

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 22
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <i>Mr.</i>	FIRST <i>John</i>	SUFFIX <i>C</i>
	NICKNAME <i>"Clay"</i>	LAST <i>Brett</i>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX [REDACTED]	APT / SUITE #	CITY: Houston STATE: TX ZIP CODE: 77005
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	[REDACTED]		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <i>Mr.</i>	FIRST <i>John</i>	SUFFIX <i>C</i>
	NICKNAME <i>"Clay"</i>	LAST <i>Brett</i>	SUFFIX
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX P-CASE) APT / SUITE # [REDACTED]		CITY: Houston STATE: TX ZIP CODE: 77005
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
[REDACTED]			
9 REPORT TYPE	<input type="checkbox"/> January 15 30th day before election <input type="checkbox"/> runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Escalated Modified Reporting Limit <input type="checkbox"/> Final Report (Allan C/OH - FR)		
10 PERIOD COVERED	Month Day Year 1 / 1 / 25		THROUGH Month Day Year 7 / 15 / 25
11 ELECTION	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
12 OFFICE	OFFICE HELD (if any) City Council, City of West University Place	13 OFFICE SOUGHT (if known) City Council, City of West University Place	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	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 John Clayton Brett		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)	\$ 57,550
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 55,133
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,417
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:

(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 Clay Brett and my date of birth is _____

My address is _____
(street) (city) (state) (zip code) (country)

