; State; Zip Code 28411 E Benders Landing Blvd Spring, TX 77386	7 Amount of contribution (\$) \$1700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/05/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aven McBride Contributor address; City; State; Zip Code 31102 Spring Lake Blvd Tomball, TX 77375	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael W. Kossow Contributor address; City; State; Zip Code 11322 Neeshaw Dr Houston, TX 77065	Amount of contribution (\$) \$3400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Atkins Contributor address; City; State; Zip Code 31119 Blue Ridge Park Ln Spring, TX 77386	Amount of contribution (\$) \$850.00
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.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 10/10/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omar & Alesha Maalouf 6 Contributor address; City; State; Zip Code 25825 Aldine Westfield Rd Spring, TX 77373	7 Amount of contribution (\$) \$1700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rod Hammer Contributor address; City; State; Zip Code 3939 N Rondelet Dr Spring, TX 77386	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Les Konikowski Contributor address; City; State; Zip Code 142 Remington Rd Huntsville, TX 77340	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ed Jones Contributor address; City; State; Zip Code 40 Waterway Ct Spring, TX 77380	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bret Strong <hr/> 6 Contributor address; City; State; Zip Code 3 Birchbrook Ct The Woodlands, TX 77380	7 Amount of contribution (\$) \$1700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/13/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dane & Kim Cantwell <hr/> Contributor address; City; State; Zip Code 142 N Shawnee Ridge Cir The Woodlands, TX 77382	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omero Del Papa <hr/> Contributor address; City; State; Zip Code 6 Cluney Ct The Woodlands, TX 77382	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph & Suzanne Sutton <hr/> Contributor address; City; State; Zip Code 1919 Milam Street, Ste 2400 Houston, TX 77002	Amount of contribution (\$) \$10000.00
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.		

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:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 10/18/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Terrell 6 Contributor address; City; State; Zip Code 18715 Croftsmill Dr New Caney, TX 77357	7 Amount of contribution (\$) \$425.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/23/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew Beckerman Contributor address; City; State; Zip Code 2424 Honea Egypt Rd Magnolia, TX 77354	Amount of contribution (\$) \$6800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zach & Rachel Richmond Contributor address; City; State; Zip Code 6 Wild Ginger Ct The Woodlands, TX 77380	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan Garza Contributor address; City; State; Zip Code 1014 Forestburg Dr Spring, TX 77386	Amount of contribution (\$) \$800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Furches <hr/> 6 Contributor address; City; State; Zip Code 33026 Sawgrass Ct Magnolia, TX 77354	7 Amount of contribution (\$) \$1700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/23/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan & Christie Miller <hr/> Contributor address; City; State; Zip Code 28647 Lockridge View Dr Spring, TX 77386	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jomo K. Washington <hr/> Contributor address; City; State; Zip Code 13710 Lake Livingston Dr Houston, TX 77044	Amount of contribution (\$) \$425.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wayne & Missy Herndon <hr/> Contributor address; City; State; Zip Code 319 South Silvershire Cir Spring, TX 77381	Amount of contribution (\$) \$1700.00
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.		

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:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 10/27/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmine & Gabriella Falcone 6 Contributor address; City; State; Zip Code 38 Leeward Cove Dr The Woodlands, TX 77381	7 Amount of contribution (\$) \$1500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/27/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald & Pamela Glaze Contributor address; City; State; Zip Code 4488 Morgan Rd Bedias, TX 77831	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farouk Shami Contributor address; City; State; Zip Code 66 Windward Cove The Woodlands, TX 77381	Amount of contribution (\$) \$3400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Sumner Contributor address; City; State; Zip Code 40006 Freemont Road Magnolia, TX 77354	Amount of contribution (\$) \$450.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 10/30/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lianne Chang 6 Contributor address; City; State; Zip Code 3802 West Benders Landing Blvd Spring, TX 77386	7 Amount of contribution (\$) \$1700.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/01/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph & Jude Compofelice Contributor address; City; State; Zip Code 18 Netherfiled Way The Woodlands, TX 77382	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Apartment Association PAC Contributor address; City; State; Zip Code 4810 Westway Park Blvd Houston, TX 77041	Amount of contribution (\$) \$850.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Mannigel Contributor address; City; State; Zip Code 1 Waterway Court, Unit 3D Spring, TX 77380	Amount of contribution (\$) \$3400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 11/01/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rafael & Marisol Baez 6 Contributor address; City; State; Zip Code 15000 Mansions View Dr, Apt 505 Conroe, TX 77384	7 Amount of contribution (\$) \$425.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/05/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judy Olsen Contributor address; City; State; Zip Code 11079 S Hidden Oaks Conroe, TX 77384	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmine & Gabriella Falcone Contributor address; City; State; Zip Code 38 Leeward Cove Dr The Woodlands, TX 77381	Amount of contribution (\$) \$1200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenda & David Trifon Contributor address; City; State; Zip Code 8505 Technology Forest Pl, Ste 201 The Woodlands, TX 77381	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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:
2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)
4 Date 12/04/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marty Williams 6 Contributor address; City; State; Zip Code 76 La Jolla Cir Montgomery, TX 77356	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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.

