

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>11</b>	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR	FIRST	MI	
	Mr. James			
	NICKNAME	LAST	SUFFIX	
	Jim Vonderhaar			
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX			
	[REDACTED] Sugar Land, TX 77478			
Change of Address				
<b>5 CANDIDATE/ OFFICEHOLDER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	
	[REDACTED]			
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR	FIRST	MI	
	Mr. Taylor			
	NICKNAME	LAST	SUFFIX	
	Landin			
<b>7 CAMPAIGN TREASURER ADDRESS</b>	STREET ADDRESS (NO PO BOX PLEASE)			
	[REDACTED] Sugar Land, TX 77498			
(Residence or Business)				
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	
	[REDACTED]			
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officaholder Only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
<b>10 PERIOD COVERED</b>	Month	Day	Year	
	1	28	25	
THROUGH		Month	Day	
		3	24	
		25		
<b>11 ELECTION</b>	ELECTION DATE			
	Month	Day	Year	
		5	3	
		25		
ELECTION TYPE				
<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description				
<input checked="" type="checkbox"/> General <input type="checkbox"/> Special				
<b>12 OFFICE</b>	OFFICE HELD (if any)			
	n/a			
<b>13 OFFICE SOUGHT (if known)</b>				
Sugar Land City Council At Large Position 1				
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE	COMMITTEE NAME		
Additional Pages	<input type="checkbox"/> GENERAL	n/a		
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
<b>GO TO PAGE 2</b>				

**OFFICE USE ONLY**

Date Received **2:38pm**  
**RECEIVED**  
**APR 3 2025**  
 Office of City Secretary  
 City of Sugar Land, TX

Date Hand-delivered or Date Postmarked

Receipt #      Amount \$

Date Processed

Date Imaged

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME  
James Vonderhaar

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,042.79
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 7,257.21
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 100.00

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

  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

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

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

OR

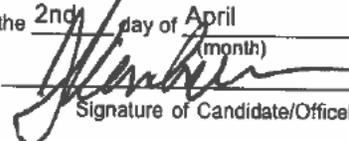
(2) Unsworn Declaration

My name is James Vonderhaar, and my date of birth is \_\_\_\_\_

My address \_\_\_\_\_, Sugar Land, TX, 77478, Fort Bend

(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of Texas, on the 2nd day of April, 2025

  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

<b>19 FILER NAME</b> James Vonderhaar		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,300
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	■ SCHEDULE E: LOANS	\$ 100
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 10,913.32
6.	■ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 9,142.51
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	■ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 129.47
9.	■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 229.47
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

James Vonderhaar

3 Filer ID (Ethics Commission Filers)

4 Date

2/14/25

5 Full name of contributor

Kuzilla Consulting Service

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

7 Amount of contribution (\$)

7,500.00

6 Contributor address;

City;

State;

Zip Code

Sugar Land, TX 77479

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/18/25

Full name of contributor

Bridget Yeung

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

Amount of contribution (\$)

350.00

Contributor address;

City;

State;

Zip Code

Sugar Land TX 77478

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/28/25

Full name of contributor

Deby Donlin

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

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

Sugar Land, TX 77479

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/28/25

Full name of contributor

Kimberley Hodenfield

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

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

Sugar Land, TX 77479

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 A-1 (continued)

Filer Name: James Vonderhaar

4. Date      5. Full Name of Contributor                      6. Contributor Address                                      7. Amount of Contribution

2/28/25	Daphne	Ring	[REDACTED]	Sugar Land	TX	77498	\$50.00
2/28/25	Ed	Crowell	[REDACTED]	Sugar Land	TX	77478	\$500.00
2/28/25	James	Patterson	[REDACTED]	Sugar Land	TX	77478	\$200.00
3/3/25	Carol	Tralie	[REDACTED]	Sugar Land	TX	77478	\$500.00
3/3/25	Jay	Sherman	[REDACTED]	Sugar Land	TX	77478	\$1,000.00
3/5/25	Susan	Useton	[REDACTED]	Sugar Land	TX	77478	\$1,000.00
3/5/25	Waltraud	Springob	[REDACTED]	Sugar Land	TX	77478	\$500.00
3/5/25	Stewart	Jacobson	[REDACTED]	Sugar Land	TX	77478	\$350.00
3/5/25	Jacqueline	Puhl	[REDACTED]	Sugar Land	TX	77478	\$200.00
3/10/25	Hayne	Stringer	[REDACTED]	Sugar Land	TX	77478	\$500.00
3/10/25	Robert	Rolnick	[REDACTED]	Sugar Land	TX	77478	\$150.00
3/13/25	Michael	Vonderhaar	[REDACTED]	Sheridan	WY	82801	\$1,000.00
3/13/25	Linda	Williams	[REDACTED]	Sugar Land	TX	77478	\$1,000.00
3/13/25	Rex	Varn	[REDACTED]	Sugar Land	TX	77479	\$1,000.00
3/13/25	Bradley	Somers	[REDACTED]	Sugar Land	TX	77478	\$1,000.00
3/17/25	Charles	Powell	[REDACTED]	Sugar Land	TX	77479	\$500.00
3/24/25	Rhonda	Spear	[REDACTED]	Sugar Land	TX	77479	\$250.00