Executed in Harris County, State of Texas on the 17 day of July, 2025

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

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

19 FILER NAME John Clayton Brett		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 57,550
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 41,133
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ —
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 12,087
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 2100
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	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: 12
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date 3/7/25	5 Full name of contributor <i>Patrick Stanley</i> out-of-state PAC (ID# _____) 6 Contributor address: [Redacted] <i>Austin TX 78746</i> City: _____ State: _____ Zip Code _____	7 Amount of contribution (\$) 1,000
8 Principal occupation / Job title (See Instructions) <i>Private Equity</i>		9 Employer (See Instructions) <i>Legacy Star</i>
Date 3/7/25	Full name of contributor <i>Lizzy McVee</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] <i>Austin TX 78752</i> City: _____ State: _____ Zip Code _____	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions) <i>Self-Employed</i>		Employer (See Instructions) <i>Self-Employed</i>
Date 3/7/25	Full name of contributor <i>A. Hancock</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] <i>San Antonio TX 78212</i> City: _____ State: _____ Zip Code _____	Amount of contribution (\$) 200
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>
Date 3/7/25	Full name of contributor <i>Spencer J. Pass</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] <i>San Antonio TX 78255</i> City: _____ State: _____ Zip Code _____	Amount of contribution (\$) 1,000
Principal occupation / Job title (See Instructions) <i>Owner</i>		Employer (See Instructions) <i>Self</i>
<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: 12
2 FILER NAME Clay Brett		3 Filer ID (Ethics Commission Files)
4 Date 3/7/25	5 Full name of contributor Frederick Abbott out-of-state PAC (ID# _____) 6 Contributor address: [Redacted] City: Wynnton TX 77754 State: Zip Code	7 Amount of contribution (\$) 500
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 3/7/25	Full name of contributor Kyle McQuire out-of-state PAC (ID# _____) Contributor address: [Redacted] City: West U TX 77005 State: Zip Code	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Peak 10 Energy
Date 3/7/25	Full name of contributor Nick Maddox out-of-state PAC (ID# _____) Contributor address: [Redacted] City: Houston TX 77056 State: Zip Code	Amount of contribution (\$) 2,000
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Spurston Management
Date 8/7/25	Full name of contributor Ignacio Sosa out-of-state PAC (ID# _____) Contributor address: [Redacted] City: West U TX 77005 State: Zip Code	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Enovon
<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: 12
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date 3/7/25	5 Full name of contributor <i>Ryan McIntyre</i> out-of-state PAC (ID#)	7 Amount of contribution (\$) 250
	6 Contributor address: [Redacted] <i>Bonaton FL 34202</i> City: State; Zip Code	
8 Principal occupation / Job title (See instructions) <i>Construction Manager</i>		9 Employer (See instructions) <i>MES General Contractors</i>
Date 3/8/25	Full name of contributor <i>Charlie Stephenson</i> out-of-state PAC (ID#)	Amount of contribution (\$) 250
	Contributor address: [Redacted] <i>Newberry FL 32669</i> City: State; Zip Code	
Principal occupation / Job title (See instructions) <i>Medical Device Sales</i>		Employer (See instructions) <i>Agogen</i>
Date 3/8/25	Full name of contributor <i>Rachael O'Donnell</i> out-of-state PAC (ID#)	Amount of contribution (\$) 250
	Contributor address: [Redacted] <i>Fulshear TX 77441</i> City: State; Zip Code	
Principal occupation / Job title (See instructions) <i>Retired</i>		Employer (See instructions) <i>Retired</i>
Date 3/8/25	Full name of contributor <i>Donay Doriel</i> out-of-state PAC (ID#)	Amount of contribution (\$) 1,000
	Contributor address: [Redacted] <i>Houston TX 77002</i> City: State; Zip Code	
Principal occupation / Job title (See instructions) <i>Lawyer</i>		Employer (See instructions) <i>Baker Botts</i>
<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: 12