1 Total pages Schedule F1: 28	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 07/17/23	5 Payee name Younglife TX
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 5 Grogans Park Dr, Ste 101A The Woodlands, TX 77380
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Sponsor Clay Shoot Fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Kenneth Hayden	Office sought	Office held
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Date 07/25/23	Payee name Sportsman's Outlet
-------------------------	---

Amount (\$) \$925.00	Payee address; City; State; Zip Code 1710 FM 1960 Bypass East Humble, TX 77338
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Auction Item for Constable Hayden Campaign
	<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 Kenneth Hayden	Office sought	Office held Montgomery Co Constable Pct 4
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Date 07/27/23	Payee name Alphagraphics
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Amount (\$) \$587.00	Payee address; City; State; Zip Code 17126 Stuebner Airline Rd Spring, TX 77379
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description "Save the Date" for Special Friends Dinner Fundraiser Invites
	<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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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 | 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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 07/31/23	5 Payee name AT&T
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6 Amount (\$) \$756.66	7 Payee address; 3431 Rayford Rd Spring, TX 77386	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Campaign Phone
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 07/31/23	Payee name Best Buy
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Amount (\$) \$756.66	Payee address; 1550 Lake Woodlands Dr The Woodlands, TX 77380	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Apple Ipad
	<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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Date 08/02/23	Payee name Top Florist
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Amount (\$) \$199.18	Payee address; 25119 Grogans Mill Rd The Woodlands, TX 77380	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Memorial Flowers
	<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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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 08/09/23	5 Payee name Local Pour
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6 Amount (\$) \$233.62	7 Payee address; City; State; Zip Code 1900 Hughes Landing Blvd, Ste 350 The Woodlands, TX 77381
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Political Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/14/23	Payee name Best Buy
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Amount (\$) \$302.02	Payee address; City; State; Zip Code 1550 Lake Woodlands Dr The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Office Equipment
	<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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Date 08/16/23	Payee name Trulucks
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Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 1900 Hughes Landing Blvd The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Deposit for 2023 Special Friends Dinner / Campaign Fundraiser
	<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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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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 08/16/23	5 Payee name Grand Oaks High School Fishing Team
---------------------------	--

6 Amount (\$) \$1295.47	7 Payee address; City; State; Zip Code 4800 Riley Fuzzel Rd Spring, TX 77386
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Sponsor Fishing Team
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/16/23	Payee name Alphagraphics
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Amount (\$) \$2707.70	Payee address; City; State; Zip Code 17126 Stuebner Airline Spring, TX 77379
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Invitations & Mailing for 2023 Special Friends Dinner Fundraiser
	<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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Date 08/21/23	Payee name The Woodlands Margarita Festival 2023
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Amount (\$) \$368.45	Payee address; City; State; Zip Code 2099 Lake Robbins Dr The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Festival Sponsorship
	<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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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
4 Date 08/21/23	5 Payee name Brett Ligon Campaign	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 558 Pinehurst, TX 77362	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Campaign Contribution
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Brett Ligon	Office sought Office held Montgomery Co. District Attorney
Date 08/21/23	Payee name Wayne Mack Campaign	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 2234 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Campaign Contribution
	<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 Wayne Mack	Office sought Office held Montgomery Co Justice of the Peace Pct 1
Date 08/21/23	Payee name Sheriff Rand Henderson Campaign	
Amount (\$) \$800.00	Payee address; City; State; Zip Code PO Box 1678 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Campaign Contribution
	<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 Rand Henderson	Office sought Office held Montgomery Co. Sheriff