# LOANS

# SCHEDULE E

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 E: **1**

2 FILER NAME

**James Vonderhaar**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

**2/7/25**

7 Name of lender

**James Vonderhaar**

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

9 Loan Amount (\$)

**100.00**

6 Is lender a financial institution?  
 Y  N

8 Lender address:

[REDACTED]

City:

State:

Zip Code

**Sugar Land, TX 77478**

10 Interest rate

**0**

11 Maturity date

12 Principal occupation / Job title (See Instructions)

**Retired**

13 Employer (See Instructions)

**n/a**

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address:

City:

State:

Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

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

Loan Amount (\$)

Is lender a financial institution?  
 Y  N

Lender address:

City:

State:

Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address:

City:

State:

Zip Code

not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2	<b>2</b> FILER NAME James Vonderhaar	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 2/19/25	<b>5</b> Payee name Allied Signs	
<b>6</b> Amount (\$) \$1,488.43	<b>7</b> Payee address; City; State; Zip Code Houston, TX 77036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Adverstising Expense	<b>(b)</b> Description Signs
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/8/25	Payee name Allied Signs	
Amount (\$) \$3,236.68	Payee address; City; State; Zip Code Houston, TX 77036	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/26/25	Payee name Art Mueseum TX	
Amount (\$) \$1,345	Payee address; City; State; Zip Code Sugar Land, TX 77479	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Event location
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS - Schedule F-1 (continued)  
 Filer Name: James Vonderhaar

<u>4. Date</u>	<u>5. PAYEE NAME</u>	<u>6. AMOUNT</u>	<u>7. PAYEE ADDRESS</u>			<u>8. PURPOSE &amp; DESCRIPTION OF EXPENDITURE</u>	
Date	Payee	Amount	Address	City	State	Zip	Purpose
2/26/2025	GoDaddy	\$24.83	ONLINE VENDOR				Advertising / Digital Mktg.
3/21/25	GoDaddy	\$42.63	ONLINE VENDOR				Advertising / Digital Mktg.
2/28/2025	Melissa Raju	\$3,550.00	[REDACTED]	Pearland	TX	77584	Consulting
2/28/2025	MR Ji Connections	\$5.00	[REDACTED]	Missouri City	TX	77459	Consulting
3/3/2025	MR Ji Connections	\$752.75	[REDACTED]	Missouri City	TX	77459	Consulting
2/27/2025	State Fare	\$468.00	[REDACTED]	Sugar Land	TX	77479	Event Catering
3/17/25	Square	\$29.14	ONLINE VENDOR				Credit Card Processing Fees

# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: 1	<b>2</b> FILER NAME James Vonderhaar	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
<b>5</b> Date 2/20/25	<b>6</b> Payee name Branding Matters	
<b>7</b> Amount (\$) 1798.46	<b>8</b> Payee address; City; State; Zip Code [REDACTED] Ste. 200, Sugar Land, TX 77478	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description t-shirts
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 3/18/25	Payee name Neumann and Company	
Amount (\$) 7,344.05	Payee address; City; State; Zip Code [REDACTED] Bellaire, TX 77401-4706	
<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description Printed materials
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

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

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

<b>1 TOTAL PAGES SCHEDULE F4:</b> 1	<b>2 FILER NAME</b> James Vonderhaar	<b>3 FILER ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD</b>		\$ 129.47
<b>5 CREDIT CARD ISSUER</b>	Name of financial institution Citi Bank	
<b>6 PAYMENT</b>	(a) Amount Charged \$ 129.47	(b) Date Expenditure Charged 3/19/25
	(c) Date(s) Credit Card issuer Paid April 2025	
<b>7 PAYEE</b>	(a) Payee name QR Code Generator	(b) Payee address; City, State, Zip Code online company - no address information listed
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Advertising Expense	(b) Description Digital marketing
	(c) Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name <span style="float: right;">Office Sought <span style="margin-left: 100px;">Office Held</span></span>	
<b>PAYMENT</b>	(a) Amount Charged \$	(b) Date Expenditure Charged
	(c) Date(s) Credit Card Issuer Paid	
<b>PAYEE</b>	(a) Payee name	(b) Payee address; City, State, Zip Code
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name <span style="float: right;">Office Sought <span style="margin-left: 100px;">Office Held</span></span>	
<b>PAYMENT</b>	(a) Amount Charged \$	(b) Date Expenditure Charged
	(c) Date(s) Credit Card Issuer Paid	
<b>PAYEE</b>	(a) Payee name	(b) Payee address; City, State, Zip Code
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name <span style="float: right;">Office Sought <span style="margin-left: 100px;">Office Held</span></span>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: <b>1</b>	<b>2</b> FILER NAME <b>James Vonderhaar</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>2/7/25</b>	<b>5</b> Payee name <b>Vonderhaar for Sugar Land</b>	
<b>6</b> Amount (\$) <b>100.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Accounting/Banking</b>	<b>(b)</b> Description <b>Initial deposit to open account</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>3/19/25</b>	Payee name <b>QR Code Generator</b>	
Amount (\$) <b>129.47</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>Online Vendor</b>	
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)  Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<b>8</b> 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 <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**