2 FILER NAME Clay Brett		3 Filer ID (Ethics Commission Filers)
4 Date 3/10/25	5 Full name of contributor Jeff Mayotis out-of-state PAC ID# _____	7 Amount of contribution (\$) 1,000
6 Contributor address: [Redacted] Houston TX 77056 City: State: Zip Code		
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 3/10/25	Full name of contributor Jamison Ewert out-of-state PAC ID# _____	Amount of contribution (\$) 500
Contributor address: [Redacted] West Palm Beach FL 33405 City: State: Zip Code		
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Sturges Young
Date 3/11/25	Full name of contributor Chase Bender out-of-state PAC ID# _____	Amount of contribution (\$) 100
Contributor address: [Redacted] FL 32034 City: State: Zip Code		
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 3/12/25	Full name of contributor Matt Stovam out-of-state PAC ID# _____	Amount of contribution (\$) 1,500
Contributor address: [Redacted] West U TX 77005 City: State: Zip Code		
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) Phillips Cole
<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: 12
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/12/25</i>	5 Full name of contributor <i>Matthew Goldberger</i> Contributor address: [Redacted] <i>Apita FL 33458</i>	7 Amount of contribution (\$) <i>250</i>
6 Principal occupation / Job title (See Instructions) <i>Attorney</i>		8 Employer (See Instructions) <i>Self</i>
Date <i>3/14/25</i>	Full name of contributor <i>Becky Eisenberg</i> Contributor address: [Redacted] <i>(West) Houston TX 77008</i>	Amount of contribution (\$) <i>100</i>
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>
Date <i>3/14/25</i>	Full name of contributor <i>Holt Rodman</i> Contributor address: [Redacted] <i>Dallas TX 75269</i>	Amount of contribution (\$) <i>250</i>
Principal occupation / Job title (See Instructions) <i>Partner</i>		Employer (See Instructions) <i>Stephen Rodman</i>
Date <i>3/16/25</i>	Full name of contributor <i>Allison Kordon</i> Contributor address: [Redacted] <i>Ward TX 77005</i>	Amount of contribution (\$) <i>80</i>
Principal occupation / Job title (See Instructions) <i>Parent</i>		Employer (See Instructions) <i>Not Employed</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/25	5 Full name of contributor <i>Michael McDonald</i> out-of-state PAC (ID# _____) 6 Contributor address: [Redacted] <i>Ladsonville FL 32608</i> City: State: Zip Code	7 Amount of contribution (\$) 350
8 Principal occupation / Job title (See Instructions) <i>Builder</i>		9 Employer (See Instructions) <i>Advanced Building Concepts</i>
Date 3/19/25	Full name of contributor <i>John Wohlwend</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] <i>Jacksonville FL 32239</i> City: State: Zip Code	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>Crush-It, LLC</i>
Date 3/20/25	Full name of contributor <i>Gregg Thompson</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] <i>West U TN 37005</i> City: State: Zip Code	Amount of contribution (\$) 2,500
Principal occupation / Job title (See Instructions) <i>Business</i>		Employer (See Instructions) <i>Self</i>
Date 3/25/25	Full name of contributor <i>Gregg Waller</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] <i>West U TX 77005</i> City: State: Zip Code	Amount of contribution (\$) 1,000
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Hunter Andrews Keith</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date 3/30/25	5 Full name of contributor <i>Conn McFadden</i> out-of-state PAC (ID# _____) 6 Contributor address: <i>[Redacted]</i> Houston TX 77005 City: State: Zip Code	7 Amount of contribution (\$) 500
8 Principal occupation / Job title (See Instructions) <i>Refined</i>		9 Employer (See Instructions) <i>Refined</i>
Date 4/1/25	Full name of contributor <i>Louise Layman</i> out-of-state PAC (ID# _____) Contributor address: <i>[Redacted]</i> Houston TX 77008 City: State: Zip Code	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Baker Botts</i>
Date 4/1/25	Full name of contributor <i>Joson Bennett</i> out-of-state PAC (ID# _____) Contributor address: <i>[Redacted]</i> Houston TX 77024 City: State: Zip Code	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Baker Botts</i>
Date 4/1/25	Full name of contributor <i>Russell Lewis</i> out-of-state PAC (ID# _____) Contributor address: <i>[Redacted]</i> Houston TX 77005 City: State: Zip Code	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Baker Botts</i>