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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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 08/21/23	5 Payee name The Woodlands Firefighter's Foundation
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 130388 The Woodlands, TX 77393
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Sponsor 2023 Bands for Badges Fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/28/23	Payee name Morton's Steakhouse
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Amount (\$) \$253.30	Payee address; City; State; Zip Code 151 Beach Blvd Biloxi, MS 39530
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 2023 Constable / Marshall Conference Dinner
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/31/23	Payee name Refined Systems
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Amount (\$) \$4058.29	Payee address; City; State; Zip Code 27323 W Hardy Rd, Ste 408 Spring, TX 77373
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Security Camera System
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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	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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
4 Date 08/31/23	5 Payee name The Apricity Foundation	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 27 Grand Regency Circle The Woodlands, TX 77382	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Sponsor 2023 Gala
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/01/23	Payee name Academy Sports & Outdoors	
Amount (\$) \$783.69	Payee address; City; State; Zip Code 1360 Lake Woodlands Dr The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Auction items for annual fundraiser
	<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
Date 09/10/23	Payee name Gramaldi's Pizza	
Amount (\$) \$195.75	Payee address; City; State; Zip Code 20 Water Way Ave The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Political Dinner Meeting
	<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

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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
4 Date 09/16/23	5 Payee name Pappasito's	
6 Amount (\$) \$373.18	7 Payee address; City; State; Zip Code 18101 I-45 South Conroe, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Political Dinner Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/17/23	Payee name Graphic Results	
Amount (\$) \$3166.31	Payee address; City; State; Zip Code 6315B FM 1488 Rd, Ste 227 Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Gifts / Laser Etching for Annual Special Friends Dinner Fundraiser
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/19/23	Payee name TWRW	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 7294 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
4 Date 09/20/23	5 Payee name HEB	
6 Amount (\$) \$241.54	7 Payee address; City; State; Zip Code 7988 FM 1488 Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Food / Supplies for Woodlands High School Football Team Event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought	Office held
Date 09/26/23	Payee name Tammy McRae Campaign	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 10 Capshaw Ct Conroe, TX 77385	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Campaign Contribution
	<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
Date 09/26/23	Payee name The Texas Youth Summit	
Amount (\$) \$1000.00	Payee address; City; State; Zip Code PO Box 8105 Spring, TX 77387	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Donation - Sponsor 2023 Youth Summit
	<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
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.

1 Total pages Schedule F1:		2 FILER NAME Ryan M. Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 09/27/23		5 Payee name Academy Sports & Outdoors			
6 Amount (\$) \$330.14		7 Payee address; City; State; Zip Code 1360 Lake Woodlands Dr The Woodlands, TX 77380			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Shirts with campaign logos		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	

Date 09/30/23		Payee name Torchy's			
Amount (\$) \$205.93		Payee address; City; State; Zip Code 1555 Lake Robbins Dr The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by		Description Donation - Food for 2023 Texas Youth Summit Security Personnel		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	

Date 09/30/23		Payee name Monarca Fashion Boutique			
Amount (\$) \$324.75		Payee address; City; State; Zip Code 12373 Scarsdale Blvd # D Houston, TX 77089			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		Description Gifts for Supporters		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	