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Clay Brett		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/25	5 Full name of contributor Mary Stokes Contributor address: [REDACTED] City: Houston TX State: Zip Code: 77002	7 Amount of contribution (\$) 250
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Baker Botts
Date 4/2/25	Full name of contributor Kevin Kopelov Contributor address: [REDACTED] City: New York NY State: Zip Code: 10019	Amount of contribution (\$) 5,000
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) TD Securities
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/6/25</i>	5 Full name of contributor <i>James Marshall</i> 6 Contributor address: [Redacted] <i>Houston TX 77005</i>	7 Amount of contribution (\$) <i>250</i>
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) <i>Baker Botts</i>
Date <i>4/7/25</i>	Full name of contributor <i>Patrick Stanley</i> Contributor address: [Redacted] <i>Austin TX 78746</i>	Amount of contribution (\$) <i>1,000</i>
Principal occupation / Job title (See Instructions) <i>Private Equity</i>		Employer (See Instructions) <i>Legacy Star Capital Partners</i>
Date <i>4/8/25</i>	Full name of contributor <i>Cory Kennedy</i> Contributor address: [Redacted] <i>Houston TX 77055</i>	Amount of contribution (\$) <i>1,000</i>
Principal occupation / Job title (See Instructions) <i>Health Care</i>		Employer (See Instructions) <i>Self</i>
Date <i>4/8/25</i>	Full name of contributor <i>Greg Walker</i> Contributor address: [Redacted] <i>Houston TX 77005</i>	Amount of contribution (\$) <i>1,000</i>
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Hunter Andrews Keith</i>
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/25	5 Full name of contributor <i>Jerod Pierce</i> out-of-state PAC (ID# _____) 6 Contributor address: [Redacted] City: <i>Houston TX</i> State: Zip Code: <i>77005</i>	7 Amount of contribution (\$) 500
8 Principal occupation / Job title (See Instructions) <i>Family Office</i>		9 Employer (See Instructions) <i>Olympic Holdings Investments</i>
Date 4/14/25	Full name of contributor <i>Tyler Stevens</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] City: <i>Charlotte NC</i> State: Zip Code: <i>28211</i>	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Dechert LLP</i>
Date 4/14/25	Full name of contributor <i>David Polansky</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] City: <i>Houston TX</i> State: Zip Code: <i>77005</i>	Amount of contribution (\$) 5,000
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Just Win Consulting</i>
Date 4/15/25	Full name of contributor <i>William Goodwin</i> out-of-state PAC (ID# _____) Contributor address: [Redacted] City: <i>Cat Spring TX</i> State: Zip Code: <i>78933</i>	Amount of contribution (\$) 1,000
Principal occupation / Job title (See Instructions) <i>Geologist</i>		Employer (See Instructions) <i>Esperanza Energy Management</i>
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/20/25</i>	5 Full name of contributor <i>Gregg Thompson</i> out-of-state PAC (ID# _____) 6 Contributor address; City: State; Zip Code <i>[Redacted] Houston TX 77005</i>	7 Amount of contribution (\$) 2,500
8 Principal occupation / Job title (See Instructions) <i>Business</i>		9 Employer (See Instructions) <i>Self</i>
Date <i>4/21/25</i>	Full name of contributor <i>Pend Elliott</i> out-of-state PAC (ID# _____) Contributor address; City: State; Zip Code <i>[Redacted] Houston TX 77005</i>	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Baker Botts</i>
Date <i>4/22/25</i>	Full name of contributor <i>Bryan McDaniel</i> out-of-state PAC (ID# _____) Contributor address; City: State; Zip Code <i>[Redacted] Houston TX 77005</i>	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/24/25</i>	Full name of contributor <i>Clay Brett</i> out-of-state PAC (ID# _____) Contributor address; City: State; Zip Code <i>[Redacted] Houston TX 77005</i>	Amount of contribution (\$) 20,000 <i>(forgiveness of loans)</i>
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Baker Botts</i>
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME <i>Clay Brett</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5/7/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Patrick Starkey</i>	7 Amount of contribution (\$) <i>1,000</i>
6 Contributor address; City; State; Zip Code [REDACTED] <i>Austin TX 78746</i>		
8 Principal occupation / Job title (See Instructions) <i>Private Equity</i>		9 Employer (See Instructions) <i>Legacy Star</i>
Date <i>6/7/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Patrick Starkey</i>	Amount of contribution (\$) <i>1,000</i>
Contributor address; City; State; Zip Code [REDACTED] <i>Austin TX 78746</i>		
Principal occupation / Job title (See Instructions) <i>Private Equity</i>		Employer (See Instructions) <i>Legacy Star</i>
Date <i>7/7/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Patrick Starkey</i>	Amount of contribution (\$) <i>1,000</i>
Contributor address; City; State; Zip Code [REDACTED] <i>Austin TX 78746</i>		
Principal occupation / Job title (See Instructions) <i>Private Equity</i>		Employer (See Instructions) <i>Legacy Star</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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/Bookkeeping 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: 4	2 FILER NAME Clay Brett	3 Filer ID (Ethics Commission Fiers)
4 Date 3/7/25 - 4/3/25	5 Payee name Rexel	
6 Amount (\$) 879.30	7 Payee address: 540 Couper St. Ste. 200	City; State; Zip Code Palo Alto CA 94301
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule): Fundraising Expense	(b) Description Donor Portal
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office sought West U City Council
Date 4/3/25	Payee name Universal Signs - Business	Office held West U City Council
Amount (\$) 290.-	Payee address: 7825 Highway 6 South	City; State; Zip Code Houston TX 77093
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): Advertising Expense	Description Yard Signs
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office sought West U City Council
Date 4/4/25-4/24/25	Payee name Rexel	Office held West U City Council
Amount (\$) 515.3	Payee address: 540 Couper St. Ste. 200	City; State; Zip Code Palo Alto CA 94301
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): Fundraising Expense	Description Donor Portal
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office sought West U City Council
		Office held West U City Council