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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 09/30/23	5 Payee name J&R Originals
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6 Amount (\$) \$259.80	7 Payee address; 758 I-45 North	City; Huntsville, TX 77320	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description Gifts for Supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/01/23	Payee name AAA Riley Fuzzel Storage
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Amount (\$) \$200.00	Payee address; 3201 Riley Fuzzel Rd	City; Spring, TX 77386	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Storage Rental - Campaign Food Trailer
	<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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Date 10/05/23	Payee name Alla Campagna
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Amount (\$) \$321.22	Payee address; 342 West Main Street	City; Fredericksburg, TX 78624	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Dinner for Supporters
	<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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
4 Date 10/13/23	5 Payee name Trulucks	
6 Amount (\$) \$378.87	7 Payee address; City; State; Zip Code 1900 Hughes Landing Blvd The Woodlands, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Political Dinner Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/13/23	Payee name Total Wine & More	
Amount (\$) \$279.16	Payee address; City; State; Zip Code 1900 Lake Woodlands Dr The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Gifts Staff/Supporters
	<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
Date 10/14/23	Payee name Junior League of the Woodlands	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 8686 New Trails Dr The Woodlands, TX 77381	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Sponsor 2023 Holiday Market
	<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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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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 10/16/23	5 Payee name Flemings
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6 Amount (\$) \$340.80	7 Payee address; 1201 Lake Woodlands Dr The Woodlands, TX 77380	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Political Dinner Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/26/23	Payee name Kroger
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Amount (\$) \$560.44	Payee address; 3731 Riley Fuzzel Rd Spring, TX 77386	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Food Pantry Donation to the Interfaith of the Woodlands
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/27/23	Payee name Interfaith of the Woodlands
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Amount (\$) \$1500.00	Payee address; 4242 Interfaith Way The Woodlands, TX 77380	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 10/30/23	5 Payee name Trulucks
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6 Amount (\$) \$19965.93	7 Payee address; 1900 Hughes Landing Blvd The Woodlands, TX 77380	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description 2023 Annual Special Friends Dinner Fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/02/23	Payee name Northwest Pawn
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Amount (\$) \$1425.00	Payee address; 18123 Kuykendahl Rd Spring, TX 77379	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Door Prizes for Special Friends Dinner Fundraiser
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/02/23	Payee name David Eason Campaign
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Amount (\$) \$500.00	Payee address; 809 W Dallas, PO 2326 Conroe, TX 77301	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Campaign Contribution
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name David Eason	Office sought Montgomery Co Constable Pct 2	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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 11/02/23	5 Payee name AAA Riley Fuzzel Storage
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6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 3201 Riley Fuzzel Rd Spring, TX 77386
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Storage Rental - Campaign Food Trailer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/06/23	Payee name Hispanic Conservatives of Montgomery County
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Amount (\$) \$1500.00	Payee address; City; State; Zip Code 15683 E Relza Dr Splendora, TX 77372
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Donation
	<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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Date 11/12/23	Payee name Best Buy
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Amount (\$) \$1082.45	Payee address; City; State; Zip Code 1550 Lake Woodlands Dr The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Staff Christmas Gifts
	<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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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 11/12/23	5 Payee name Best Buy
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6 Amount (\$) \$1082.45	7 Payee address; City; State; Zip Code 1550 Lake Woodlands Dr The Woodlands, TX 77380
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description Staff Christmas Gifts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/12/23	Payee name Best Buy
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Amount (\$) \$1082.45	Payee address; City; State; Zip Code 1550 Lake Woodlands Dr The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Staff Christmas Gifts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/12/23	Payee name Montgomery County Republican Party
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Amount (\$) \$1000.00	Payee address; City; State; Zip Code 921 W Austin St Conroe, TX 77301
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Filing Fee to Run for Office
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 11/12/23	5 Payee name Terra Vino
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6 Amount (\$) \$488.88	7 Payee address; City; State; Zip Code 2520 Research Forest Dr The Woodlands, TX 77381
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Filing Event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/15/23	Payee name Operation Safe Shield
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Amount (\$) \$1000.00	Payee address; City; State; Zip Code 7750 Raymond Stotzer College Station, TX 77845
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/18/23	Payee name Larry Dean
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Amount (\$) \$1015.00	Payee address; City; State; Zip Code 12606 Sinks Canyon Ln Humble, TX 77346
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Gift for Supporter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 | 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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 11/19/23	5 Payee name HEB
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6 Amount (\$) \$568.78	7 Payee address; City; State; Zip Code 3540 Rayford Rd Spring, TX 77386
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Host Departmental Thanksgiving Luncheon
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/19/23	Payee name Walmart
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Amount (\$) \$191.93	Payee address; City; State; Zip Code 1025 Sawdust Rd Spring, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Office Organizational Supplies
	<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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Date 11/20/23	Payee name Total Wine & More
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Amount (\$) \$325.44	Payee address; City; State; Zip Code 1900 Lake Woodlands Dr The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Holiday Gifts
	<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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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 11/20/23	5 Payee name ULTA
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6 Amount (\$) \$221.01	7 Payee address; City; State; Zip Code 1900 Lake Woodlands Dr The Woodlands, TX 77380
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Donation for 2023 Toys for Tots Event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/29/23	Payee name Brother's Pizza
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Amount (\$) \$214.34	Payee address; City; State; Zip Code 2260 Buckthorne Place The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food for Departmental Move / Employees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/29/23	Payee name Marshall's Home Goods
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Amount (\$) \$353.80	Payee address; City; State; Zip Code 371 S Loop 336 W Conroe, TX 77304