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1: **4** 2 FILER NAME: **Clay Brett** 3 Filer ID (Ethics Commission Filers):

4 Date: **4/7/25** 5 Payee name: **Apiron Strategies**

6 Amount (\$): **13,249** 7 Payee address: **800 W. 47th St. #200** City: **KC** State: **MO** Zip Code: **64112**

8 PURPOSE OF EXPENDITURE: (a) Category (See Categories listed at the top of this schedule): **Advertising + Polling** (b) Description: **Mail + Poll**

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense.

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: **Clay Brett** Office sought: **West U. City Council** Office held: **West U. City Council**

Date: **4/7/25** Payee name: ~~Clay Brett~~ **Ap Media**

Amount (\$): **7,770** Payee address: **800 W. 47th St. #200** City: **KC** State: **MO** Zip Code: **64112**

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): **Advertising** Description: **Design**

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense.

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: **Clay Brett** Office sought: **West UCC** Office held: **West UCC**

Date: **4/7/25** Payee name: **The Political Firm**

Amount (\$): **4,200** Payee address: **5555 Hitter Ave** City: **Baton Rouge** State: **LA** Zip Code: **70808**

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): **Advertising** Description: **Streaming Capacity**

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense.

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: **Clay Brett** Office sought: **West UCC** Office held: **West U. City Council**

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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 Expenses	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1 4	2 FILER NAME Clay Brett	3 Filer ID (Ethics Commission Filers)		
4 Date 4/7/25	5 Payee name Remington Research			
6 Amount (\$) 1,988.9	7 Payee address: 524 Walnut St. 230	City: KC	State: MO	Zip Code 64106
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Design		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office sought West U City Council	Office held West U City Council	
Date 4/18/25	Payee name Axiom Strategies			
Amount (\$) 10,454	Payee address: 800 W. 47th St. #200	City: KC	State: MO	Zip Code 64112
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Mail		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office sought West U City Council	Office held West U.C.C.	
Date 5/3/25	Payee name Meta			
Amount (\$) 361.85	Payee address: 1 Hacher Way	City: Menlo Park	State: CA	Zip Code 94025
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Social Media		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	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: <i>4</i>	2 FILER NAME: <i>Oley Brett</i>	3 Filer ID (Ethics Commission Filers)
4 Date: <i>5/2/25</i>	5 Payee name: <i>Remington Research</i>	
6 Amount (\$): <i>1,485.08</i>	7 Payee address; City; State; Zip Code: <i>524 Walnut St 240 Kansas City MO 64106</i>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule): <i>Advertising</i>	(b) Description: <i>Text</i>
	(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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
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
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
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

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 3	2 FILER NAME: Clay Britt	3 FILER ID (Ethics Commission Filer):
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 7100
5 CREDIT CARD ISSUER	Name of financial institution Visa	
6 PAYMENT	(a) Amount Charged \$ 175	(b) Date Expenditure Charged 2/19/25
7 PAYEE	(a) Payee name Sticker Mule	(b) Payee address; City, State, Zip Code 330 Forest Ave. Amsterdam NY 12010
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Buttons + Stickers
(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 Clay Britt	Office Sought / Office Held City Council, West U Place / City Council, West U Place
PAYMENT	(a) Amount Charged \$ 2,165	(b) Date Expenditure Charged 3/4/25
PAYEE	(a) Payee name Edgerton Strategies	(b) Payee address; City, State, Zip Code 900 Big Horn Ave Westland WY 82401
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Website
(c) <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 Clay Britt	Office Sought / Office Held City Council, City of West U Place / City Council, City of West U Place
PAYMENT	(a) Amount Charged \$ 617	(b) Date Expenditure Charged 3/18/25
PAYEE	(a) Payee name Universal Signs + Banners	(b) Payee address; City, State, Zip Code 7825 Highway 6 S Houston TX 77093
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Signs
(c) <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 Clay Britt	Office Sought / Office Held City Council, City of West U Place / City Council, City of West U Place

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-----------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Printing Expense | Travel In District |
| Contributions/Donations Made By | GR/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

1 TOTAL PAGES SCHEDULE F4: 3	2 FILER NAME: Clay Brett	3 FILER ID (Ethics Commission Filers):
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 2100
5 CREDIT CARD ISSUER	Name of financial institution Visa	
6 PAYMENT	(a) Amount Charged \$ 1,201.90	(b) Date Expenditure Charged 4/2/25
7 PAYEE	(a) Payee name Meta	(b) Payee address: City, State, Zip Code 1 Hacker Way Menlo Park CA 94025
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Ads
	(c) Check if travel outside of Texas. Complete Schedule 1. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office Sought City Council, City of West U.C.C.
PAYMENT	(a) Amount Charged \$ 5,227	(b) Date Expenditure Charged 4/18/25
PAYEE	(a) Payee name Asian Strategies	(b) Payee address: City, State, Zip Code 800 W. 47th KC MO 64112
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Mail
	(c) Check if travel outside of Texas. Complete Schedule 1. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office Sought West U.C.C.
PAYMENT	(a) Amount Charged \$ 431.01	(b) Date Expenditure Charged 4/18/25
PAYEE	(a) Payee name Remington Research	(b) Payee address: City, State, Zip Code 524 Walnut St 730 KC MO 64106
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Text
	(c) Check if travel outside of Texas. Complete Schedule 1. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Clay Brett	Office Sought West U.C.C.

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solidation/Pundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Contributing 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

1 TOTAL PAGES SCHEDULE F4: 3	2 FILER NAME: Clay Brett	3 FILER ID (Ethics Commission Filers):
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 2106
5 CREDIT CARD ISSUER	Name of financial institution Visa	
6 PAYMENT	(a) Amount Charged \$405.63	(b) Date Expenditure Charged 4/24/25
7 PAYEE	(a) Payee name Remington Record	(b) Payee address; City, State, Zip Code 524 Walnut St 240 KC MO 64106
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Advertising	(b) Description Text
(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 Clay Brett	Office Sought / Office Held West U.C.C. / West U.C.C.
PAYMENT	(a) Amount Charged \$ 720	(b) Date Expenditure Charged 4/24/25
PAYEE	(a) Payee name The Political Firm	(b) Payee address; City, State, Zip Code 5555 Hilton Ave Baton Rouge LA 70808
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Advertising	(b) Description Text
(c) <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 Clay Brett	Office Sought / Office Held West U.C.C. / West U.C.C.
PAYMENT	(a) Amount Charged \$ 2,145	(b) Date Expenditure Charged 4/24/25
PAYEE	(a) Payee name Meta	(b) Payee address; City, State, Zip Code 1 Hudson Way Menlo Park CA 94025
PURPOSE OF EXPENDITURE	(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 Ads
(c) <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 Clay Brett	Office Sought / Office Held City Council West U /

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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 | 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 G:	2 FILER NAME <i>Clay Brett</i>	3 Filer ID (Ethics Commission Filers)	
4 Date <i>1/31 - 3/26</i>	5 Payee name <i>Texas Campaigns</i>		
6 Amount (\$) <i>2,100</i> <small>Reimbursement from political contributions intended</small>	7 Payee address; City; State; Zip Code <i>2711 Grants Lake Blvd #151 Sugarland TX 77419</i>		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	(b) Description <i>Field Work</i>	
	(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 <i>Clay Brett</i>	Office sought <i>City of West U Place, City Council</i>	Office held <i>City of West U Place City Council</i>
Date	Payee name		
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description
	(c) <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	Payee name		
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description
	(c) <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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