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Departmental Office & Restroom Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 11/30/23	5 Payee name American Furniture Warehouse
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6 Amount (\$) \$1320.65	7 Payee address; 12310 I-45 South Conroe, TX 77304	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Department Office Furniture
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/30/23	Payee name Devin Brust
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Amount (\$) \$200.00	Payee address; 16876 Kempwood Montgomery, TX 77316	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Pay for Security - 2023 Toys for Tots Event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/01/23	Payee name The Republic Grille
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Amount (\$) \$253.93	Payee address; 3486 Discovery Creek Blvd Spring, TX 77386	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Political Dinner Meeting
	<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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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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 12/01/23	5 Payee name AAA Riley Fuzzel Storage
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6 Amount (\$) \$200.00	7 Payee address; 3201 Riley Fuzzel Rd	City; Spring, TX 77386	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Monthly Storage Rental - Campaign Food Trailer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/02/23	Payee name Marshall's Home Goods
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Amount (\$) \$432.99	Payee address; 371 S Loop 336 W	City; Conroe, TX 77304	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Department Office Furniture
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/02/23	Payee name American Furniture Warehouse
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Amount (\$) \$785.90	Payee address; 12310 I-45 South	City; Conroe, TX 77304	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Department Office Furniture
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 12/02/23	5 Payee name Northwest Pawn
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6 Amount (\$) \$1410.00	7 Payee address; 18123 Kuykendahl Rd Spring, TX 77379	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Auction Items - 2024 Golf Tournament Campaign Fundraiser
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/04/23	Payee name Pappadeaux
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Amount (\$) \$500.41	Payee address; 18165 I-45 South Conroe, TX 77385	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Annual Training Advisory Board Meeting
	<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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Date 12/07/23	Payee name James Sumner
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Amount (\$) \$5000.00	Payee address; 40006 Freemont Rd Magnolia, TX 77354	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Coordinate & Manage Annual Campaign Fundraisers
	<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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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 12/07/23	5 Payee name Montgomery County
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 501 N Thompson St Conroe, TX 77301
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Donation / Employee Committee Christmas Luncheon
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/07/23	Payee name Walmart
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Amount (\$) \$265.93	Payee address; City; State; Zip Code 1025 Sawdust Rd Spring, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Bicycle Donation - Operation Blue Elf Christmas Event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/07/23	Payee name The Woodlands Chamber of Commerce
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 9320 Lakeside Blvd, Ste 200 The Woodlands, TX 77381
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Sponsor 2024 Taste of the Town Event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
4 Date 12/07/23	5 Payee name HEB	
6 Amount (\$) \$211.32	7 Payee address; City; State; Zip Code 3540 Rayford Rd Spring, TX 77386	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Sponsor Holiday Party
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/10/23	Payee name Laurie's Home Furnishings	
Amount (\$) \$250.06	Payee address; City; State; Zip Code 10730 FM 2920 Tomball, TX 77375	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Christmas Gifts for Clerical Staff
	<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
Date 12/11/23	Payee name Terra Vino	
Amount (\$) \$302.93	Payee address; City; State; Zip Code 2520 Research Forest Dr The Woodlands, TX 77381	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Political Dinner Meeting
	<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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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:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 12/12/23	5 Payee name HEB
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6 Amount (\$) \$192.80	7 Payee address; City; State; Zip Code 3540 Rayford Rd Spring, TX 77386
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description Gifts Cards for Employees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/13/23	Payee name Total Wine & More
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Amount (\$) \$346.29	Payee address; City; State; Zip Code 1900 Lake Woodlands Dr The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Gifts Employees/Supporters
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/13/23	Payee name Adobe Acrobat
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Amount (\$) \$257.27	Payee address; City; State; Zip Code 11501 Domain Dr, Ste 110 Austin, TX 78758
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Annual Software Renewal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 12/29/23	5 Payee name RTIC
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6 Amount (\$) \$561.68	7 Payee address; City; State; Zip Code 20510 Hempstead Rd, Ste 100 Houston, TX 77065
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Tumblers with Campaign Logos
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/31/23	Payee name Space City Storage
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Amount (\$) \$205.00	Payee address; City; State; Zip Code 26400 Kuykendahl Rd, Ste C 180-235 The Woodlands, TX 77375
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Campaign Headquarters Monthly Storage Rental
	<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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Date 01/02/24	Payee name David Eason Campaign
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Amount (\$) \$1250.00	Payee address; City; State; Zip Code 809 W Dallas, PO 2326 Conroe, TX 77301
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Campaign Contribution
	<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 David Eason	Office sought Montgomery Co Constable Pct 2	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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 01/04/24	5 Payee name Square.com
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6 Amount (\$) \$1135.31	7 Payee address; 1455 Market Street, Ste 600 San Fransisco, CA 94103
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Credit Card Processing Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 01/05/24	Payee name Graphic Results
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Amount (\$) \$362.64	Payee address; 6315B FM 1488 Rd, Ste 227 Magnolia, TX 77354
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Laser Drink Tumblers with Campaign Logo
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 01/05/24	Payee name Bryan Christ
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Amount (\$) \$250.00	Payee address; PO Box 558 Pinehurst, TX 77362
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	Description Campaign Contribution
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Christ	Office sought	Office held Montgomery Co Republican Chair
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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.

1 Total pages Schedule F1:	2 FILER NAME Ryan M. Gable	3 Filer ID (Ethics Commission Filers)
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4 Date 01/09/24	5 Payee name The Woodlands Rotary Club
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6 Amount (\$) \$2593.38	7 Payee address; PO Box 7353 The Woodlands, TX 77387	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made by	(b) Description Sponsor 2024 Annual Gala Fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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